

**Minutes of Patient Participation Group meeting
at Laurel Bank Surgery Malpas
on Wednesday 25th November at 2pm**

<u>Present:</u> Dr L Davies (LD)	Mrs G Evans	Mrs L Suckley (LS)	Mrs V J Kirby
Mrs S Norwood (SN)	Mr J Geall	Mr L Pearson	Mr R Kerry
Mrs C Reeves	Mrs W Gilpin (WP)	Mrs A Harrison	Ms A Handley
<u>Apologies:</u>	Mrs N Cappaert	Mrs M Miles	Ms A Lafdil
Mrs L Bainbridge	Ms H Mountjoy	Mr F Dimelow	Mrs C Reynolds
Mrs H Craddock	Mrs N Ritchie-Noakes	Mr W Koonstra	Mrs C Rowland
Ms M Fardoonji	Mr J Webb (JW)		

1 Welcome

LD welcomed everyone to the meeting including new members, Mrs Anna Harrison and Mrs Kate Reeves.

Following issue of the Government's financial statement today, LD advised that there were increased funding constraints on all public services including the NHS. The NHS cannot continue to spend as previously and the local CCG is currently £2M in debt. This is not as concerning as other areas but is still a responsibility so the CCG has appointed a Turnaround Director to look at spend and discuss future options.

LD reassured the meeting that the proposed national Junior Doctor's strike in December does not affect the practice as no GP trainees are employed at Laurel Bank Surgery.

2 Items arising from Minutes

a. Facebook Page

This will be made public today. PPG members will review and feedback.

b. Premises

The meeting was advised that there has been no progression on this issue in the short term. Plans for future-proofing involve increasing co-working with our Cluster practices (Farndon and Tattenhall, now known as the Village Surgeries). It was agreed that the presence of a GP surgery in a village is vital to the local community. The meeting was assured that it is the Partners intention for Laurel Bank Surgery to remain as a primary care service providing GP and Nurse appointments, Reception and Dispensary.

The idea of a cluster hub premises is currently in very early discussion stages, and this very much new territory. This would provide facilities for Hospital Consultant clinics, diagnostics and investigations, minor operation procedures and the integrated community nursing team with a combined back office facility on 1st floor. This will be dependent on NHSE funding which is only available for innovative plans and to provide additional community services (out-reach from hospital). The partners still have plans for a new build on Chester Road but don't know how the plans for a cluster hub might impact on Chester Road proposal. A cluster building may need to be sited more cluster-central.

c. Defibrillator purchase

Purchased by the practice at a cost of £1200.

3 New Services

a. Extended Hours

Dr Davies explained about the government's wish for GP practices to be open from 8am to 8pm, 7 days a week. As a response to this, from January 2016 Western Cheshire CCG will be operating an extended hours service from the practice on Monday and Thursday evenings from 6:30 to 8pm and on a Saturday from 9am to 12pm. Doctors and reception staff who work for the service may or may not be familiar to Malpas patients.

The service is available for any patient registered in WCCCG, the appointment is for routine care and should be booked ahead: it is not a service for patients who are particularly unwell on the day. The funding is time limited and will only continue if the service is well used.

b. Physio First

The new Physio 1st service starts in January 2016. This service is to be offered to patients ringing for a GP appointment for a musculoskeletal problem. The Physio will assess the patient and will refer for further physio treatment, arrange an appointment with the GP, give a prescription for pain relief or advise on self-care. Reception staff will be trained to signpost patients so will ask why the patient is attending to give the most appropriate appointment.

c. Broxton Cluster Frail Elderly Nurse

This is a new service for the Cluster patients. Sister Gill Evans has been seconded from Laurel Bank to work as a Cluster Practice Nurse to visit housebound patients to carry out their chronic disease review for patients in all 3 cluster practices. She will complete and leave a Care Plan in the patient's home to inform any visiting Doctors or Paramedics about the patient's clinical care, current problems and medication, latest blood results and the social aspect of how the patient usually lives. The new service has been well accepted.

d. Wellbeing Coordinator

A new WBC will be in post by the end of next week. She will be an additional resource for patients and the clinical staff will be able to refer patients to her for help with social problems e.g. housing problems, benefits etc.

e. West Cheshire Way

Dr Davies explained that WCCCG are promoting this programme. West Cheshire Way involves prevention, self-care and hospital services to be available in the Community. There is an increasing elderly population with multiple health problems, a decrease in social care funding and the GP role is still funded as it has been for many years – this all needs to change. The CCG are looking at how this can be done.

The CCG requirements fit very well with our view on healthcare. Cluster working with the Village Surgeries provide this together with a cluster hub to site community services.

LD reported that she has a new role at COCH to work with Consultants one day a week to see how this gap between hospital and practice care can be bridged. One idea is for Malpas to trial virtual clinics for out-patient appointments. WG asked how a Consultant coming out to the local practices saves money: it was noted that this provides better care for patients who are often elderly and have less contact with the hospital. Malpas is hoping to pilot consultant's review of patients over a skype link, and hold out-patient clinics in the Community if successful with their premises bid. It may be possible to look at the cost of Consultants carrying out clinics at Tarporley Hospital to compare with secondary care costs.

4 Brightlife

Anna Vogiatzis is the Social Prescribing Manager of the Brightlife programme. This is a 5 year National Lottery-funded programme to reduce social isolation (which has major impact on their health) for the over 50s, by older people for older people; to allow people to support one another and support themselves. £5.2M programme over the 5 years – a team of 10 who take 10-20% of the funding, remaining is to support on-going projects.

AV acknowledged that there are local projects (e.g. Walking Group) which have been extremely successful. She has worked with the practice for 6 months and with the Parish Council and has held local village events. Louise Gough starts on 07.12.15 as Brightlife Social Prescribing Co-Ordinator and will be based at Malpas Fire Station. She will take referrals from 04.01.16: she will meet with each patient for goalsetting and to agree an individual plan. Conscious not to flood the current local activities, she will commission some activities e.g. befriending scheme, meal sharing and a rolling programme of taster sessions for people to drop in so people get a view of what it entails. People can self-refer as well.

Brightlife is also looking for volunteers e.g. a reference group for Malpas to collect local information. This is also an opportunity to join the Older People's Alliance and to become a Community Connection for a two-way conversation about spreading the word. Open to both Carers and anyone with a local connection for Social Prescribing, even if they do not have a Malpas address.

A Bright Ideas Bank is being built and individuals or groups can bid for these. AH mentioned the very successful and well used further education evening courses for adults held at Bishop Heber School which have been closed. The University of the 3rd Age was mentioned as a possible alternative.

Brightlife will be providing free coffee in Oakdens Firestation on a Monday from 11-1 from 7.12.15. Other ideas are Men in Sheds and Broxton Barn Owl Watch. AV mentioned that the Forget-Me-Not Café and Musical Memories have very successfully combined and just won an award. LP suggested that School Teachers could be asked to arrange for children to visit elderly people.

5 Review patient Feedback - see attached.

6 Any other business

Chair of Meeting: Dr Davies raised the issue that the Chair of the PPG needs to be a patient. There are WCCCG events for PPG Chairs to attend, this is a networking opportunity which is being missed.

Dr Davies reassured the PPG members that she will continue to attend the PPG meetings and report what is happening and the practice will continue to administer the agenda and minutes. Dr Davies asked if anyone is willing to stand.

It was agreed that the practice will contact all PPG members specifically to ask for expressions of interest, separate to sending the minutes of this meeting.

Development of Village: LP spoke about the emphasis on affordable housing but nothing for older generation (no bungalows). It was agreed that this is a Planners/Developers issue, efforts have been made to address this and it is covered in the Neighbourhood Plan.

Date and Time of next meeting: Tuesday 23rd February 2016 at 7pm