

**Minutes of Patient Participation Group meeting**  
**held at Laurel Bank Surgery Malpas**  
**on Wednesday 6<sup>th</sup> July 2016**

<u>Present:</u>	Dr L Davies (LD)	Mrs L Suckley (LS)	Mrs G Evans
	Mrs C Reynolds	Mrs N Cappaert	Mr F Dimelow
	Mr J Geall	Mrs W Gilpin	Mrs V Kirby
	Mr W Koonstra	Mrs S Norwood (SN)	Mr M Pearson
	Mrs K Reeves	Mr J Saunders	Mr J Webb (JW)
<u>Apologies:</u>	Mrs L Bainbridge	Mrs J Farrelly	Mrs A Harrison
	Mr R Kerry	Mrs P Lomax	Mrs S Peters

**1 Welcome**

LD welcomed everyone to the meeting, expressed her thanks on behalf of the practice for their continued support and thanked the new Chair and Vice Chairs for taking a proactive role.

**2 a) Role of PPG group**

CR raised the question of the role of the PPG Group within the practice and what the doctors and staff want from the PPG. She suggested that PPG members might look at the National Association for Patient Participation website at <http://www.napp.org.uk> to get an idea of what other PPGs around the country are doing. CR feels that the PPG are ready to have something to do or achieve and suggested that time should be spent at the next meeting to discuss this. The meeting was in favour of this suggestion.

*Short excerpt from NAPP: The first Patient Participation Group was set up by a GP in 1972 and many general practices in England now have a PPG. Generally made up of a group of volunteer patients, the practice manager and one or more of the GPs from the practice, they meet on a regular basis to discuss the services on offer, and how improvements can be made for the benefit of patients and the practice.*

*The beauty of PPGs is that there is no set way in which they work - the aims and work of each group entirely depends on local needs - but they all have the aim of making sure that their practice puts the patient, and improving health, at the heart of everything it does.*

**b) Malpas Patient Comfort and Equipment Fund (PCF)**

GFE asked about the Malpas Patient Comfort and Equipment Fund. LD explained that this is a fund which was historically managed separately from the practice by the District Nurses. Families of patients who are looked after by the District Team make donations to the fund. One of the GPs will act as Medical Advisor to the Fund Committee; ideally other committee members should be patients and members of the public.

The funds have always been used for purchasing pieces of equipment to use with groups of patients e.g. electronic scales, home blood pressure monitors etc. or to provide night sitters for patients who are in the last few weeks of life and wish to remain at home as a support for families.

Sister Emma Lea, the Integrated Team Manager, has agreed to take over the role of Chairman from Dr Hulbert who retired. GE suggested that a sub-group of the PPG could be set up to help manage the fund. CR agreed that it seemed reasonable to link PCF with the PPG.

LS confirmed that there was a substantial donation made a few years ago and the fund has a balance of approx. £16,000.

**c) Brightlife**

JW reminded the group of the PPG link with Brightlife. Brightlife (Louise Gough) in conjunction with Community Compass are progressing well with their Drop In sessions on a Friday and the Wednesday Coffee mornings. Community Compass have tendered for a Buddying Service which could be provided for the elderly isolated patients if successful.

**3 Feedback from PPG Chairs meeting**

KR attended the Chairs meeting in March. 20 Chairs, Vice Chairs and/or Secretaries were present, as well as approx. 10 members of the CCG team. Initially it was a bit of a terminological learning curve for many in the room. A number of members felt the need for more background information on the workings of the CCG and other areas. It has now been agreed that links to appropriate information would be included with the minutes when they are sent out. It was suggested from the floor that a 'Beginners pack' may be useful to newer members and contact details of attendees will be included with the minutes to enable direct contact between PPG groups.

There have been a few problems with CCG members involved with the PPG groups; minutes of the previous meeting were not available and some of the Group Chair meetings had been cancelled/re-arranged at short notice - to the annoyance of members. Assurance has been given that this has been resolved and it was clear the CCG value feedback from PPG groups.

Garett James, CCG Chief Finance Officer, gave a presentation on the current CCG financial position: the CCG budget is in deficit by £15m. To assist with the overspend, the CCG are promoting the West Cheshire Way for patients to focus on self-care, together with a decrease in drug prescribing and emergency care costs.

The full day meeting and workshop on 13th April was cancelled and the next meeting is Tuesday 12<sup>th</sup> July. CR confirmed that it is her intention to attend future meetings. Attendance can either be shared by the 3 PPG Officers or all can attend if they have a particular interest in an agenda item.

**4 Family and Friends Survey (March – June 2016)**

The group reviewed the results of the F&F Survey for the last 4 months. In March and April the survey was included in a questionnaire for our Community Frail Elderly Nurse project and the response rate was much improved. The practice will try to continue to include the questions with other surveys as the year progresses.

It was suggested that the F&F questionnaire should be in reception rather than in the Waiting Room to attract the attention of patients. We will endeavour to place it by the Automated Check In machine. KR suggested that members of the PPG may be able to attend during Flu Clinics to engage with patients and encourage them to complete the survey. LS felt this would be most helpful and will inform CR of the clinic dates.

We reviewed 27 comments. The majority were very positive and complimentary about the practice except for 2 comments about the practice needing a larger car park.

There was also a comment from a new patient who had been unable to get the referral they wanted and felt that the practice opening hours do not accommodate working patients. The comment had been made anonymously so we are unable to inform the patient about the new Extended Hours service.

LS had raised the parking of cars on the main road as a hazard and CWAC had promised to look at possible solutions.

LS outlined the Extended Hours service which is currently offered on Monday and Thursday evenings from 6.30-8pm and a Saturday morning from 9am -12noon. The service is provided by Cheshire and Wirral Partnership Out of Hours Service and had not been consistent since it started in April. Cancellation of the surgeries is either due to no GP allocated to work or lack of reception cover. CWP are not willing to accept practice staff involvement; staff must be employed by CWP. LS hopes that this will improve by September. It was agreed that CR would write on behalf of the PPG if the service continues to be cancelled regularly. LS will keep CR updated.

## **5 NHS West Cheshire Clinical Commissioning Group Prescribing**

The Pharmacist Team and GPs within the CCG have done a lot of work on areas of the prescribing budget. Practices do not overly prescribe antibiotics etc. and it is becoming more difficult for practices to reduce prescribing costs in the main disease areas. The CCG therefore needs to look at other areas.

LD explained that as part of the financial recovery plan, the CCG propose to stop prescribing treatments and medicines for short-term, minor ailments and gluten-free food. Before the CCG inform the GPs that CCG policy is not to prescribe a product, they must carry out a public consultation.

The feeling of the PPG was as follows:

1<sup>st</sup> group - agree the prescribing of simple analgesia, antihistamines, vitamins, toothpaste and treatment for mouth ulcers and warts should be discontinued. LD explained that through the Pharmacy1st service, the Pharmacist can prescribe these items within their guidelines without taking a prescription fee from patients.

2nd group - WCCG want to stop all prescribing gluten-free products (some CCGs are continuing to prescribe gluten-free flour and bread). It was felt that supermarkets now sell a large range of gluten-free products at a similar price to those with gluten. Coeliac patients are the group affected by this change.

The PPG members felt that this is the sensible approach and support the CCG with the caveat that problems will occur if patients really cannot afford purchasing themselves, so real hardship cases need to be identified. LS will relay this back to the CCG through the Public Consultation process.

## **6 CQC Practice Visit**

Registration with the Care Quality Commission is part of our contract to practice and the CQC visit is part of this. The day was lengthy but the overall feedback from the Inspection team at the end of the day was very positive. LD thanked all members of the PPG who gave up their time on the day to come and talk to the Inspectors who were very impressed by the strength of support from the PPG members. This was an invaluable support for the practice team. We expect the draft report within the next few weeks.

## **7. Any Other Business**

### **a) Macmillan**

MP discussed the local Macmillan service. As an "Expert Patient", MP has been scheduled to carry out talks about Coping with Cancer, what to expect during treatment and what support is available for interested cancer sufferers and their families. The sessions will last for 6 weeks. MP will let the PPG have more details once the sessions have been arranged. Macmillan looking

at funding 2 or 3 pilots as WBC role, Age UK, funded by Macmillan. JW will inform PPG as more information becomes available.

**b) Delivery and Collection of Patient Records**

LS raised the issue of the change to the movement of patient records. NHS England has awarded the contract for this to Capita who took this over in April 16 together with a number of management functions. The weekly delivery and collection of patient records (of those patients who have registered at the practice or who have transferred out, having registered elsewhere) ceased on 16<sup>th</sup> March. We then had no delivery or collection until 5<sup>th</sup> May (7 week period). By this time we were waiting for more than 100 records. Since then we have received 8 delivery/collections and are now outstanding 170 sets of notes. LS has raised this at the highest level with the CCG, NHSE and the LMC. It was agreed that CR, as the PPG representative, will write to the local MP if the situation does not improve. LS will keep CR updated.

**c) Twinning Opportunity**

JW discussed the opportunity for Malpas to be part of a twinning opportunity between Donegal and Malpas Dementia Friendly communities. LD felt it would give more focus to the Malpas dementia friendly initiative. JW confirmed that we have 200+ dementia friends and a number of dementia champions. LD felt it would be interesting to follow up as we can always learn from others; she would be happy to join in a visit to Ireland. CR agreed with the members that the PPG are happy to support this but would need to know what it involves and what do members of the PPG need to do. JW will respond and let CR know the outcome.

**d) Proposed Closure of Whitchurch Practice**

LD confirmed that so far the practice had felt minimal impact from the closure of one of the Whitchurch practices and that this is not causing a problem at present. She informed the PPG that there are potential plans afoot to deal with the closure that involves all the Whitchurch GPs, Shropshire CCG etc. We are declining any registration applications coming from patients who do not live in our practice area.

**e) Time and date of Next Meeting**

CR asked the meeting how often they would like to hold the PPG meeting and it was agreed that the frequency will be four times per year. The members were happy to meet at the Practice at the moment.

The next meeting was agreed for 19th October. However, subsequently the Chair has asked for this to be changed as it clashes with an all-day meeting of PPG Chairs called by the CCG. Please note the new meeting date is **Wednesday 16th November at 2.30pm.**

The meeting closed at 8.20pm.