



Patient Participation Group Meeting  
Monday 25<sup>th</sup> March 2024

Attendees:

Alan Rule – AR  
Linda Rule – LR  
Shenene Fontenelle-Struthers - SFS  
AT  
Ginette Tweddle – GT

Apologies

Jean Kyle – JK  
Helen Holmes - HH  
David Connolly – DC  
John Cornhill – JC  
Harry Frith – HF

SMG Staff

Dr Jonathan Booth – JB – GP Partner  
Caroline Morris - CM – Assistant Practice Manager  
Nicola Johnson – NJ – Branch Manager NBH  
Paige Hall – PH – HR and Operations Assistant

**1. Introduction**

Dr Booth welcomed everyone back for the next PPG meeting and a copy of the last meeting minutes were handed out for everyone to look over and to discuss anything necessary.

**2. Boundary Expansion**

PH discussed with the group that SMG will be expanding their boundary to cover the Callerton area and some of Throckley/Newburn, nearer to the Newbiggin Hall surgery. A large map was shown to the group which has our current boundary on and a lined marker of where the proposed boundary would be. This

isn't yet finalized and still in the early stages as it needs to go to the local ICB for approval. The group were asked their opinions and any concerns regarding the expansion.

SFS- how many extra patients would this be?

GT- all of the Callerton area – this would be around 3000 homes being built.

NJ- there has been something through the post to say 300 homes are currently being built.

AT – requested a copy of the proposed boundary map to his email. PH to email this across.

### **3. Recruitment**

JB mentioned the new staff updates that have occurred since the last meeting.

CM – we have lost Dr Harris and Dr Eleazu, both moved on to somewhere else.

Dr Joseph Ruddin has been recruited and will work across both sites. Dr Lisa Newton is back from Maternity leave. Dr Laura Thompson is back with us on a Return to Practice scheme, used to work at SMG years ago. Dr Joanne Pilkington will be back around the summer, date pending from maternity leave.

We have 4 new trainee doctors with the surgery until August.

Hannah Dunn, new Paediatric ANP has started across both sites. Big help in the workforce for under 18-year-olds and can see acute illness, babies, child asthma. Hannah will also help the on-call doctor out too.

Dr Liggins and Dr Temple are potential new doctors coming on board.

Gemma and Danielle- our trainee ACPs- clinics will be going on in April – they will be able to see more complex patients that doctors can see and they currently sit between an ANP and a GP. They've currently been doing supervised clinics with a GP to enhance their skills.

LR – asked if the new doctors coming on board will help with the demand of the new boundary?

NJ- there isn't just doctors at the surgery that can help, we have other teams that can provide assistance such as the SPLW team for help with alcohol, health living, mental health, student welfare etc. We have a pharmacy team for help with medication also.

CM- 111 member of staff currently at Saville Medical Group. 48 admin members are within that and 29 of those have been with the practice 10+ years.

### **4. Specialist Clinics at both sites**

NJ- mentioned the specialist clinics we have across both sites. This involves: medical students with Sunderland University – years 1,2 and 3 and also Newcastle University with year 5 students. They will

see the patients and take a history, GP will go in after to supervise and see what to do with the patients and give feedback.

Dr Williams offers a Gynae clinic 1 day a week. Dr Penfold offers a baby clinic for 6-8 week checks. Some GPs do the care home weekly ward rounds. Dr McQuillen and Dr Prince run an Opioid clinic to monitor overuse of drugs- a Pain Management consultant has sat in one of these clinics also to assist. Dr Dow offers a Learning Disability clinic and will do home visits for these if the patients can't come in. Dr Booth has a respiratory clinic alternating at both sites weekly. Dr Graham does a diabetic clinic alternating at both sites also.

Fibroscan is in the surgery. This is a service where searches are ran depending on the criteria and appointments are booked every week at both sites to get a liver scan to check for fatty liver/liver fibrosis- to help with prevention.

CPCS changed to Pharmacy First. This a service where patients can ring the surgery and depending on what it is for (chilblain, chickenpox, UTI) the staff can do a referral for the patients to be seen in the pharmacy.

## **5. Sentiers Navigation**

NJ - Sentiers system mentioned. A new Care Navigation tool that has had a positive impact on a GP surgery in Newcastle already. Currently being developed for SMG. 322 pathways that Nicola and DM had gone through and where that problem would go if a patient rang up with a particular problem. It is currently with two of the partners as they need their clinical input as to where certain problems will go.

SFS – can we explain how Sentiers would work?

NJ- a patient rings up and says they have a UTI, questions will then be asked once UTI is put into the Sentiers system on the computer to then find the end answer of the best service to put the patient. Nurse Practitioner will more than likely be the best place. The idea once it is complete is that whoever answers the phone, regardless of experience, will get the same answer as anyone else. Currently A in the alphabet has been done, they are working on the rest.

LR – telephone system at the practice isn't always the best. Phone line had been cut off a weeks ago.

CM/NJ- both mentioned that the phones were off for two days at the SP site due to a faulty BT line that was reflected on the website/Facebook page, which would have contributed to this. The phone lines were redirected to NBH site. CM and PH are arranging a meeting with the director of OneCom (telephone company) to discuss the recent events.

AOB

Practice Newsletter – to see re Infection Control whether we can promote new services at the front desk and have a printed out copy.

AT – mentioned Prostate Cancer and as a practice are we promoting things like this in the waiting room, TV, website?

CM – to speak to NGPS as they have an outreach bus currently and may be able to offer a 'well mans check' for some patients or do a talk in the surgery and invite patients/get a GP to do a talk on this. To look into further.

**Next date of meeting: TBC**