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**Woodlands Patients Voice**
**Meeting Minutes**

**Wednesday 11<sup>th</sup> January 2016**

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**Present :**     **8**   Patients

            **2**   Practice Representatives

**Apologies :**   **4**   Patients


**1.Welcome and Introductions**
MG(Chair) opened the meeting.

**2.  Presentation – Paige Bramley  - Step By Step**
Paige attended the WPV meeting in order to raise awareness about the Step by Step Service which offers support for adults with mental health in Ashfield.   The service is funded for five years by the Big Lottery and Paige is the Ashfield Voluntary Action (AVA) Step by Step  Project Co-ordinator.

Evidence shows that the number of patients with mental health issues who are becoming isolated and socially excluded is on the increase.   This service aims to support these patients with activities to build up social confidence;  linking in  with other agencies to support,  such as Framework for housing, Citizens Advice for financial issues and signposting to other services and support that is already available in Ashfield.   The service also links in with the job centre to support patients who have low confidence and their mental health diagnosis is preventing them getting in to work.   If they cannot work, they can be supported to work in the voluntary sector.

The service is for patients aged 18 and over, has an open door policy and there is no set criteria to meet.   A mental health *diagnosis* is not a requirement.    Patients can drop in, phone or email, can be referred by a professional (referral form) or self-refer.    It is early days and they are still identifying gaps in services – but they are receiving a lot of referrals and these are very different to what was anticipated – a large number are from patients who are at a chaotic stage of their mental illness  (eg just discharged from Millbrook) and the service works to get them stable enough to get in to the project.

Step by Step have established some specific support groups such as art and photography leading to exhibitions and a gardening group, having  joined up with the Hope Springs project and been allocated a plot of land at Ashfield Health Village.  They are developing links with Ashfield District Council's community allotments to ensure this becomes a sustainable project after the funding stops.

As this is not a "crisis" service, they cannot visit patients at home but are happy to meet them informally  in a café  for example, if this is felt to be a safe environment for the patient to chat/get referred in to the project.   Step by Step flyers are being posted in libraries/charity shops/cafes/activity centres and via AVA and community organisations.

## 3. Minutes from 9th November approved.

## 4. Matters Arising

### a) Notice Boards
VB attending next week to review/update boards.    BS offered to support.

### b) Seating
Some very positive responses from patients about the chairs with arms - appreciating the assistance this gives in getting up and down.

### c) Patient Survey
80 surveys sent out by post  at the end of December.   Eight returned so far…..  more prepared to go out but discussed and agreed that with double postage, this would not be financially viable for this level of return.

### d) Christmas Food Bank
Christmas treats  were delivered from the practice to the Magdalene Centre on 23rd December.   KY reported the donation was greatly received and they were able to support  145 families from  the food bank over Christmas.

### e) FC – newsletter, practice accessibility and usage.
A patient with visual impairment had contacted the group for support/advise in accessing the newsletter on line and accessing appointments.    This had been discussed at previous meetings and as a result, MG had emailed the patient with the relevant information and she had been happy with the response.   She had contacted KY who had signposted her to a "try before you buy" service for visual aids and KY was offering continuing support via (friends on) Facebook.   The group felt this was a very positive outcome for the patient.

### f) E-Service referrals
MG provided a copy of a letter received from the e-referral service – appears to have insufficient information or explanation for patients.    PB to pass to practice secretary to investigate.

## 5. Outstanding  - CQC Result
The group congratulated the practice on the achievement.   The group feel the practice should be shouting about the result and suggest we have a visual celebratory display stating that the practice deserves it.    Discussed posters/banners/wall plaque – PB to investigate.

Brief discussion around the impact the results might have on the list size/practice boundaries and Out of Area registrations.

**6. PPG Chair's Meeting 17ᵗʰ November**
MG and VB had attended and following on from the meeting asked the practice to share information about the Primary Care Best Practice Scheme and Dashboard information.

Best Practice
This is an extra funded service offered out to practices aimed at improving the work-life balance as well as focusing on doing the right thing for patients at the right time. PB advised the group that whilst the majority of criteria set for the Best Practice Scheme were achievable (eg increasing the number of patients signed up for on line services, managing end of life care, providing emergency appointments, managing DNAs), ultimately any payment for the increase in work will be dependent on also achieving a reduction in hospital admissions – set at unrealistic 20% top target level and when we have been making improvements to try and achieve this for many years, there is little more room to improve - so largely unachievable. The practice is signed up but concerned about the increased workload it will create.

Dashboard
The "dashboard" is a vehicle for the CCG to report up to date performance data on all its member practices. Each practice can view their own page and also make comparisons with other practices and the CCG as a whole. A tour around the CCG Dashboard was presented to the group, detailing the practices performance in a number of clinical areas. The group found the information interesting and informative and thanked the practice for sharing this. PB advised the group that the CQC would have viewed this data as part of their evidence collecting in preparation for the inspection visit.

**7. Citizens Reference Panel (CRP) - feedback**
VB is now the representative for Ashfield North Federation and has been in post for nine days, already having been involved in business, networking and development meetings. The CRP have set an annual programme of areas for review and development and will be targeting dementia/memory in February; COPD in June; Children/young people's services/self-care in September and cardiac in December. If any members of the group have an interest in any of these areas and can get involved, please let VB know. The networking and development events are open to all. VB is due to meet with all the PPG Chairs for Ashfield North as she will also be representing them on the CRP

VB reports talk of a pop up shop planned to provide health advice in Mansfield and will provide more information when known.

Further to concerns raised by the group about the untimely issue of Network News, VB has raised this and Helen Banton from the CCG (who states she distributes it on receipt) has agreed to investigate this.

**8. Dates for meetings**
WPV Chair MG had a list of proposed future dates for discussion/agreement. Agreed dates

for diaries are :-    (Wednesdays)  15<sup>th</sup> March;  10<sup>th</sup> May;  12<sup>th</sup> July;  13<sup>th</sup> September  and 8<sup>th</sup> November.    The group agreed that as the meeting is increasingly running over time, that we extend the start time to 5.30pm.


## 9.  Any Other Business
i)  Executive Report for Sustainability and Development

DD has received this report.    He advised the group that  it appears  Mid Notts/Nottingham City are concentrating efforts on Sherwood Forest and  Nottingham Queens Hospitals  and allowing the Nottingham City Hospital site to run down.    The report challenges whether we are using our resources properly/looks at how can we use them better – DD feels with far reaching consequences.    DD agreed to share the report with the wider group  (email to PB).


**10.   Next Meeting :          Wednesday   15<sup>th</sup> March  at   Woodlands     5.30 – 7.00pm**