



17th July 2023 7pm

Robertsbridge Club

Attendees: Martine Blaser-Smart (Chair) , Alison Sarson (minutes) , David Faithfull, Stephen Hardy, John Schultz, Keith McPherson, Karen Collier-Keywood, Lisa Wallace, Sarah Brighton, Sue Peters, Elodie Lanworn, Steve MacDonald, Libby Looseley

Items:

1. Welcome and Apologies

Martine opened the meeting and welcomed the group.
Apologies from Jenny Daniels, Annette Hawkins, Amanda Baldock-Apps, Janet Stone, Chips Bishop, Sue Prochak, Sara Stoner.

2. Minutes of last meeting

There were no minutes of the last meeting as this had been a briefing by Dr Sewell, who had provided and circulated a handout of his briefing at the time. The handout is available on the website.

3. Update on New Surgery

This important update was due to be presented by Libby, who was called away at the last minute. In her absence Martine read a note of the points Libby had intended to make. To start Martine explained the acronyms that would be in the note.

ICB - Sussex Integrated Care Board
PCN - Primary Care Network
CCG - Clinical Commissioning Group
RPI - Retail Price Index

The developer (Starnes) has indicated that due to hugely rising costs in the building industry the price agreed in 2018 was no longer sufficient to cover the build and they were looking for an increase in funding equating to the increased RPI since 2018. The surgery is supportive of the request.

Martine told the meeting that having been informed of the above, she had met with John (Deputy Chair) and Jenny (Secretary) to discuss composing a response to the ICB from the PPG in support of providing additional funding. The letter was sent on behalf of the PPG – a copy was passed around for members to read.

Sue asked if Huw Merriman MP should be involved and was informed by Martine that he had been copied into the letter.

Martine informed the meeting that the subject of the new surgery in Robertsbridge would be discussed at the ICB Board Meeting on the 25th of July.

John spoke about the need to inform the media and Martine confirmed that this issue had been alluded to in the letter from the PPG to the ICB.

A discussion continued about the potential impact of the financial issues raised in relation to the new surgery:-

John asked what would happen if no more money is made available for the building of the surgery. Steve M said he thought that as the NHS has just had a 6% pay rise for staff imposed by the Government without extra funding provided to cover it, the ICB could prioritise Robertsbridge and find the money, stop the development, or suggest a smaller building with the



same allocation of funding, deferring the decision on any increase for several years. He agreed it was unlikely the ICB have any uncommitted finances.

Keith pointed out that it is the ICB who will negotiate with the developers, and whilst the GP's may comment, they are not involved in the discussion at the ICB on finance.

(Libby joined the meeting)

Steve H suggested that any discussion should focus on the inadequacy of the current situation. He asked if the developer's financials and profit had been scrutinised. Additionally, the model of payment over 25 years should be challenged, as well as the GP's looking at their own finance model.

Libby confirmed that the financials had been examined in detail by the ICB and District Valuer when the health centre was approved in 2017. The District Valuer is the specialist property arm of the Valuation Office Agency (VOA), providing independent, impartial, valuation and property advice across the public sector. They ensure the government get best value rent, in line with the market, from GP surgery landlords and developers. Starnes have been fully transparent with the ICB and provided detailed figures for their finance team and the District Valuer to review. They have provided the same to Rother District Council who are having an independent financial review as part of the planning process.

Steve H suggested an option of formulating an alternative financial package where there is a longer lease i.e. 30 or more yrs. Libby explained that the NHS have certain rules and regulations in relation to rent reimbursement and lease terms but she would suggest this to the ICB.

Huw Merriman MP had been in contact and was supportive, however whilst Prof. Chris Witty who had visited the surgery recently had been amazed at the work done in such a small surgery, he was unable to get involved.

Libby stated the matter will go to the ICB on 25th July. The ICB Estates Manger will present the case to the meeting and Libby will contact the ICB following day to find out the decision.

Steve M asked about the lease on the current practice building. Libby said that the lease was due to expire at the end of this year, but the practice is holding off on renewing this until the decision on planning permission for the new building. The lease renewal is a costly and time-consuming matter, and on the last occasion took a year to sort out.

Martine then informed the meeting of the good news that the Robertsbridge branch of Boots Chemist had had the lease renewed for 5 years.

4. Questionnaire and Feedback on text sent on the 5th July

Libby informed the meeting that a questionnaire was being circulated by text message that related to access to Practice services, with a letter version to those who did not have a mobile phone registered with the surgery.

PPG members felt that the surgery would get a better response to a questionnaire sent by e mail, but Libby explained this presented technical difficulties as the practice does not normally hold patient emails, The text has a link to the questionnaire which should be relatively easy for people to understand and follow.

5. Patient issues

Martine raised an issue about a 102-year-old patient not getting a home visit. Libby said that home visits are subject to mobility rather than age and the patient needs to advise reception at the time and this can be arranged.

John asked about patient waiting times for non-urgent appointments and advised that he was told it was six weeks. Libby confirmed that it had peaked at 6 weeks but was coming down. The



reception team have seen a reduction in calls following the communication to patients about self-help, care navigation and capping appointments and this is reducing the waiting time. The more patients that can be encouraged to try the alternative services, the lower the waiting time will be. The surgery has also changed its ratio of pre-book and triage appointments so there are now equal numbers each day. This will also have an impact. The surgery will continue to monitor and adjust accordingly.

Steve M commented on the fact that increased waiting times were a necessary way of ensuring the GPs and staff are safe and not overworked and was in line with BMA safe working recommendations.

6. AOB

John asked about appointment cancellations. Libby said the most efficient way to do this is via the NHS app, as this will automatically update the system. E mails and phone calls take staff time and are slower as they update the system manually.

Martine said at the next meeting we will discuss how the PPG can help the surgery and all present agreed that some kind of workshop for patients on how to use the NHS App is a good idea.

David asked about having a flow chart designed to help patients who are confused about the procedures for making appointments or getting advice. This resulted in further support for a workshop on the NHS app, as this is where the information is. Martine agreed to include this in the action plan.

Martine asked about getting some DISC (dementia support group) posters – and that DISC. is a helpful and supportive group who meet in the village hall. David will send the details to Elodie for inclusion on the PPG Facebook page and also details to John for inclusion in his e mail to village seniors. Libby said the detail was on the practice website as well.

Sue asked if the form for sharing health information can go on the website, so it can be easily printed. Libby to look at this.