

Woodlands Patients Voice AGM and Bi-Monthly Meeting Minutes

Wednesday 15th May 2019

Present : David, Sylvia, Michael, Val, Stephen, Kay, Mary, Ann, Janet (PPG Members)
Patricia Brown (Practice Admin representative and PPG Secretary)
Dr Ellora Das (Practice GP and representative)

Apologies: Mick, Fiona

1. Welcome to AGM

As existing Chair, David welcomed everyone to the Annual General Meeting (AGM) and the bi-monthly WPV meeting to follow.

2. Minutes of past year

The AGM Report had again been prepared by Trish on behalf of the group. Copies were distributed.

3. Q&A

David reported it to be a comprehensive report and rather than going through it in its entirety, he raised a few highlights, including the section on speakers- always interesting, informative and comprehensive. However, he did note that quite often this is the first the group hear of service improvements and developments and there seems no other way of getting information. For example - ERD had been raised by the pharmacy technician's presentation and whilst there is a lot in the press around Mental Health, there is very little promotion/information at practice level. The visiting speakers also allow us to feedback on services - for example the speaker from Sherwood Forest Governors was keen to take our comments back. The group were in agreement that they would like the speaker section of the meeting to continue.

There had been a good response from contributing organisations for the self-help event held earlier in the year, but attendance numbers were very low and therefore disappointing. Still worthwhile – both those who attended and the organisations involved were very positive about the networking opportunities it presented and would be keen to engage again.

The group missed the flu clinic group promotion this last year because of how the vaccines were distributed. Expecting things to be better this year as all the vaccines will be available at the start of the campaign season.

AGM report approved.

4. Election of officers

David has held the position for seven years on and off and is now resigning as Chair and Val the same for the position of Vice Chair. However, David is happy to continue with managing the PPG email address. Stephen asked what the role entailed and David explained the responsibilities included chairing meetings, attending network meetings, involvement with NAPP, sorting speakers, setting meeting agendas and investigating items for meeting discussion. Stephen put himself forward and was unanimously voted in. No volunteers for the post of Vice Chair this time. Trish to continue as secretary and Kay as treasurer.

Stephen took over as chair to continue the meeting, following David's prepared agenda.

5. Welcome and apologies

Mick and Fiona had sent apologies. Stephen offered his own apologies for the last meeting. He would have liked to attend as he had been particularly keen to hear the speaker.

6. Minutes of last meeting

Approved as a true record

7. Matters Arising

Item 5 - what we do with speaker information – tabled

Item 7. Notice board updates - Val and Sylvia had reviewed all the boards and leaflet racks. Removing the out of date information had left some gaps, but not too concerned as it was felt this would focus the attention on what is there.

Other items to be covered on this evening's agenda

8. PPG recruitment (David/Val)

No real campaigns in the national events diary for July/August. Suggest we promote the PPG itself during this time to aid recruitment and inform patients about what the group does. Feel we ought to demystify it – advertise what the purpose of the group is and that it is compulsory for the practice to have a PPG. We could publicise the speakers to encourage attendance. Agreed the information needs to be snappy and eye-catching. Two large posters should do it – one to draw attention with the second detailing more info/ signposting for further information/support. It is frustrating that the group is already advertised well, but not taken up. Agreed to check if Ken at Manor Pharmacy might support PPG recruitment. Appreciate that we have a short window for July/August whilst no other campaigns are running. Val to lead, with support from Sylvia, David and the wider group. Will check out the NAPP website for resources/promotions/support, as recruitment is a national issue for PPGs.

Stephen queried the practice website content – he had been unable to find any mention of group meetings for the last two months and unable to find minutes. Other members confirmed information/ minutes are there. External company manages the website with some standard, generic information and some practice information updated in house. Not many members have accessed the website recently. David reported some statistics – 4.8 million people in England have never been on line, so there is a large group of patients that are not being reached.

The group agreed a number of actions to promote/advertise the group which included producing coloured flyers on seats/for GPs to give out/target potential members. Discussed colour – agreed sunshine yellow with black print with arial/verdana font in large print. Talk to Manor to see if they can support with this, though he may need to take a generic approach, rather than advertise just our own PPG. The group will come up with a format and the practice to sort out the paper and copies. Happy to suspend FFT forms on waiting room chairs during July/August. David, Val and Sylvia happy to work this up and will keep Stephen informed.

9. Communication to patients (David/Val)

The practice leaflet is due for reprint. The group could take advantage of this and improve the current insert that advertises the group. Trish to send the insert electronically to Val, David and Sylvia (cc Stephen) for assessment/to draw up an article to include in the next issue.

10 Non Urgent Ambulance Service (David)

David reported that the current contract with Aviva ends on 30th November. The CCG are asking for patient input to support the contract review.

The group felt the survey is lip service and that decisions have already been made. No qualitative questions. Discussed the key performance indicators around the eligibility criteria for accessing the transport (including unable to travel by public transport). Limits access choice for some patients who have difficulty travelling/ cannot travel on long journeys. It was felt that the PPEC ought to have challenged what series of questions are being raised. Replies to Julie Andrews – suggest ask what will happen to the information – fear is if will just have ticked a patient engagement box? Responses requested by the end of May. David will complete the survey following today's discussion.

11. Best Practice Communication (David)

David queried how the practice learned of developments/services within and around the NHS and how is best practice shared across the 158 independent trusts and 6500 independent practices.

David reported that Lincolnshire Health Care share records across the trust via the "Care Portal". This is a clinical record system that ties all the different existing clinical IT systems in to so that all the local health care teams can access the same patient record. This system has been operating in this way since 2013. Dr Das informed the group that the Woodlands clinical IT system shares with local secondary care (Sherwood Forest Hospital Trust), healthy families team and local community services but the patient has to have given consent to share. Other IT developments / information/ updates are sourced from the national IT systems conferences and user groups, but we have very little targeted promotion.

David also informed the group about "NHS Towers" which is focused around procurement – looking at purchasing within the NHS nationally – trying to limit suppliers to make savings. David mentioned the NHS Applications library – already 70 approved Apps are already in service. He also reported that 93% of practices in the UK use EPS and there is a push for pharmacies to do other work with time released as a result of this.

12. Outpatient appointments (David)

David has raised the group's issues around outpatient /follow up appointments with PPEC via Peter Robinson (representative for Mansfield and Ashfield PPGs) who, following his initial response, is taking the matter to the wider PPEC group. Our issues included no clinic appointments available for follow ups at times requested by the consultant. Is this that the service is swamped or administrative systems at fault? Clinics closing down without transferring patients – instead sending patients back to their GP for referral back in to another service (eg community). Limited clinics/availability/consultant diaries/no clinic rooms. David agreed to write to the hospital governor who attended last year to ask some questions about out-patient clinic issues.

13. Practice Special Interests (David)

The group raised that the GP special interests/areas of expertise are not clearly advertised. Suggest take the opportunity to list these in the new leaflet due to go to press and ensure the same is advertised on the website. Dr Das provided a breakdown for the group as follows:-

- Dr Pound - diabetes and IT
- Dr Das - Family Planning and Female Health
- Drs Pountney and Aldread - Minor Ops/joint injections
- Dr Russell – (training for) Female Health, Psychiatry and Mental Health
- Dr Laird - Dermatology

14. Practice Update (Trish / Ellora)

Trish reported that our IT systems had been updated to Windows 10 this week – completed successfully today.

Kay reported she had been in one of the new extension rooms and felt they were very pleasant rooms, though the doors are very stiff. Trish was able to report that the builder has been made aware that adjustments are required, alongside two or three other “snagging” tasks.

The practice has some new GP Registrars - Dr Gouldstone and Dr Okon with Dr Brown as the new F2 – they all started at the beginning of April. Dr Smith also continues to work with us as a GP Registrar.

Practice Nurse (PN) Linda Buckley has retired after almost thirty years association with the practice. Tracy Pound is now lead PN and we have a new PN who joins us from secondary care called Suzie Harpham.

Dr Pountney is considering taking on the role of Clinical Director under the latest Network arrangements. This will mean a reduction in his clinical commitment to the practice on a weekly basis, so the practice is looking at recruiting a locum to ensure appointment capacity is retained.

The group asked about GP Access /Extended hours, where, together with the other Network practices, we provide appointments outside core hours with both early morning, evening and weekend routine appointments. Patients taking up these services may see a GP at one of the other network practices. Abbey Medical Practice at Blidworth and the Crown Practice at Clipstone cover Sundays and Bank Holidays for the whole of Mansfield and Ashfield. Appointments are booked via the patient’s own practice. PICS, who manage/administer the service on behalf of the practices, run a regular evaluation of the service.

15. AOB

Dementia Awareness training

Need to re-arrange for practice staff and PPG members. Trish to check in practice for suitable dates so this can be arranged.

Thanks

Stephen extended a vote of thanks to David for the last seven years and Val for her position of Vice Chair.

Date of next meeting : Wednesday 10th July 2019 5.30 – 7.00pm