

RIVER WEY AND FERNS MEDICAL PRACTICE

PPG Merger Meeting Tuesday 19th January 2021 1-2pm

<p>Attendees: Dr Parijat Roy (GP Partner River Wey) Dr Ishmail Boakye-Acheampong (GP Partner River Wey) , Dr Vincent Koh (GP Partner Ferns Medical) , Dr Victoria Collins (GP Partner Ferns Medical) , Anne Green (Practice Manager River Wey) , Hannah Lawrence (Business Manger Ferns Medical) , June Jasper (Administrator Ferns Medical) , Roy Magee, Isabel Hyde, Bill Dick, John Hope, Tania Tirraoro, Theresa Date, David Rawlings, Cllr Roger Blishen, Steve Clark, Alyson Buckle.</p> <p>Apologies. Mark Ryalls, Gaynor Hardy (Practice Manager Ferns Medical) , Nigel Packer</p> <p>Chair: Bill Dick</p> <p>Minutes: Anne Green</p>	
<p>AGENDA</p> <ul style="list-style-type: none">• Patient Questions in relation to the merger of River Wey and Ferns Medical Practice	
<p><u>Roy Magee</u></p> <p>1. Be curious to know if the Health Centre and Surgery staff have been vaccinated and if not, are they moving up to the front of the line in the queue for the vaccine. Very grateful for concern re Covid vaccinations but will come back to Covid questions at the end, time permitting. Aiming to focus questions on the merger of the two practices.</p>	
<p><u>Theresa Date</u></p> <p>2. Will the merged practice be using the AskmyGP programme currently used by River Wey?</p> <p>Yes. Ferns Medical Practice started using this In November 2020, moving towards parity as the two practices work together before the merge and to integrate systems. GPs, practice nurses, staff and patients all have had good experience of using the system at the point of merging. Both practices finding it successful using askmyGP and share learning from it with each other.</p>	
<p><u>John Hope</u></p> <p>3. Do both practices have the same view on CCG merger?</p> <p>Yes, both practices are aligned in their views on the CCG merger. Discussion had with Dr Roy and Dr Koh prior to voting as well as being discussed with the other partners. Although the CCG merger is complex issue there were many positive reasons for voting in favour of it and each of the five CCGs merging has something to bring to the newly formed organisation.</p> <p>4. Doctors and staffing, services offered – Patient issue. Continuity of doctors/staff with patients and continued services between the practices. <i>Suggest a goal is for the merger to be seamless as far as patients concerned, accessibility to good treatment the key concern.</i></p> <p>All services will be continued as usual. Each practice can bring additional services to the merged practice, i.e. coil/implants, family planning clinics, and increasing the ability to offer training for new doctors.</p> <p>4.1. What issues are there that needs to be resolved? Retention, recruitment, others (eg use of locums/agency staff), are terms and conditions (e.g. workload and overtime and</p>	

salaries/drawings in line? Patient want accessibility to good services and continuity of good doctors and services

Both practices have already engaged with various bodies including NHS commissioners; North East Hants & Farnham Clinical Commission Group (CCG) our Local Medical Council (LMC) for Surrey and Sussex and an HR consultancy firm. Staff salaries will be brought in to line. Contracts aligned. Consultation period with staff started on 11th January 2021. We may still need to use locums at times but merging will build resilience amongst current staff members. No redundancies will be made. The newly merged practice will be known as Farnham Park Health Group A different name but there shouldn't be any other impact on patients.

4.2. Who is resolving issues /how?

Practice Managers and Partners who meet at least weekly, HR consultancy help from NHS South Central and West Commissioning Support Unit (CSU) Help and advice also from the LMC and CCG/Primary Care Support England (PCSE) Team, who approved the merger in September 2020

5. Processes and procedures – Patient issue. What will patients see that is different? How will this be communicated?

Hopefully very little difference to patients- but a greater choice of GPs, nurses and HCAs to see. We will be able to work at scale, offer additional services and a mixture of clinicians. CCG and PCSE are supporting communication with patients – every patient will receive a letter informing them of the merger. Local MPs, councilors and stakeholders will also be included, as well as messages on our websites.

6. Between the practices. What issues are there that needs to be resolved? Premises & equipment, practice appointment scheduling, other admin, finance and IT to be aligned. Who is resolving? -

A “Merger Tracker” is regularly reviewed at the weekly meeting with Partners and practice managers. All areas are subdivided in to sections such as IT, communications, workforce, legal etc. Practice managers meet weekly in addition to this and there are regular updates with the CCG. Partners and managers are taking responsibility for areas in order to distribute the workload and use staff in areas of expertise. Working groups within the practice have been formed, including nursing, reception, administration.

Isabel Hyde

7. Could the 'ask my GP' site be enabled to allow people to type a message at weekends , so on Monday morning all they do is send it. At present it won't accept it at the w/e?
Agreed to leave this question for discussion at a later date.

8. Do the two practices as businesses have the same aims and philosophies?

Yes we do. Before the decision was made for the practices to merge, the partners spent some time discussing this as the aim and ethos of the two practices had to be aligned to take the merger forward successfully

9. Might there be tensions merging two businesses into one as the clientele have differed in the past, and the hierarchy might cause unrest??

Meeting of the partners, prior to merger to establish our aims and vision were part of our initial merger discussion

10. Are there any financial issues?

Advice sought from the outset from accountants and LMC. Funding follows practice list size and services offered. There are no changes to this.

We hope to offer efficiencies the way we're working. With a larger and more resilient workforce, which will be cost efficient.

Patient to GP ratio equates to approx. 2,000 patients per full time GP.

Discussions around the demographics of the population of the two practices. Figures can be run off to look at this in more detail.

AskmyGP software gives a good statistics of workload coming in and how it comes in.

This allows us to plan our structure, optimise and plan our demands and capacity.

Health Gps.co.uk gives details of patient demographics and population

Current bulge is in the 50-59 categories. It is however an aging population throughout the country and services need to adapt to accommodate this.

The Ferns Medical Practice has a higher proportion of students, as they offer GP services to the University of Creative Arts (UCA) in Farnham.

Cllr Roger Blishen

1. There are three Doctors' Practices in Farnham Hospital, located all neatly in a single row. Logistically it would make sense to join all three together now, not just the two planned to Merge at present, our own Ferns Practice with the River Wey one, and leaving the 3rd. one out. Presumably joining all three practices together would save a substantial sum of Administration and Service costs. What is the rationale and logic in just Merging two of the three practices, and leaving the third one out in the cold please? Are you anticipating making any staff redundancies by doing that? Will you still be using both waiting rooms and their Reception staff, or are those being changed/merged at this time as well?

There have been discussions in the past but this is a partnership decision and at this moment in time, the other practices are happy working as they are. All 5 practices in Farnham work closely together and have done for a number of years. The other Farnham practices are supportive of the merger. There will be no structural changes to the building.

2. I have no doubt that many of the Patients involved will wish to retain their current GPs, and will be concerned to learn that will remain the case..

Patients are free to see or speak to whichever GP they chose, within that GPs current capacity. We aim to keep continuity of care.

3. Are we all keeping the same Practice attendance times as before, or will changes be made to those?

Patients will continue to be able to contact the practice from 0800-1830, Monday to Friday as well as during improved and extended access as contracted by the CCG. Ferns Medical Practice offers a women's health/contraception clinic on Monday evenings as well as some later appointments. River Wey offer early morning nurse appointments 3 days a week from 07:30-8am, as well as some later appointments. These are enhanced services.

Saturday morning appointments continue through FICS which is resourced using clinical staff from Farnham practices.

4. Presumably changes will have to be made to your Emis (sic) site as well

Hannah Lawrence is leading in this and has a date booked for EMIS Web integration, 2 weeks post merge date. Hannah has support from the CCG team as well.

5. Is our Ferns Practice going to start giving our Patients and other Farnham residents their Covid Jabs shortly, or will that be done by the Rowlands Chemist staff instead? I am sure that question will be asked of you, so be prepared to advise accordingly. Also will you be doing any Covid tests as well on site?

See below AOB.

<p>6. Stay Safe Please.</p>	
<p><u>David Rawlings</u> The most recent Care Quality Commission reports showed a good overall rating for both practices and Ferns achieved an outstanding for responsiveness to people’s needs. 1. Are there any KPIs or other metrics used within either practice that will help these levels be maintained or exceeded? Both practices were inspected in November 2019 and achieved a good rating. Practices are inspected by the Care Quality Commission (CQC) under 5 Key Lines of Enquiry (KLOE) which include safe, effective, responsive, caring and well-led. 2. Are there currently any ratios such as Doctor to patient, admin staff to Doctor, or statistics such as patients within age groups, geographic spread? It would be interesting to see how these vary between the two practices There will undoubtedly be some variation of population demographics As above in Q.10</p>	
<p><u>Bill Dick</u> 1. It is understood the 1st April is the target date for the merger, is this now realistic given the COVID effect? Yes our aim is to merge the partnership on 1 April. There may be some elements that logistically cannot be merged on that date, such as the clinical system as previously mentioned, but this will not be affect patient care 2. Who is responsible for the overall management of the merger process? Partners and Practice Managers have overall responsibility. Other staff members will be helping in some aspects and we are with support from the CCG. 3. Has the merger rationale and brief been prepared in detail? Yes, there is the Practice Implementation Plan, which covers each aspect in detail. 4. Are both practice teams – doctors, nursing, reception and administration – all on board? Yes. We involved the whole team as soon as we had approval from the CCG in September 2020. The feedback from staff at this time was that they appreciated being informed at the outset. Meetings are currently being held in smaller working groups and we continue to have positive response from the staff. 5. Have individual responsibilities for all staff been prepared? Yes this has been covered as part of the HR and consultation process, with detailed job descriptions issued to staff. Working groups are looking at processes and procedures 6. Is there anything the PPG members can do to help? The PPG were thanked for their offer of help, Bill Dick in particular for liaising with PPG members and compiling the list of questions for today’s meetings. We will certainly let members know, as we move forward and when help is required.</p>	
<p>AOB Communication to patients – Awareness that not all patients have internet access. A letter will be sent out to all patients, coming from Primary Care Support England, on behalf of both practices. Particular specialism of GPs, how do they sit together and do they complement</p>	

each other

Yes, key point of the, merger was to bring specialist interest together.

What is the structure of the merged practice?

The structure will be a Partnership

Do the Ferns have a Facebook page?

Yes, but not currently active- needs updating.

Accessibility Standards

Practices need to ensure they have working hearing loop signs, use of SMS text message for patients with hearing difficulties, be mindful of an ageing population and the percentage of the population who don't have access to the internet as well as the use of interpreters who can be used via zoom, Cllr Blishen is happy to help with this.

How will the structure of the newly merged practice, relate to Farnham Integrated Care Centre?

The new merged practice will still be part of Farnham Integrated Care Services (FICS) as well as being part of Farnham Primary Care Network (PCN). All working together with the 5 Farnham Practices.

Covid Vaccinations

Covid vaccinations are being given in line with national policy.

Everyone will get contacted. The message is not to call the practice but we will call the patients

Dr Vincent Koh asked how PPG members feel about the merger.

No-one likes change as it disturbs the routine

How will it affect me? Will it affect my relationship with my GP

If it makes sense to practices, then we feel happier, now that we've had this meeting.

Both practices are first class and we are very fortunate

We look forward to being part of the newly merger practice

A big selling point is access to GPs with specialism in different areas

Car Park

Question raised about the car park, will it remain free parking and is there any move to prevent the residents from the houses nearby, using it as this causes lack of space for patients. Do staff have permits/spaces/notices?

Designated spaces for staff parking paid for under the terms of our lease. Ferns staff have a notice on their dashboard stating they are staff, River Wey don't have this.

Commented that maybe this is a subject/project to take forward as a joint PPG group.

If one practice gets overloaded with patients could we shuffle patients around?

From 1st April 2021 we will be merged as one practice and working together

Meeting closed with thanks from the Chair, Bill Dick, River Wey and Ferns PPG group thanking Partners and practice managers for answering their questions and being so open.