

Minutes of the meeting held on Wednesday 11th July 2018, at Saxon Cross Surgery

Present: Julie Bryant (Chair)
Michael Rich (Vice-Chair)
Wendy Taylor
Janet Jackson
Frances Rigley
Bryan Dalton
Tony Oram (Practice Manager)

Apologies: Maggie Saville

1: Welcome and apologies for absence

The Chair welcomed all to the meeting. Post meeting the Chair found an earlier e-mail apology -from Maggie Saville.

2: Election of Chair and Vice Chair

Nominations were received for Julie Bryant and Michael Rich to be re-elected as Chair and Vice Chair respectively, who both accepted the nomination. With the required quorum of members present all agreed to elect them accordingly.

3: Minutes of the last meeting

A typing error was noted on page 3 item 6.8 which should read "It was further noted that the annual review letters are generic and often **not** helpful for patient or Practice alike". The rest of the minutes were agreed as a true record. Tony confirmed that the reason for the repeat of the Gluten Free consultation was so that views of Nottingham City CCG's residents had been included in any decisions.

4: Matters arising

4.1: Virtual Patient Participation Group

Nothing new to report

4.2: Jargon Buster

There was a discussion on how new acronyms and terms would be collected for the revision of the Jargon Buster. It was suggested that the new Practice e-mail address, once set up would be a helpful way for people to submit new items. The Chair proposed that the review be postponed for a few months and there be a focus on an easy way to feed in any additions or changes. Tony agreed to pick up any suggestions from the Practice and feed them to Bryan for the master copy. The Chair agreed to check recent PRG documents for potential new additions.

4.3: Data Protection and consent to hold/use data

The Chair had circulated a draft additional paragraph for the Terms of Reference which explained what personal data is collected about members, the purposes it is used for and how it is stored. Amendments identified covered replacing "according with" with "in accordance" and also replacing "Controller" with "Administrator". The paragraph will make reference to the consent form which will be appendix 1 of the TOR. Tony reported that he had discussed these issues with the Privacy Officer and would send in an additional sentence. One finalised, the Privacy Officer would be happy with the PPG's approach to data confidentiality and consent. The Chair said that continued involvement was needed from people who had not been heard from for a while. When sending out the last agenda and papers, she

had added a request that any member make contact if they no longer wish to be involved. The consent form needs to indicate who people should contact and how if they wished their data to be removed from the PPG list. It was confirmed that VPPG members would need to indicate their consent via e-mail. As part of the revised Terms of Reference it was proposed that a combined acceptance (of the terms) and consent (personal data usage) replace the existing appendix.

4.4: PPG Action Report 2017/18

The Chair will circulate the final version of this in the near future.

5: Short update from the Practice

5.1: It was confirmed that for this year, the Practice would be taking part in the GP Enhanced Delivery Scheme (GPEDS) which replaces the Engaged Practice Scheme. Access targets will remain in place, i.e. routine appointment offered within 5 working days which has been challenging due to the high demand on the Practice. The incentive of within 3 days is still in place and will be promoted. More Quality Indicators (targets) have been introduced including heart failure, diabetes, mental health. Members were given a brief demonstration of these Key Performance Indicators and the scoring system used, i.e. red, amber and green. These have been devised by Dr Mike O'Neill for use across the CCG and Improving quality was considered best practice. The GPEDS will be introduced across Grater Nottingham. The variation of practice funding needs to be reduced and even out inequalities in contracts in line with National figures and rates.

Opening hours will be extended to 8pm on week day evenings and 3 hours on Saturday and Sunday, on a rotational basis shared across the CCG's practices. This will mean 4 or possibly 5 weekends up to the end of March and still retaining the current opening on Tuesday evenings. On the rota there will be 1 GP available plus 1 or 2 Practice Nurses. The first weekend for Saxon Cross will be 15th September however all dates will be published and advertised. These non-urgent appointments will be for 15 minutes and will need to be booked at patients' own Practice by phone as they will not be drop in/walk in. Booking appointments via Patient Access may be possible in the future following a migration to the new IT system. Only Saxon Cross patients will be able to book nurse appointments but this might change for weekend wound dressings. For each Practice on the rota there will be 4 non-urgent appointments available for their own patients and 2 for patients from other practices. The picture beyond March 2019 was not clear as news about continued funding was awaited. There was currently debate about how appointments slots can be used if not filled. Sunday appointments may start at 8.15am for 3 hours. Phones at the Practice will still be switched at 6.30pm on Friday evenings to NEMS.

5.2: Clinical IT system

To support the extended access scheme, it has been decided that the Practice will change to the SystmOne IT system and the transfer of all records will take place on 30th October. This is so that GPs from other practices on the rota may access Saxon Cross patient data plus add to it as required. There will be a new online patient access system as the current system is EMIS based (date to be confirmed). SystmOne's patient access appears to be more user friendly.

5.3: Did not attend (DNA)/missed appointments

The Practice is sending out reminder letters for DNAs. There was an increased uptake of booking on line appointments but some leave it very late to cancel. A member reported the receipt of 3 text appointment reminders and some members were not receiving appointment confirmations. Tony agreed to check the system.

5.4: Practice staff

Dr Jawaid has been offered the position of salaried GP with the Practice on completion of training, to commence on 23rd July on a 3 day per week basis. Dr Jawaid has been a Registrar with the Practice for the past 18 months. The new Practice Nurse will start her position next week for 3 ½ days per week.

5.5: Repeat prescriptions

The decision to stop local pharmacies ordering repeat prescriptions for patients has been put on hold following an improvement in the management of these prescriptions. The re-call and review system is to be revised.

5.6: It was reported that Rockwell Court residents were being disturbed with an alarm regularly going off in the Care Centre during the night, i.e. 2 to 3am most nights. Tony agreed to talk to Security Staff at the Care Centre.

6: Report from the PRG

6.1: Greater Nottingham Financial Recovery Plan

At the May PRG meeting there had been a presentation from the Greater Nottingham Transformation Team which reported that a 3.9% saving had been made in 2017/18 from a total budget of £981.64m. The collective target for 2018/19 is 5.2% of the allocation of £1,013.87m for which 70 savings schemes were proposed. These included gluten free prescribing, re-commissioning of the Change Point weight management service and a review of the Community Podiatry Service based on a model from Sheffield. Following the Over the Counter medicines consultation, PPGs may be asked to help get the messages across to patients and further information is to follow. A consultancy called M.E.L (Measure, Evaluate and Learn) Research is being used to examine current patient engagement structures across the 4 CCGs to identify good practice and improvements. The STP bulletins have re-commenced and the Chair agreed to circulate them to members for information. At the June PRG meeting, copies of a document produced by the Kings Fund had been shared with members. This document aimed to make sense of integrated care systems, integrated care partnerships and accountable care organisations in the NHS in England. The Chair tabled a copy for information.

6.2: The CCG intends to invite Dr Mike O'Neill to a future meeting to talk about the GP Enhanced Delivery Scheme (see item 5.1). The cross-CCG rota is to be shared when available.

6.3: Nottingham West CCG's Annual Report is now available on the website if anyone wishes to see it.

<http://www.nottinghamwestccg.nhs.uk>

7: Any other business and discussion

7.1: The Chair reported that the NAPP Conference in June had been positive and well worth attending. Many resources and leaflets had been picked including advice booklets for PPGs and a leaflet explaining how patients can look up the meaning of their tests on line. The NHS Youth Forum had provided advice on how to engage with younger people and the Chair has suggested to the PRG that this be collectively explored across the PPGs. It was not known where next year's NAPP conference would be located.

7.2: There had been 1 suggestion slip which mentioned that an appointment reminder had only been received close to the appointment and not the 24-48 hours as it should have been. This relates to item 5.3.

7.3: Tony reported that a representative from the Carers Federation had been invited to the next PPG meeting to talk about the newly introduced drop in clinics. These clinics are on the first Tuesday in the month from 2-4pm. People who are registered as carers on the Practice system will receive an invitation by text.

7.4: It was noted that a copy of the last minutes were on the PPG Notice Board, however the day of the PPG meetings on the website needed amending.

7.5: From 30th July, GP referrals to secondary care will have to go through a telephone system called the Greater Nottingham Clinical Support Service (GNCSS). Patients will be contacted within 24-48 hours to book the appointments plus have a discussion about their condition. Mental Health and Obstetrics referrals are excluded from this service.

7.6: The Chair asked members if they wished to consider running the Annual Patient Survey this year. It was agreed to postpone this until early 2019 to allow time for the new GPEDS and other initiatives to settle down.

7.7: The Chair reported that a bursary/grant might be available through the CCG's Engagements Officer (Emma Watson) and it was suggested that the revamp of the PPG notice board might qualify for some funding.

7.8: The Chair reported that interest had been expressed from a new potential PPG member although contact was being made through the Practice initially to respect the individual's wishes.

8: Dates of next meetings

12th September 2018

7th November 2018