

**Minutes of Patient Participation Group Meeting**  
**held at Laurel Bank Surgery Malpas**  
**on Tuesday 6<sup>th</sup> June 2017 at 6pm**

<u>Present:</u>	Mrs N Cappaert	Dr L Davies (LD)	Mrs W Gilpin
	Ms D Jones (DJ)	Mrs V Kirby	Mr W Koonstra
	Mrs E Lea	Mrs S Norwood	Mrs E Orme
	Mr M Pearson (MP)	Mrs K Reeves (KR)	Mr J Saunders
	Mrs L Suckley (LS)	Mrs J Yates	
<u>Apologies:</u>	Mrs G Evans (GE)	Mr J Geall	Mr R Kerry
	Mrs M Miles	Ms C Reynolds	Mr J Webb

1     **MINUTES OF LAST MEETING** – agreed **ACTION**

**Matters Arising**

a.     **Community Bus**

JW advised (*note received 05.06.17*) that while the PPG has not been successful with the Department of Transport bid, the process of fundraising continues. It is unlikely that sufficient funds will be raised to purchase a new bus, but it is hoped there will be enough funds for a decent used vehicle. On that basis, it is expected that a Minibus will be purchased by October 2017.

JW advised that they are still in need of further donations and asked if the PPG patient fund could contribute towards – this would need an application to PCF committee via EL. MP will liaise with JW to ascertain what figure is still required and investigate via National Charities to see if further funds can be obtained. MP/JW

JW also advised that Volunteer Drivers are needed who are prepared to undertake a Minibus Driver Awareness Scheme (MiDAS). Any interested volunteers should apply directly to JW. All

b.     **Royal Voluntary Service Buddying Service**

In conjunction with BrightLife, the RVS has started a Buddy Scheme in Malpas for elderly, lonely and isolated people. JW advises (*note received 05.06.17*) that there are now 5 volunteers in Malpas.

1 is already befriending a client and is happy to see another client

2 others have completed their training and are in the process of meeting clients

2 others are completing their training

Interested volunteers should contact Mark Groves, RVS Service Manager, on Mobile 0773682506, Office 01270 278091 or email: [mark.groves@royalvoluntaryservice.org.uk](mailto:mark.groves@royalvoluntaryservice.org.uk) All

c.     **Support for People Living With Cancer**

MP advised that a couple of volunteers had been recruited. Training for volunteers was discussed: LD has spoken to Georgina Clark from Brio Leisure about existing courses for volunteers to provide support to patients with a cancer diagnosis and to liaise with MP. Once this is in place LD will discuss with the clinical team how they could provide newly diagnosed cancer patients with information so that they can access this support if they wish. LD/MP

It was noted that many volunteers are not able to offer full time support but are happy to contribute on a more informal basis and that formal checks and commitment can deter some from offering their assistance. DJ noted that this issue could be addressed in the proposed Neighbourhood Care (see 5a).

Invitation to Macmillan for a talk to the PPG and other interested parties – outstanding.

## 2 FAMILY & FRIENDS SURVEY FEEDBACK

LS presented the statistics and comments (previously circulated). Comments regarding the Dispensary service will be discussed with the team.

## 3 PPG PUBLIC CONSULTATION EVENT IN MALPAS - MARCH 2017

LS presented the collated attendees responses from the Consultation Day (see attached). It was agreed that the event had been well received and that the IT demonstration had been very informative.

It was agreed that another event would be planned in an evening in October in order to reach a different demographic in the local expanding population. A planning meeting will be held to arrange details (date TBA). £250 funding has been received plus £40 from the refreshment donations on the day – expenses paid leaving a small balance in the Practice account.

CR/KE  
/ AH

## 4 PPG CHAIRS

### a. Feedback from PPG Chairs meeting April 17 (previously circulated)

LS advised that while the number of Malpas patients using the e-Consult service was low (average of 10), the greater percentage (60%) had been directed to self-care.

### b. Feedback from PPG Workshop (previously circulated)

Agreeing Terms of Reference for the PPG is good practice and should be considered. This would include agreeing how many meetings a year, re-election of the Chair and process of recruiting new members. CR has asked if the Chair's role should be up for re-election in July – it was agreed that as the new Officers are learning aspects about the role it would be more helpful for them to continue in their current roles for another year. KR happy to continue as joint Vice Chair, CR and AH to confirm that they are willing to do so.

DJ/EL

It was agreed that LD and LS will seek support from the PPG regarding the new premises proposals and the 0-5 Children Service changes.

LD/LS

In light of the changes in the population of the local area, the group asked DJ to liaise with the CCG/Public Health for demographic information. It is hoped this will inform the group what population group/issues will be important to focus efforts on. DJ will report back to EL.

DJ

### c. Next PPG Chairs Meeting July 12<sup>th</sup>

Hot topic “GP Practice appointment systems” – this was not discussed

## 5 PRACTICE ISSUES

### a. i) Integrated Community Team

The background to the development of the ICT was discussed. All 9 WCCCG teams continue to struggle with capacity problems, due to increased population and demand and reduction in staff working hours through turnover and sickness.

**ii) Neighbourhood Care**

DJ advised that £400K in Vanguard funds has been obtained by Cheshire and Wirral Partnership (CWP) with the aim to design a new model of care. The pilot will start in Malpas in September 2017 and, if successful, will be rolled out throughout West Cheshire CCG. The aim is to improve efficiency by combining services and improving communication between community health care providers and social support groups, this will reduce bureaucracy which is much easier to do with a smaller population. DJ advised that the aim was to provide holistic packages of patient care that covered physical, mental, social and financial issues and include education of the patient and their relatives/carers. The Broxton ICCT currently work this way to some degree, they will be looking carefully at what works well and modify areas of care to fit with the scheme.

The first phase of the project will be aimed at the elderly, housebound and those with chronic disease. There will be parity of esteem for Mental Health patients with support provided in the ICCT. KR noted that at the Public Consultation local concern regarding the lack of mental health care provision for young people was particularly highlighted. The savings from Phase 1 will be used to fund Phase 2 to focus on health promotion for younger people, e.g. the 0-19 services and young mums.

DJ advised that a 'Care-Arranger' would attend the rural Practices once a month to improve Social Care communication and a 'Rally Round' App has been developed to assist communication between patients and their relations/carers for simple everyday tasks.

DJ advised that the decision for provision of care would be with Clinicians and Team Managers.

LD noted that this was an opportunity for the PPG to have a say in how the Community Model will work. DJ requested PPG support for this initiative and welcomed feedback (via All/LS) in order to develop the service.

**iii) Housebound Patient Definition**

In the 'Guiding Principles for Determining the Setting for Care Provision', the CWP has detailed the criteria for determining whether someone can receive care at home. The group discussed this definition and found that no mention has been made of criteria for patients in the rural setting. Concerns were raised that if these draft criteria were to be agreed, a vast number of rural patients would effectively be excluded from the care they need due to their inability to access transport. LD noted her concern that this 'blanket' policy did not appear to reflect the differing demographics and needs of the 3 distinctly different localities.

Extended Hours could provide appointments at times when family are available to transport their relative to appointments – will there be services available to provide vaccinations, dressings, phlebotomy and a chaperone service?

LD and LS will raise these concerns at the next Rural Locality Meeting. LD/LS

PPG will write a letter urgently highlighting these concerns to Alison Swanson at the CWP. CR/KE

**b. New Premises**

JW advised (*note received 05.06.17*) that, as a Parish Councillor, he has been involved in supporting the Practice in finding a way to develop a new Primary Care Centre. A local landowner offered a piece of land and outline permission has been granted. In discussion with the CCG Surveyor the landowner will submit revised plans for a larger plot for the new building in a different location on the site. The revised planning application will be submitted in September. In the meantime the landowner would be grateful if the PPG could consider

the matter and offer their support.

LD advised that the process continues to be a lengthy one but in the future the Practice will have to move due to lack of space, whether this follows the present plan or another. There will be a meeting for practice representatives with the Parish Council in July.

**c. Baby Clinics**

LS advised that CWP who have the contact for the 0-19 service intend to cease holding the Baby Clinics in Malpas. It is CWP's intention to replace the Malpas clinics with clinics in Tarporley, Tarvin and Tattenhall. LS has contacted the commissioner of the service (CWAC) and will work with them to ensure the core principles of health visiting work are provided for our practice population. It is hoped to maintain 2 clinics a month, probably on different days and for a shorter duration. The group discussed the possibility of a Health Visitor attending the Cheeky Monkey's Playgroup monthly and holding a baby clinic at Malpas surgery once a month. LS will discuss with the Commissioner and ask CR for PPG support in the redesign of this service.

LS/CR

**6 AOB**

**a. Health Watch Cheshire West**

A link to survey will be sent out to members.

JY

**b. Brightlife**

JW advised (*note received 05.06.17*) that Louise Gough, Social Prescribing Coordinator, left her post on Friday 2<sup>nd</sup> June. The advert for her replacement is current with a closing date of 14<sup>th</sup> June. Referral rates to Brightlife Social Prescribing have reduced, giving some cause for concern and have been discussed with the Practice. It is expected that the introduction of the Neighbourhood Care Design model will boost referrals.

**c. Craddock Court**

GE advised (*note received 31.05.17*) that in early May the residents of Craddock Court were without hot water for a week, and there were reports of frail, unsteady, elderly people carrying kettles of hot water from the kitchen to the bathroom so they could have a strip wash. Many of the residents also suffer with degrees of incontinence and want to wash themselves properly. In the winter they were without heating for a week too. Although some of the residents contacted Sanctuary Housing, without a warden to speak up for them they felt their voice was not heard.

GE suggested that these vulnerable people need someone in the village who they can contact to be a voice at times like this: possibly call in once a week to check no one is at risk from poor maintenance or other issues.

KR

KR to liaise with Sanctuary House Trust and report back to LS.

**d. PPG Chair**

Cathy Reynolds was re-elected unopposed to continue as Chair of the PPG.

**The meeting ended:** 7:40pm

**Next PPG meeting:** Tuesday 3<sup>rd</sup> October at 6pm