

Weds 18th November 2015 6-7.30pm Hill Top Community Room

Attending: Jenny Webster (Community Manager/ Chair), Lisa Nolan (Practice Manager)

AW, RR, SAR, JB, J & GP, SO, MB, JB, ST

Apologies Dr Katie Pieroni

Guests: Mark Drury, Gail Lett, Oldham Clinical Commissioning Group (CCG)

Agenda items:

1. **Introductions and confidentiality.** Welcome to those who attend, short introductions around the group. Outline and purpose of the group, and the need for confidentiality

2. **Surgery Update:** - Staff updates, services, patient projects, Diabetes Group. LN
 - Lisa outlined the current GP list with Dr Pieroni, Dr Foster, Dr Elliott, Dr Adeyemi, Dr Patterson working a Tuesday evening, Dr Scott is joining us on a Fridays. The practice uses as few locums as possible but sometimes this is necessary to cover sickness or annual leave.
 - Due to feedback from patients the practice has changed the telephone triage system and now has returned to releasing on-the-day urgent appointments from 8am. Patients can ring at 8am for an urgent on the day appointment and either be booked in for this or have a telephone consultation with a GP who will then decide if the patient needs to be seen in the surgery or if there is alternative appropriate clinical care.
 - **NHS111** This service has now taken over from the Out of Hours. Patients are able to call 111 for health advice over the phone.
 - Patients in the group expressed dissatisfaction with access to the current appointment system with a difference in experience across the group. The surgery has had a reasonable amount of staff sickness and is working to strengthening the regular GP list and amount of appointments available.
 - With the PPG further to previous meetings the Surgery has started a **Diabetes Support Group** which meets on the Third Wednesday every month 2-3.30pm with speakers on different areas. So far we have had input from the Practice Nurse, Oldham Community Leisure and Diabetes UK with future months looking at Healthy minds, retinopathy screening and diabetic footchecks.

3. **APMS Contract review – Mark Drury, Gail Lett – Oldham Clinical Commissioning Group (CCG)**
 - Gail and Mark outlined that the surgery was under a 5 year time limited contract and the time was coming when the contract would expire or be reprocured (renewed). At present the CCG recommended that the surgery would continue and so be reprocured. This means that the contract would be put forward for retender. The surgery could be run by the current providers, Hope Citadel Healthcare or by another successful bidder.

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As part of the reprourement process the CCG is required to hold a patient consultation in order to collect patient views and so is sending the letters and surveys to all patients over 16.

- Mark and Gail presented the group with sample letters and surveys to be sent to patients over the next week.
The letter and survey ask if patients would prefer the option of
 1. List dispersal (the practice closes and patients are able to choose an alternative local surgery)
 2. Reprourement (the practice continues and the contract is renewed).

The CCG preferred option is option 2 of reprourement. Everyone was encouraged to fill in the questionnaires provided.

- **The PPG expressed concern that the practice would close if negative comments were made**
- It was confirmed that there were no plans to close the practice but the CCG would be grateful to hear about things which weren't working which meant that the new contract may be able to direct funding to those areas
- **The PPG found it difficult to understand the letter and some of the terms used**
- Mark and Gail confirmed that it was a complicated process but the CCG had tried to make the information as clear as possible.

The PPG were surprised that such a new practice could possibly be shut or taken over by another provider.

- Gail explained that it was due to a different type of contract. Most GP's hold a GMS (General Medical Services) contract. This is between the GP and the commissioner and is open ended and so usually GPs continue until retirement or other circumstances. Other contracts include PMS (Personal Medical Services) and APMS contracts (Alternative Provider of Medical Services). Hill Top Surgery is an APMS contract.
- Jenny assured patients that whilst it may be a surprise or shock to patients having heard recently about this, the practice always knew it held a 5 year contract and that this process would have to be gone through at the end of the contract period. The surgery is determined to bid for the reprourement of the contract and will continue to provide the usual service during the reprourement period.

4. AOB

- Friends and Family test to be reviewed at the next meeting
- Date of the next meeting: TBC.