**Sunbury Health Centre Group Practice (SHCGP)**

**Patient Participation Group (PPG)**

**Minutes of the Core Group Meeting held on**

**Tuesday 20 November 2018, 3.30 pm at SHC**

**Agenda**

**Present:**

**SHC:** Richard Fryer (RF)and Jackie Sheehan (JS).

**PPG Core Group:** David Butler (DB), BrianCatt (BC), Diana Huntingford (DH), Neil Huntingford (NH), Chair, and Dorothy Linter (DL).

1. **Welcome** and **apologies** for absence

NH welcomed everyone to the meeting and introduced a prospective new member – Kate Macconville.

It was noted that Dr Gill, Paul Thompson and Sasha Thurgood had sent their apologies. Polly Healey and Jan Palmer had also sent their apologies because they were representing the PPG at external meetings.

NH explained to the meeting that unfortunately Maureen Henning had decided not to join the PPG Core Group, although she may reconsider her decision in the future.

**2. Minutes of the last meeting**

 It was agreed that the minutes from the Core Meeting on 25 September 2018 was an accurate record of the meeting.

**3. Be a voice in the community:**

* 2018 Patients’ Survey Action Plan

RF advised the meeting that the Practice has been extremely busy since the last PPG Core Group meeting, and as a consequence he has been unable to produce a written Action Plan. RF did however commit to sharing the Action Plan with patients via ‘*Bitesize News.’* RFreassured the meeting that all aspects of the Action Plan are already in place to address the issues raised in the survey.

Action: *RF to include the 2018 Patients’ Survey Action Plan in the next edition of ‘Bitesize News’.*

* Preparations for the Open Meeting on 3 December 2018

It was agree that the presentation at the meeting will be the 2018 Patients’ Survey Action Plan and this will be led by RF.

DB asked if the meeting should be more widely publicised. It was agreed that the meeting would be advertised on the screen in the Waiting Room and RF offered to see if it is possible to add a notification to the new automatic Check-in Screen. NH will advertise the meeting on the LOSRA e-bulletin and DB offered to visit the shops in The Avenue.

Action: *NH to produce the poster advertising the Open Meeting and send it to all members of the Core Group, for them to advertise as widely as possible.*

* ‘The Big Picture’

DB and NH have both recently attended meetings where this matter has been discussed. At the meeting attended by DB there had been a long discussion about Urgent Treatment Centres and the demography of the area. NW Surrey CCG is looking at how partnerships can be more effective and produce better services for the community. It was recognised at the meetings that a lot of people go to A&E departments because there is confusion about the alternatives. Therefore in order to reduce the pressure from A&E departments, there needs to be clarity for patients about the different pathways available and where they are located.

BC informed the meeting that Surrey and Manchester are the only areas to have devolved budgets from the NHS and one of the issues Surrey is currently considering is whether to give money to Social Care to help improve bathroom facilities for the elderly which might prevent them needing to visit hospital as a result of a fall. NH stressed that this was one example of how the local CCG is not complacent and that is also engages well with the patient population.

RF added that SHCGP is very active within the CCG and is considering how it can be involved in such initiatives.

NH informed the meeting that there is a public consultation about The Bigger Picture on 26 November and 6 December. BC & DB agreed to attend a consultation meeting.

**5. Provide support and challenge**

* Update from RF

Since DG had been unable to attend this meeting RF gave an update on the Practice:

The LIVI service has been launched at the Practice. It is provided by a federation of Practices in NW Surrey. The service is accessed by downloading the App which enables the patient to have a live video consultation with a Doctor. The Doctors, accessed through this service, can deal with a wide range of matters, have access to patients’ records and can prescribe direct to a number of pharmacies. If the Doctor feels that the patient needs a face to face conversation with a Doctor, that can be booked (through the Extended Access Clinics) as part of the consultation. BC & NH confirmed that it is very quick to get an appointment using the LIVI system. RF added that one of the benefits of using this service is that patients do not need to change their Practice, unlike when using one of the private services e.g. Babylon.

The Extended Access Clinics remain popular and are providing extra capacity. The phlebotomist is now also available at the Saturday morning sessions (9am - 12 pm).

There has been a lot of change in Reception. JS is leaving at the end of the week and Caroline Watson is replacing her as Reception Manager. Hannah Chase is supporting Caroline as the Reception Supervisor replacing Caroline’s previous afternoon role. There is a number of new staff in Reception and their induction training is an additional pressure at a busy time.

One of the recently appointed Paramedics has started work at the Practice and the role is working well. The second Paramedic starts work on 3 December 2018. Both Paramedics are experienced and currently the Paramedic in post has been supporting the doctors by undertaking home visits and running clinics.

The Patients’ Leaflet, drafted by BC, is now being finalised by Ollie Ross. Ollie is a student gaining experience at the Practice prior to studying Medicine at university next year.

The headed notepaper and compliment slips have been well received and are now in use.

RF thanked members of the Core Group for their help with the Flu Clinics. To date 3207 vaccinations have been administered, the Practice is therefore well placed to meet its target of 4K vaccinations. RF remarked that this year the sessions had been more complicated due to the two different flu vaccines, the children’s clinic and the Extended Access Clinic taking place at the same time. It was agreed that the clinics were very well organised by the Nurse Manager, Charlotte Budkiewicz, who was present at every session. Mjog will now be used to remind patients who are entitled to a vaccination to attend the Practice and receive it. Patients were very generous and the cake sales raised over £1,021 for the Multiple Sclerosis Society. It was agreed that this money would be given to the Society before the Open Meeting.

In addition to Mjog the Practice is now also using a new, free texting service – Chain SMS . This enables Doctors and Nurses to send texts to patients directly after their consultation or to inform them of the result of a blood test. It is a one way messaging service and links directly into patients’ notes. This system is much quicker than having to ask a member of the administrative team to notify the patients. The system is being rolled out gradually but is already speeding up communications. The Practice and wider CCG are encouraging patients to utilise this very effective service although patients can opt out of this system if they wish to do so.

The results of the feedback from Mjog are now going to be displayed in the Waiting Room/Reception. This will be refreshed each month.

The Clinical Pharmacist has now been in post for over six months and a new prescription policy has been developed and implemented. This has led to a much quicker and efficient turn around for repeat prescriptions. Bhavini is dealing with the majority of queries rather than Doctors which is adding capacity to the service.

A new Physiotherapist service is being added to the Extended Access Clinics. This service is being organised by the local federation and it is hoped that it will commence in December, once a week on Tuesday. Patients will access the service via a GP referral.

The Practice is considering implementing the online ‘*Ask My GP’* service. This system had been chosen rather than others because it triages patients to the correct professional. RF has observed this system in operation at a Practice in Godalming, Surrey and he felt that it worked well. RF and DG are attending a workshop on 27 November to be certain that this system is right for SHCGP.

Discussions about Property have been taking up a lot of time, but RF explained that they are looking more hopeful with regard to the lease of the building. He has met with NHS Property Services and the CCG to discuss the costs of the Practice using more rooms at SHC. RF is also investigating the possibility of grants to convert other rooms, currently offices, into consulting rooms. The protection of walls in the Waiting Room is part of the discussions.

NH remarked that this list of new services and systems confirms the lack of complacency at SHCGP and its strive to continually move forward.

* Availability of on-line services including LIVI

NH informed the meeting that LIVI is one of 17 workstreams currently being supported by the local CCG to improve services/facilities. It is envisaged that the new services might replace the need for a significant number of appointments.

It was agreed that patients’ need to be advised that they can access a summary of their notes via Patient Access. In order to do so they need to register for this service and provide ID. This request will take 28 days to administer.

* The CCG and Specsavers Scheme

BC explained to the meeting that SHC is not on the list to enable patients to access the emergency service provided by Opticians.

Action: *RF to investigate the scheme*

**5. Help disseminate information:**

* Update on Patients’ Leaflet

This was covered in RF’s update.

* Feedback from members attending external meetings

DB’s feedback was included in the agenda item ‘The Big Picture’.

NH reported back that the PPG Chairs’ Meeting, he had recently attended had focused on terms of reference, setting dates of future meetings and agreeing topics to be discussed at the meetings.

NH & RF both stated that they feel that SHCGP and the PPG is more proactive than many other Practices. In particular the number of staff from SHCGP who attend meetings.

* Sharing Mjog Data

This was also covered in RF’s update.

**6. Communications Plan:**

* Displaying staff photographs

RF informed the meeting that Ollie Ross is investigating the possibility of displaying photographs on the website rather than in the Health Centre. A number of members of the group encouraged RF to consider the possibility of displaying photographs, which is common practice in hospitals.

Action: *RF to discuss with staff and report back to the next Core Meeting*.

**7. Improving the physical environment**

* Changing of the Art Display

NH informed the meeting that the Art Display will be refreshed in time for the Open Meeting.

Availability of Water Dispensers in the Waiting Room

RF reported that plans to install a dispenser will be included within the wider property discussions. RF is currently investigating a system that will use mains water rather than bottles, because they are too expensive.

**8. Action Points**

None.

**9. A.O.B.**

BC asked if it is possibletoinstall a Hearing Loop for patients with a hearing impairment

Action: *RF agreed that this is something the Practice should purchase and will be installed.*

**The date of the next PPG Core Meeting is Tuesday 15 January 2019.**

**The date of the next PPG Open Meeting is Monday 3 December 2018.**