WHITECLIFF GROUP PRACTICE (PPG)

MEETINGHELD AT THE BLANDFORD SURGERY

WEDNESDAY 6TH JUNE 2016

**Part 1: Practice Matters**

1. **Welcome and apologies**

**Present:** Kim Bateman, Gwyn Bates (Chair), Keith Harrison (NHS Dorset CCG), Hazel Haigh, John Carter, Sue Inman, Ted Moss, Fiona Macewen, Freddie Bannock, Sara Stringer (Reception Team Leader), Graham Cobb, Graham Downer, Carol Tilley (Practice Manager), Jane Simkin (Macmillan), Dr Mark Nankervis

**Apologies:** Joyce Lee, Liz Lee Charlie David-Lloyd, Jane Bristow

Gwyn welcomed Graham Cobb to the meeting and reported that Peter Newall has tendered his resignation, however he has talents that could be useful to our group and will help us if needed and he has time. Suzanne Macleod has also resigned as she now has a full time job. As she works for NHS PPEG (Patient Participation Engagement Group) working with clinical services review which is also very valuable to us she will be welcome to join us when she can to provide an update.

1. **Actions from last meeting**
2. **Practice report**
* The day to day pressures have eased. Dr Purcell has returned from maternity leave and Dr Slater will be back at the end of June.
* The national debate regarding GP shortages and lack of funding continues. The Local Medical Council and the BMA’s national conferences have discussed concerns for the future of the NHS as a whole. Mr Graham Cobb asked about the funding and whether the Practice would consider moving. Carol Tilley explained that we receive funding for every new patient that registers with us. In the plans for the new housing estate there is a ring fenced site for a new surgery, at present there is no intention of setting up another surgery, funding is not available and there are insufficient GPs. However although there are a various scenarios being looked at to plan for how the growing population can be served by Primary Care Services.
* The Practice is fully resourced. It is still looking to recruit additional clinical staff as part of its longer term succession planning. Room space is now also starting to limit the Practices ability to expand and offer more services. At present some of our Dr’s have to hot desk. Planning is underway to address this. There may be funding with the new houses being built in Blandford and there are NHS grants available; but there will be with ‘strings attached’ i.e. 7 day working. However the Practice does not have the resources for this; and this will cost more than a 5 day week service as there will be more overheads to consider (heating, reception, blood collections). There are a lot of issues which need to be explored and the Practice will continue to look for solutions.
* The practice offered 8,290 appointments last month (face to face and by phone across both surgeries) Dr Nankervis explained the triage system works well and keeps patients safe. The GP can decide if the patient needs to be seen on the day, can be dealt with over the phone, or the doctor can offer an appointment for 2-3 days’ time. Although our triage system is GP led the Practice’s Nurse Practitioner is also skilled in this. At the Blandford surgery 1,705 appointments were for urgent/same day, with an average of 81 urgent calls each day. Urgent appointments at Child Okeford are added to the end of surgeries or slotted into gaps on the day and average around 20 a day.
* There were 297 missed appointments last month (4%) Mr Bannock suggested missed appointments should incur a £10 fine as this will encourage patients to either cancel their appointments or be more conscious and attend. We are unable to charge as the NHS is free at the point of contact. The Practice does monitor missed appointments, if a patient misses 3 or more appointments then a letter is sent to them. It is difficult to determine why appointments are missed. Some are missed by vulnerable patients and for these patients the doctors will usually follow this up with a phone call if they do not arrive for their face to face appointment to check that they are alright / safe.
* The latest CQC Intelligent Monitoring Report for the practice shows that the practice performance is either in line with the majority of other surgeries across the country and is a high performer in respect of diabetes, mental health and asthma care.
* The latest locality performance data produced by Dorset CCG shows that the Practice has very low rates or emergency attendance at A & E for the over 75s and has reduced its overall emergency admissions rate. It is one of the highest performers in Dorset in respect of this.
* The Practice met with Boots and NHS England to discuss the issues that Boots have been experiencing and to explore how the Practice can support Boots and improve working relations. It was a very positive meeting and further meetings are planned.

**PMS Contract Review**

The practice has now met with NHS England who has since revised down the amount of money that is being withdrawn from the Practice from £71, 000 to £47,000.

The additional claim for repayment of PMS overpayment of £53, 000 has been revised down to £4,000.

This is extremely good news and means that the Practice will not need to make any service cuts, which was its main concern regarding this matter.

**Patient Feedback**

The results for April 2016 are as follows.

* (Questionnaires completed - 73 hand written. 25 through website)
* Extremely likely to recommend us to Family and Friends - 52%
* Likely to recommend us to Family and Friends - 41%
* Neither likely or unlikely to recommend us to Family or Friends- 4%
* Unlikely to recommend us to Family and Friends - 2%
* Extremely unlikely to recommend us to Family and Friends - 1%From January to March 2016 the Practice received 10 compliments.
* We have 193 ‘likes’ on our Facebook page and a Google rating of 4.7 out of 5 (11 people rating the practice with 5 stars and 1 rating at 1 star).
* From April to May 2016 the Practice received 13 complaints. 8 were not upheld (vexatious patient, patients not understanding the process / constraints of the NHS). 2 of these complaints have investigations that are ongoing, so do not yet have an outcome.
* After investigation, 3 of these were ‘upheld’ or ‘partially upheld’ The ‘upheld’ complaints were in respect of the following issues:
* Poor communication between a patient and a doctor.
* A delay of 1 hour 20 minutes in the waiting room to see the GP.
* Out of stock medication.

1. **Practice Projects**
* Some members of our PPG have formed a sub Group to help the surgery to find ways to maintain and improve patient satisfaction and efficient use of it's resources through education and communication with patients. There has been a lot of analysing and now they are beginning to have some outputs. They are putting together leaflets for the Well and Connected event to raise awareness and operations of the surgery as best they can.
* The Practice has made some internal changes to up-skill staff to help remove some aspects of admin from the doctors. This will enable the doctors to spend more time on the clinical aspects of their role.
* The Practice is looking at various IT solutions to support the doctors with their work and also exploring how patients may have greater electronics access to medical advice.

**Part 2: The Wider Community**

1. **Dorset PPG Chairs Forum Update**

Gwyn reported that Phil Richardson Director of Transformation at the CCG talked about the Clinical Services Review (CSR), Dr Simone Yule, a GP from Shaftesbury who is the North Dorset Locality CCG board member was also in attendance, and it seems Mr Richardson was given quite a hard time through questions asked. There has been £3.4 million spent on the CSR and all that has resulted in so far is a proposal for acute hospitals, lots of number crunching, lots of statistics; but no outcome. This does not seem to be about people just numbers and they are currently a year behind schedule. A lot of the consultation events have been poorly attended probably because the meetings are held during the working day. Graham Downer suggested putting all comments together and sending a letter to say we would all like to be involved.

1. **Liaison with Eagle House PPG**

Gwyn and Hazel attended a couple of meeting at Eagle House Surgery and they had discussions in general on how we could work together more. Both surgeries will be working together at the Well and Connected event to be held in the Corn Exchange on Friday 1st July and Saturday 2nd July 2016.

1. **Clinical Service Review**

After a year of delay the CCG are currently seeking NHS England approval for their proposals to go out to public consultation regarding the acute hospitals configuration proposals. Freddie Bannock said that this was all about Poole and Bournemouth and not much about Dorchester, he was concerned that it would be a much longer journey to Bournemouth. Bournemouth could be beneficial as they have a major trauma unit, some will still go to Southampton. It was clarified that the proposal is that Poole A&E should remain open but all blue light emergencies would go to Bournemouth and not Poole. If patients are not happy they do need to speak up. There are some good points on the Dorsets Vision website [www.dorsetsvision.nhs.uk](http://www.dorsetsvision.nhs.uk) (Our Vision for the Future of Health and Care in Dorset). The public consultation will be in September. There will be a Roadshow across the County and there are plans to have an information bus in the car park behind Morrison’s in Blandford on 23rd June for about 2-3 hours (Referendum Day).

1. **Health Network Meeting Update (Graham Downer)**

The last Health Network Meeting had a member of the Health and Wellbeing Board in attendance and who gave a presentation. It was very good however attendees seemed a little sceptical about the Board and it was hard to convince the attendees that they are doing a good job. Councillor Andrew Kirby seems to have taken a lot of interest in Health issues and will be very good if he stays on board. They now have a new Health Network Chairman Mr Bob Trethewey and Graham Downer is now Vice Chairman and will continue to report back to our PPG group. Practice Managers have not been able to attend these meetings recently, but they will endeavour to have a representative there at the next meeting. Practice Managers do however meet quite often as a group to discuss local issues. Mr Trethewey had asked if it was possible for the Practice to help patients out with collecting their medication from shops/post offices whilst the work is currently being done on the bridge in Shillingstone. Unfortunately this can’t be done due to concerns regarding governance. This practice had to stop as the shops were not following pre-agreed safety and confidentiality agreements that were in place (e.g. the medications need to be locked away, not kept under the counter).

**Part 3: Developing a Community Active group**

1. **Dementia Friendly Blandford**

The Practice recently participated in national Dementia Awareness Week in both surgeries, where there were tables full of information for patients which were manned by members of our PPG Group. (Carol Tilley said she was very grateful for all their hard work and time the patients put into this and other projects).

1. **Carers Group**

Jane Bristow is still very much involved in this. This week is national Carers Week and there are tables in the surgeries this week to promote this. A lot of people do not realise they are carers as it could be their husband or wife they are caring for. This table as also been manned by members of our PPG Group. Debbie Collins is our Carers Lead in the surgery and deals with information for patients.

1. **Well and Connected event 1-2 July 2016**

The Well and Connected event is run by the DT11 partnership. This is its 3rd year and it will be held in the Corn Exchange, Blandford. Gwyn has got some for volunteers to help man the Whitecliff stand which we will be co sharing with Eagle House Surgery. The Practice will have staff in attendance to be able to offer Health Checks. The Saturday is more sports based and is geared for families. The Clinical Commissioning Group staff will also be there to discuss the proposed acute hospital configuration and to talk generally to people. The Practice’s main aim is to sign up as many patients to the VPG (Virtual Patient Group). The PPG Sub Group are also going to produce a Blandford version of the NHS ‘Choose Well’ leaflet on how to get the right treatment, a hand out with information on medication reviews and will also be encouraging patients to give Reception staff more information when requesting a call from the GP, so the GPs can prioritise their triage lists.

1. **Medicines Amnesty**

This is ongoing – the Chairs Group are working together with North Dorset project this will possibly be in October. We would like to encourage Boots to be involved in this as well as there is a cost relating to the disposal of medication. Medication ideally would be returned to the dispensary / pharmacy that supplied it.

1. **Macmillan – Dorset Cancer HSS Project**

Jane Simkin from MacMillan joined our meeting to tell us about the new Signposting and Support Services available which started on 9th May 2016. It was established by speaking to people to identify their needs, rather than doing surveys to see what kind of help they needed once diagnosed. The answer was that people wanted help in the local community. This service is being funded by Macmillan, but not many people are aware of it. At present there are 4 Hubs in Dorset – Gillingham Library, Blandford Hospital, Kinson Library and Broadstone Library. At Blandford Hospital they are currently there on a Monday afternoon 2pm to 5pm just inside the main entrance. They do have access to a private room if required. They would like to make this a listening service which was originally going to be run by volunteers but this has proved quite difficult as they will need a lot of training on supporting patients. They would like the PPG and surgeries to spread the word regarding the service and Macmillan would also like to look to being based at places closer to the town centre where people can easily find them. (There are leaflets in the surgery with information on how to get in touch).

1. **AOB**
* Gwyn Bates will be standing down as Chair form our PPG as she is moving away. Gwyn will send out a call for nominations from the current PPG for a replacement Chair Person. In the event of more than one nomination Gwyn will organise a simple ballot of all members.
* We will be sending confidentiality forms to all our PPG members to sign for when they are in the surgery helping with events etc.
* There will be a Dementia Awareness / Training event sponsored by The Whitecliff Group Practice that will take place on Friday 8th July in the Parish rooms. This is open to anyone that is interested.
1. **Date of next meeting Wednesday 10th August 2016**