Patient Participation Group Meeting

27th January 2016

Present: (Patient) Elizabeth Cole, Jean Burgess, Brian Burgess, Kate Holley, Jim Malloch, John England, John Rose, Dave Ellis, Nicola Richardson, Doug Vince (Practice) Tony Watts, Adrian Down, Boyd Gilmore

Apologies: None

Conflict of interest: Doug Vince, reminded all that his wife works for the practice as a receptionist.

Minutes: Minutes to previous meeting of 10/11/15 amended to show John Rose attended otherwise agreed and approved for publication to website.

Matters Arising: Nothing to report.

Patient Council: Mrs Burgess attended a meeting on behalf of the group last week. She feels the group has been slow to start and to be effective requires greater support with minutes rather than an action log being useful. The Patient Council members are to be involved with preparation for the LHAC (Lincolnshire Health and Care) consultation when it happens later this year. It was felt that the Patient Council would be a good forum for sharing good practice happening in patient groups across the region. Dr Gilmore thanked Mrs Burgess for attending this meeting.

Healthwatch: During 2016 Healthwatch will be holding road shows around the County to ensure the patient voice is represented. They are specifically focusing on helping primary school aged children with healthy nutrition. Work has also been taking place to reduce DNA's (did not attend) at ULHT (United Lincolnshire Hospitals Trust) but there was some evidence that blame for this should not all fall to patients as often appointments are changed and the patient was not informed, discussion within the PPG backed up this situation and concern was raised that this could leave a "black mark" against patients. Dr Watts explained that this would not happen however agreed that it could be distressing for patients and inefficient for the hospital. Healthwatch has completed its mental health report and is now looking at the out of hours service.

Pharmacy Application: Dr Gilmore thanked the group for the time and effort they put in to an excellent and supportive response they put into the recent application for a pharmacy licence application. Mr Down updated that the responses had now been sent back to the original applicant who has a right to reply. At present the Practice is not aware of the time frame for the application to come before the appropriate committee but will update the group as soon as they become aware of this.

Funding of NAPP (National Association of Patient Participation) membership: The Practice has funded membership of NAPP for the group and Mrs Cole thanked the Practice for this on behalf of the group. The PPG has a certificate of Membership which Mrs Cole will send through to Mr Down so it can be displayed on the PPG notice board at each surgery. Mr Down is registering the PPG email address with NAPP so all members will be able to use that to access the resources available on the NAPP website. The local CCG can affiliate with NAPP if it chooses to for their Patient Council and Mrs Burgess was asked to take this suggestion to them as it may help with their governance.

The way ahead: Discussion took place surrounding the need to formalise the governance and operation of the PPG to ensure good communications and sustainability of the group. Mrs Cole had researched through NAPP suggestions for moving forwards and using the existing terms of reference as a base it may not be necessary or of great value to have a constitution. Election of officers however was necessary and should be addressed immediately. Mrs Cole presented a paper that was widely applauded with the bigger picture section being seen as very sensible. It was agreed that it was very important to ensure members of the PPG positively contribute to the process and that all age, ethnicity and gender groups be represented appropriately with equality and diversity being at the top of the agenda. The group agreed to continue meeting every 2 months with meetings being held in the evening alternating between Ancaster and Caythorpe. The Practice offered the use of the meeting room at Ancaster if the group ever wanted to meet in the daytime but explained that this would make it very difficult for a clinician to attend. The group felt there should be an open invitation to Practice staff to attend meetings and that it was important that the PPG was heavily involved in the CQC (Care Quality Commission) inspection process.

Election of officers: Chair: Mrs Cole nominated by Mr England, seconded by Mr Malloch, unanimously agreed. Secretary: Mrs Holley nominated by Mr Burgess seconded by Mrs Burgess, unanimously agreed. Vice Chair: Mr England nominated by Mr Rose, seconded by Mr Malloch unanimously agreed.

Reports from Sub Groups:

Newsletter: Mrs Richardson asked for help with suggesting topics for upcoming issues, current content being prepared included; Dr Robinson's recent mountain climb, information about the Neighbourhood Team, appointment pressures on the Practice, national Alzheimer's campaign and national screening programs. Copies of the newsletter are available online, in the Practice and Mr England and Mr Malloch have kindly been hand delivering copies to local collection points such as petrol stations and pubs. The extremely high quality of the publication was again complimented by the group. Concern was raised over the lack of input to the PPG Facebook page, Mr Trickett would be contacted to discuss this.

Website: Very minor updates to the site were discussed, a new section highlighting GP earnings at the Practice has been added to the site.

F&F sub group: Felt that it would be helpful for the sub group to meet up to agree the process that should take place when members meet with patients in the waiting room. As the Friends & Family test is only a part of what this process sets out to achieve it was felt that it may be appropriate to change the name of the sub group to reflect that it is more about patient engagement.

Filing of lab results in patient records: From April 2016 all patients will have the right to access their medical record online. The practice is concerned that some terminology typically used in the interpretation when filing of lab results could be unhelpful and worry patients and asked the group for their opinion. Typically blood results are filed as either normal, abnormal or satisfactory. However, with clinical judgement, satisfactory is often a more helpful interpretation in the context of a patient with a long-term condition eg. diabetes The Practice is able to adopt the phrase satisfactory in some instances rather than abnormal and the group agreed that to a patient this would appear reasonable and not be cause for concern to someone reading their medical record.

The patient group was reassured that any result filed as abnormal would result in appropriate followup. It was agreed that this topic would be a good subject for a newsletter article.

Extended access: The Practice provides 2 sessions of "extended access" in evening surgeries. Monday 6:30pm – 8:45pm at Caythorpe and Tuesday 6:30pm – 8:45pm at Ancaster. The doctor working in the evening surgery starts at mid-day to ensure safe working hours which does not cause an issue on a Tuesday but does mean the Practice has 1 less GP available to work on a Monday morning the busiest time within the surgery. This can lead to 1 GP working at a surgery on their own and leave them exposed to a potentially huge and unsafe workload. The Practice suggested ceasing Monday evening surgeries at Caythorpe and returning an extra GP to Monday morning but increasing the clinical team on a Tuesday night at Ancaster to include a nurse and healthcare assistant. Caythorpe patients would be able to see their GP in an evening if they wish to as Caythorpe GP's will also work at Ancaster and it will allow much more flexibility for patients needing to see a nurse who cannot easily get to the surgery in the daytime. In addition to this it will release approximately 500 GP appointments per year into the system. All agreed that this was an excellent idea and was supported by the patient group. Suggested start from 1st April and to be promoted in the newsletter.

Patient survey: The PPG was asked by Dr Gilmore if it could support the practice in distributing and promoting a patient survey. Was felt this was appropriate and to be discussed at a future meeting.

Items for next meeting: Update on extended access changes, update on introduction of patient access to medical records.

Dates: Date set for next meeting Tues 22nd March 2016 at Ancaster surgery at 6:30pm – provisional future dates (all with a 6:30pm start time) Wed 25th May (Cay), Tues 26th July (Anc), Wed 28th Sept (Cay) Tues 29th Nov (Anc)