

Saxon Cross Patient Participation Group

Meeting held Thursday 23rd November 2017 at Saxon Cross Surgery

Agenda

Present: Julie Bryant (Chair)
Michael Rich (Vice Chair)
Bryan Dalton
Ann Hyde
Joe Sells
Wendy Taylor
Maggie Smith
Meirion Williams
Sue Parkin (Practice Team)
Tony Oram (Practice Manager)

1: Welcome and apologies for absence

The Chair welcomed all to the meeting especially to Meirion as a new member. Apologies were noted from Frances Rigley.

2: Minutes of the last meeting held 21st September 2017

Agreed as a true record

3: Matters arising from the minutes

3.1: Virtual Patient Participation Group (VPPG)

No changes to the VPPG were reported. This item will remain on the agenda until further notice.

3.2: Jargon Buster

The draft final copy had been set to the Chair, Vice Chair and Tony for final amendments. The majority of definitions had been finalised although alternative definitions remain for many entries, with some possible duplication. It was agreed that the Chair, Vice Chair, Tony, Bryan and Tony would meet on 11th December to discuss the final amendments. It was noted that once the Jargon Buster is finalised it will form part of a welcome pack for new members.

3.3: Members pack update

The Chair reported that she has started the production of the 2017/18 Action Log, which will form part of the Members Pack.

3.4: Proposed carers event

Tony reported that the Practice was keen to run a carers event, in conjunction with the Carers Federation. Help from the PPG members would be most welcome. The Practice holds a register of carers who could initially be contacted to see if they would be interested and what days or times were preferred. A Saturday was suggested and Tony said this may only be feasible for the main foyer in the Care Centre. The Care Centre Manager will be approached about this. How to identify and contact young carers was raised and it was felt that via schools might be a good route. Further enquiries will be made.

4: Short update from the Practice

4.1: Flu jab campaign

Tony reported that the flu campaign was ongoing with further clinics planned for December. The target reached for over 65s was just at 75% (1100), which compared well with the national target. Pharmacies have been informing the Practice of patients that they have dealt with, including patients who paid for the flu jab. For under 65s and those at risk about 36% had been achieved (national target 50%). The Practice compares well across the CCG area. A new method of contacting patients via the new texting service was tried, which supported postage savings for the Practice. Mop up letters will be sent out for 2 further drop in sessions. Meningitis jabs have been offered, (particularly targeting young people) including via the Universities, but take up rates were not yet known. There is a National Shortage of pneumonia vaccines so some patients have had to wait until stocks are replenished.

A question was asked about the new pulse check system and Tony reported that on the first Saturday session over 500 pulse checks were taken, with GPs on standby if any irregularities found. One member shared a negative experience with this on a weekday session where she was told to make a GP appointment as a doctor was not at hand. The member was asked to have a full blood count and further tests which caused some worries, however all was well despite the guidance to seek this further testing.

4.2: CQC visit

The Care Quality Commission visited the Practice for a full inspection on 14th November. The results were not yet known but feedback on the day was very positive. Patients interviewed in the waiting area also gave positive feedback. The Practice was hoping for a score of GOOD or possibly OUTSTANDING this time. There were no queries about any clinical or managerial procedures. The Chair and Vice Chair were interviewed for an hour, representing the PPG. Items discussed included the Practice Newsletter, how the PPG communicates with patients and how the receptionists interact with patients, including solving problems. The CQC were informed about the notice board, messages on the TV screen and the VPPG. Positive observations of receptionist/patient interaction during the annual patient survey were shared. Actions from the annual survey covered were recruitment and the developing Members Pack. Access to appointments was shared as good however it was known that waiting times were a regular issue for some patients. The message about potential waiting on the check in screen was explained. The CQC were also handed a copy of the 2016/17 PPG Action Log.

A question was asked if the CQC considered the recent cyber-attack and it was reported that there had been some problems with the phone system, but had now been resolved. The CQC did discuss the Practice's contingency/emergency plan and it was explained that communication from a higher source had been poor and it had been difficult for the Informatics Department to get the messages out. However, lessons had been learnt for the future. The Practice regularly reviews and updates its Contingency plan. It could not be explained why some practices were affected and not others. It seemed that different sections of the NHS were affected based on many IT systems using unsupported platforms, such as Windows XP, leaving the vulnerable to attack. The Nottinghamshire Informatics Service had not rolled out the latest version but that had now changed. Practices had not been advised to disconnect the network cables when closing down their PCs. It did take a long time to get back up and running.

4.3: Telephone system

The new monitoring system for the telephones would arrive within the next 3 months so that the Practice can look critically at how phones are being answered. There were no plans to install a call backs system as yet. The Practice is keen to prove the new system as a foundation from which to build and offer additional facilities.

5: Report from the Patient Reference Group (PRG)

5.1: Greater Nottingham Financial Recovery Plan

Following the recent local consultation about not issuing over the counter medications on prescription, it was reported that during the first 2 months of the change in practice, Nottingham West and Rushcliffe CCGs had achieved savings of over £40k. The Engagement Teams were planning to liaise with practice managers prior to talking to patients about this in waiting areas.

5.2: Accountable Care System/Sustainability & Transformation

This was now a standing item on the PRG agendas plus will be the main item for the PRG development day in December. The first public event had been held in November at the Albert Hall. The question and answer session had been dominated by the Keep the NHS Public pressure group. There had been table top discussions about the ACS and the data collected was currently being analysed. The Chair will share the executive summary of this when available. There will be further public events; February at Radcliffe on Trent, and later in the year at Beeston and Hucknall. The Chair will share the details as and when available, as well as any news about the ACS and transformation in general

5.3: Annual Patient Survey questionnaire

The Chair reported that the CCG would shortly be reviewing the annual survey questionnaire and had asked all PPGs to send in feedback about any of the questions and the layout. Following discussion, it was agreed that the only issue with the current version was the question about waiting. Patients usually completed the questionnaire before their appointment and had to take it into the consulting room and answer this question before they left. Also, some handed their questionnaire over with this question unanswered. Tony reported that the Practice could monitor the time between appointment time and being seen, but could not capture the patient's perceptions about their wait. All agreed that this was important to capture and that the Chair suggest to the CCG that this question be placed at the end of the questionnaire.

6: Any other business & discussion time

6.1: Antimicrobial campaign

The Chair reported that a request has been received for information on what action practices and PPGs were taking about this campaign. This had been discussed at the May PPG meeting where it was noted that there was a message on the TV screen but the posters regarding this campaign had not yet arrived at the Practice. The Chair will feed this back.

6.2: Suggestion box

1 suggestion slip was in the box which asked if a message about waiting times could be forwarded by text message. Unfortunately, this was not feasible and waiting time delays were given on the check in screen.

One members reported receiving a reminder message for an appointment that had been cancelled. Tony said he would look into this at it should not have happened.

6.3: Extended hours update

No further news was available as the Practice was still waiting for guidance from NHS England. There were a lot of questions about what is going to be acceptable and what models are needed. Funding had been reduced to enable the improved access scheme preferred by practices. The Primary Care stream at A&E was raised which is part of the ACS and has already been successfully trialled at the QMC. Tony reported that if GPs work in A&E, their personal indemnity costs escalate.

6.4: Recruitment

It was agreed that if recruitment slips for the PPG and/or the VPPG were to be included in next year's annual survey, then interested patients could follow this up with Reception if truly interested.

6.5 Actions from CQC visit

It was agreed that the PPG would consider writing articles for the Practice Newsletter which could be e-mailed out to patients who would like to receive it, including VPPG members.

6.6: Pharmacy 2U

The Chair asked if anyone had received a leaflet from Pharmacy2U which offered online ordering of repeat prescriptions and delivery to a destination of choice. Many local practices were named on the leaflet, but not Saxon Cross. Tony said that this Practice has no affiliation with this private company and did not endorse it. Naming practices could be a marketing ploy. There was also a brief discussion on Push Doctor which has been advertised recently on the TV as an online GP consultation service via skype. The Chair was personally concerned about the validity of the doctors who would provide the consultation. Tony reported that funding was available for practices to develop this type of service but Saxon Cross was not keen at the moment. One member noted that the telephone consultation service at Saxon Cross is very good.

6.7: Volunteers for research project

Following a recent request for volunteers from the PPG to take part, the researchers have made no further contact with the Practice and it was assumed that this would no longer happen.

7: Dates of next meetings

It was agreed to switch to Wednesdays to avoid clashes with CCG and PRG meetings;

10 th January 2018	11 th July 2018
7 th March 2018	12 th September 2018
9 th May 2018	7 th November 2018

All meetings are 2-4pm at the moment. It was agreed that a decision whether or not to have evening meetings will be taken in early 2018.