

Minutes of PPG Meeting 02 February 2016

Present

Shobhna Dave (SD)	Pauline Coulthard (PC)	Beverley Tavares (BT)
Daphne Tibbles (DT)	Elisabeth Clarke (EC)	Sandra Reed (SR)
Pat Gidley (PG)	Sue Sullivan (SS)	
Dr Hopeson Alifoe (Dr HA)	Caroline Rose, PM (CR)	

Apologies : Vinayak Supekar

	ITEM	ACTIONS
1.	<u>Minutes of Last Meeting</u>	
1.1	Minutes of last meeting on 01 December 2015 were approved. New member Pat Gidley was welcomed to the meeting and introduced to those present.	
2.	<u>Proposed nursery block, Holmwood School</u>	
2.1	PG and SR attended the Parish Council Planning meeting on 01 February where the above was discussed. Notes taken during the meeting were provided to those present.	
2.2	Hilltops has already lodged its objections and has requested that PPG contacts Adam Smith, Senior Planning Officer (Development Control) with further objections. This was agreed, based on already limited Hilltops staff and patients parking, risks associated with increased traffic including access for emergency vehicles, safety of children, Hilltops' anticipated increased patient numbers following the Western expansion, planners' unknown/undisclosed statistics, etc. A copy will be provided to CR. A note of a proposed solution will also be drafted, circulated for input and submitted to the Parish Council for consideration.	PPG
2.3	The 08 February deadline for the submission of objections was noted and this will be the focus of further enquiries in the meantime. Also noted, there has been very little publicity about this proposed development to date.	

3.	<u>News from the Practice</u>	
3.1	CR explained the current stage of the PM’s Challenge Fund. There are 5 or 6 hub practices in MK who open their doors for hub appointment patients between 7am – 8am and 6pm – 8pm daily, including Broughton, Wolverton, The Grove and 4 other Practices. These appointments are put on line for Hilltops to access and offer to patients when all Hilltops scheduled slots have been taken. There are also appointments similarly made available for Saturday and Sunday.	
3.2	This form of Hilltops additional appointments went live from 07 January 2016, since which time 138 hub appointments have been used. At the time of being offered these appointments, patients must agree to share their records so that GPs at hub practices have access to all information relevant to each consultation. These appointment are with the exception of routine consultations (eg for diabetes). Patients from Hilltops visiting a hub practice can have any referrals made from there and Hilltops will be notified of these referrals.	Newsletter
3.3	Hilltops is part of the 2 nd wave of the Challenge Fund, part of a group of 22 practices, and their inclusion within the hub continues until 31 March 2016.	
3.4	Patients needing urgent consultations will continue to see MKUCS and need to ask for an ‘MK Extra’ appointment.	
3.5	Among Hilltops routine appointments, 3,611 slots were offered to patients in January, of which 175 resulted in DNAs, clearly demonstrating that sufficient appointments are available. If those 175 patients who failed to cancel their unattended appointments had done so, then those 175 wasted slots could have been offered to other patients.	
3.6	It should be noted that Hilltops is not advised of DNAs at referred hub appointments given to Hilltops patients.	
3.7	EC raised a problem of texted appointment reminders not being received. CR asked for the dates when these texts should have been received in order to investigate.	EC/ CR

3.8	DrHA emphasised the need for patients to note their appointment dates and not rely solely on text reminders. The text reminder system is run by the NHS, who pay for the system and have control of it.	
3.9	The new appointment system has been up and running since 02 January 2016, with no adverse feedback. Among the changes are more on-the-day appointments.	
3.10	As of 03 January, there are now 4 pre-bookable appointments per GP per day, 8 on-the-day appointments and 1 or 2 the week before. It has been noted that on-line appointments are taken extremely rapidly. Noted that on-the-day appointments are also subject to DNAs.	
3.11	CR advised that a new Team Leader is joining Hilltops on 15 February following the departure of Natasha, who has relocated.	Newsletter
3.12	Jenny, Hilltops Practice Nurse, retires on 18 February 2016 but will continue to attend Hilltops one day per week in order to provide support for the new nurse. Jenny will continue to cover such services as Family Planning clinics.	Newsletter
3.13	A new GP registrar, Dr Becky Bloxham, joined Hilltops as an ST1 GP (Specialist Trainee, first year) on 26 January 2016.	Newsletter
3.14	<u>New patients</u> CR advised the meeting that new patients from the White House (opposite Crown Hill) are applying to register with Hilltops. It currently appears that only Hilltops and the Wolverton practice are taking these patients. Apparently, NHS England supplied this information to Iain Stewart MP.	
3.15	The above is in spite of CCG being unaware of this. Negotiations on this arrangement should have taken place between NHS England and themselves beforehand. It is anticipated that there will be no additional surgery provided for the Whitehouse area until 2019. This is in spite of 6,000 new dwellings in the new development area equating to possibly 15,000 additional patients to be registered in the area. Currently, two other practices have refused to take additional patients from these developments because they have just taken new patients from a development in Deanshanger.	

3.16	It has been decided that new patients from Fairfields, however, will register at the Wolverton practice.	
3.17	CR also raised concerns about the increasing level of abuse being levelled at Hilltops and its staff. Local social media is regularly showing numerous detrimental messages, often written on the basis of misunderstanding and a lack of 'homework' done before placing these opinions. Staff also receive abuse over the phone and in person, including physical threats and foul language.	
3.18	In an attempt to reduce and counteract this, PPG agreed that members can similarly place messages, showing constructive points and generally calming the growing trend, via such media as Friends of TMA and the new PPG Facebook and Twitter pages. Discussions could also be opened with Iain Stewart MP as well as Labour Cllr David Lewis, who has countered some of these comments himself in an attempt to calm things. In the meantime BT and SR are now regularly spending time at the surgery, talking with patients and, as and when they raise issues based on misunderstandings, take the opportunity to talk it through. Explanations are generally well accepted and understood by patients.	PPG
3.19	CR is considering placing an article on the subject in Hilltops annual information leaflet. PPG members present suggested using their new media to additionally counter abuse, and point out the number of patients registered at Hilltops and the fact that survey results indicate that the vast majority of them are happy with the care they receive.	CR / PPG
3.20	Following further NHS England development, from 01 March, 2016, patients can sign up to see their on-line records. On signing up, a read code will be provided with an explanatory list. NHS England and the Dept of Health are continuing the development of this facility.	Newsletter

3.21	DrHA pointed out that any old <u>erroneous</u> information found cannot be deleted but, upon patients' requests, notes can be added around any errors.	Newsletter
3.22	CR requested the presence of volunteer PPG members at the next fire drill, representing non-standard emergency evacuation eg in wheelchairs, being hidden away in WCs, etc. BT and SR have agreed to take part.	BT/SR
3.23	CR reminded PPG members that a post survey meeting needs to be arranged in order to prepare the annual report and statement. Following diary checks with Dr Dewji, CR will offer dates, and SD and SR will attend.	CR/SD/SR
3.24	SR expressed difficulty with the analysis aspect of the survey results. In the absence of a statistical analyst among PPG members, BT offered to check last year's results to see how the subsequent analysis of these was achieved.	BT
3.25	CR will now provide PPG with Friends and Family survey results on a monthly basis.	CR
3.26	Now that the book money is being paid to PPG, CR requested PC provide a lockable money tin for this and receipt book, which will be kept locked away in a cabinet. SD has a cash box and PC will obtain the receipt book and collect monthly for payment into the PPG account.	PC
3.27	CR announced the participation of Hilltops staff in this year's Moon Walk and invited PPG members to take part. In the meantime, Hilltops staff involvement will be included in the PPG Newsletter.	Newsletter
3.28	CR queried the progress of collating and analysing this year's survey results. BT will look at last year's and apply a similar procedure to the 2015/16 results. She is also currently working through the Friends & Family results.	
3.29	CR confirmed that the supplies of flu vaccine for the 2016/17 vaccination programme have been ordered. This vaccine will contain four strains of the virus, an increase on the 2015/16 vaccine which contained three, in order to further ensure effective vaccination.	

<p>4.</p> <p>4.1</p> <p>4.2</p>	<p><u>Treasurer's Report</u></p> <p>There has been no PPG spending since the last meeting and therefore no statement. Following payment of book funds in the sum of £98.50, the current balance is £1,148.50. Total expenditure to date is £171.</p> <p>As book sales now provide an income to support PPG expenses, PC has suggested an appropriate notice be placed, advising patients of how the money is spent.</p>	
<p>5.</p> <p>5.1</p>	<p><u>Update on PPG</u></p> <p>i. <u>New Social Media</u></p> <p>The new PPG Facebook is almost ready and DT has agreed to run it. It is a closed version ie cannot receive comments. Its purpose is to provide Hilltops and PPG information to patients in the form of a virtual newsletter.</p> <p>This news will be replicated in PPG's Twitter pages, run by SD.</p> <p>Alongside these will be the commercial gmail account which currently carries the email addresses of upwards of 2,000 Hilltops patients who have expressed an interest in receiving regular updates and information. <u>These addresses will not be visible or accessible on any messages circulated.</u></p> <p>There is a website that comes with the gmail account which will shortly be created and this will show a distinctly clear website name in order to avoid any confusion with the Hilltops website. SR to request help in setting this up from a local IT support person.</p> <p>In order to resolve remaining IT issues, SD is to consult PPG member Vinayak Supekar.</p> <p>CR confirmed that Hilltops will advertise the availability of the PPG media, providing information to Zoe Halliday in Hilltops IT Dept.</p>	<p>SR</p> <p>SD</p>

<p>6</p> <p>6.1</p> <p>6.2</p> <p>6.3</p> <p>6.4</p> <p>6.5</p>	<p><u>AOB</u></p> <p><u>Maintenance</u> CR advised those present that there is a maintenance person present at Hilltops every Thursday. EC acknowledged an improvement in outside areas.</p> <p>CR explained that the maintenance person covers several surgeries in the area and duties include a range of infection control checks (tests for the presence of legionella, etc) as well as buildings maintenance.</p> <p><u>Pharmacy</u> CR has asked Ruby, the pharmacist, if she would like to attend a PPG meeting. Staffing levels and pharmacy hours make this difficult for her so PPG members will ask her if she can write a paragraph about the functions of the pharmacy for the Newsletter.</p> <p>CR emphasised that the pharmacy is not related to Hilltops and Hilltops cannot be seen to appear to favour the Pharmacy in any way. Any PPG Newsletter article should therefore name other pharmacies, thereby generalising rather than specifying.</p> <p>CR took the opportunity to advise that all prescriptions should be checked before leaving the pharmacy and it is the responsibility of patients to do this. If the wrong medication is given out by any pharmacy or the medication is out of date, it must be returned to the pharmacist immediately.</p> <p><u>Diabetes clinic</u> DrHA confirmed that Dr Maddipati has spoken with VS on the subject of holding group discussion sessions and explained that such a group cannot be run at Hilltops because VS is not a qualified practitioner. Amanda already runs a clinic from the Maple Unit.</p> <p>It is appreciated that VS has considerable information to offer in relation to the management of diabetes, based on his own research and experience. SD will advise VS.</p> <p>DrHA and CR explained the availability of the 'DESMOND' programme of diabetes management, to which patients are referred. This is held on Saturdays and provides advice such as diet, where to go for advice, entitlements, etc., and patients make two or three visits after initial diagnosis. Partners are encouraged to attend too.</p>	<p>PPG</p> <p>Newsletter</p> <p>SD</p>
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	<p>CR added that Hilltops has a very high percentage of diabetic patients and their care is ongoing and at varying and inclusive levels, including regular checks within Hilltops Special Care Plan, starting with an appointment with a specialist HCA for bloods, urine, blood pressure, as well as regular checks on feet. After three to six weeks, patients will see the specialist diabetes nurse for blood results and are given the traffic light booklet to show how they are doing. Some patients have annual checks, some six monthly, dependent upon their needs in order to determine their insulin, food control, etc.</p>	
6.6	<p>The missing PPG NAPP certificate needs to be replaced. Following a search, it appears to have simply gone missing. PPG will obtain a replacement certificate from NAPP.</p>	PPG
6.7	<p><u>Practitioners' names</u> Whilst photos of practitioners will not be shown in the waiting area, CR agreed that a list of names will be prepared and displayed.</p>	CR
6.8	<p><u>DNAs</u> DrHA explained that time lost by DNAs is taken up in various ways:</p> <ul style="list-style-type: none"> i. the next patient can be called; ii. booked telephone consultations can be made; iii. records can be updated, etc <p>so that, although an appointment slot is wasted, time is not.</p>	
6.9	<p><u>Wrongly directed prescriptions</u> The problem was raised of wrongly directed prescriptions that should have gone to a nominated dedicated pharmacy. CR requested that patients reporting this problem contact her or Claire Robinson with all details so that they can investigate and ensure that all details are in place and correct.</p>	CR / CVR
6.10	<p><u>Family passwords</u> PPG received a request for a family password rather than a selection of passwords for each family member.</p> <p>CR advised that children under the age of 11 can be included within the password of one parent. After the age of 11, it is the choice of the child, who will be offered the option.</p> <p>Adults are always given individual passwords.</p>	

6.11	Agreed that the date of the 2016 AGM will be in April, after the survey results have been collated and annual report submitted. Suitable notice will be circulated.	
	<p>The AGM will be on 05 April 2016 at 18.15, immediately followed by the regular PPG meeting</p> <p>Those wishing to join pre-meeting discussions can meet prior to this start, from 17.45.</p>	
	The meeting ended with thanks to all attendees.	