

Minutes of PPG Meeting 05 April 2017

Present

Shobhna Dave (SD)	Pauline Coulthard (PC)	Beverley Tavares (BT)
Daphne Tibbles (DT)	Pat Gidley (PG)	Sandra Reed (SR) Sue
Sullivan (SS)	Elisabeth Clarke (EC)	Linda McComie (LM)
Devinder Lider (DL)	Nadia Shaw (NS) – Healthwatch	
Dr Hopeson Alifoe (Dr A)	Caroline Rose (CR) PM	

Apologies : Andy Sargent, Vinayak Supekar

	ITEM	ACTIONS
	The meeting was joined by new PPG member, Devinder Lider, and Nadia Shaw who has a special interest in Primary Care at Healthwatch.	
1.	<u>Minutes of Last Meeting</u>	
1.1	Minutes of last meeting on 04 January 2017 were approved.	
2.	<u>News from the Practice</u>	
2.1	Staffing CR explained the current difficulties in recruiting GPs and advised that the partners are looking for different ways to overcome this.	
2.2	In line with a new NHS pilot scheme, Hilltops has applied for a full time pharmacist who can carry out medication reviews, thereby freeing up GPs. Interviews for a three year placement commence week beginning 10 April 2017.	Hilltops
2.3	It was also mentioned that some surgeries now have paramedics in place whose support includes triage of patients.	
2.4	Dr Stray, who originally intended to remain at Hilltops for five years, is now relocating to the South West and so will be leaving the practice. The process of replacing her is to commence shortly.	
2.5	Dr Bipin Patel will be retiring in July 2018.	
2.6	Methods of Consultation In addition to such methods as telephone consultations and the 111 service, NHS England and the Department of Health are looking at different ways in which patients can consult with clinicians, eg eConsulting, funded by local CCGs. DL pointed out the value of the 111 service. Dr A advised that, whilst eConsulting is not for everyone, it simply offers an alternative service.	

2.7	<p>CR pointed out that telephone consultations are not always available on the day. SS added that patients often have to wait in their homes all day for a telephone consultation. It was pointed out that the 111 service is available all day, however patients away from home prefer advice from their own GP surgery. CR added that e Consultations will enable patients away from home to speak with their own GP surgery, with notes of discussions going straight on to patients' records.</p> <p>SD asked if a questionnaire re preferred service sources could be used. CR advised that Hilltops has agreed to trial eConsulting. Currently, telephone consultation slots are quickly taken up.</p> <p>EC asked if GPs' time will be impacted.</p> <p>Dr A felt that patients will only use an eConsultation if they needed to and SD added that there are occasions where advice is sufficient rather than taking up appointment time. CR gave the example of medication queries, which could also be dealt with by a resident pharmacist.</p>	
2.8	<p>CR advised that an eConsult system would be government funded for 3 years. Hilltops would then take over the running costs. The cost to buy such a system stands at £15,000+, and whilst the annual running costs are currently unknown this cost includes the system support.</p>	
2.9	<p>CR outlined the time saving possibilities that could be made available such as blood pressure checks being emailed on a weekly basis to the system admin team, on to GPs and then back to the patient, rather than patients coming into the surgery.</p>	
2.10	<p>CR confirmed that the provider of the eConsult service provides the technical support, and training in its use will be given. It is felt that out of hours GPs will feel more comfortable with such a system in place.</p>	
2.11	<p>DL asked how its effectiveness will be assessed. CR explained that it is to be trialled for 3 – 4 months and the results from this trial will be assessed by a survey, supported by system records. Results will either be published on the website or via a newsletter.</p>	
2.12	<p>CR advised that there is now a diabetic team in place combined with an IT team of four dealing with recalls for patients with learning difficulties, diabetes, etc. These appointments will no longer be booked through reception; they will be made through to this one team.</p>	

<p>2.13</p> <p>2.14</p> <p>2.15</p>	<p>Hilltops is now used by medical students from Buckingham University, in attendance on Monday and Thursday, as part of their training pending completion of the University training block at MKUC Hospital. There are also two students in attendance on Tuesday, Wednesday and Friday. These Year 3 students are allocated 6 patients each in ½ hour appointment slots. Dr Dewji, Dr Bradshaw and Dr Kohli are their supervising GPs, and the students will be at Hilltops for one year. Patients’ feedback is good.</p> <p>The students’ first week is given to minor illnesses, moving on to more complex conditions from week 2. Mental health conditions, however, are not included in their placements.</p> <p>Dr A added that the presence of medical students is attracting high calibre consultants to Milton Keynes.</p> <p>Friends of TMA CR raised the subject of an unhelpful and possibly harmful comment posted on the Friends of TMA page. SD requested that DT attend to this and DT has agreed to respond appropriately.</p>	<p>DT</p>
<p>3.</p> <p>3.1</p> <p>3.2</p> <p>3.3</p>	<p>Update on PPG</p> <p>Teapots Teapots having been suspended, this subject was passed.</p> <p>IT and website issues SS explained that she has not heard from the IT team and understands they are under pressure. CR explained that January to March is an extremely busy time. DL asked if the IT system was managed outside or in-house. CR explained that it was previously managed outside but not kept up to date, hence the changes. CR will liaise with IT and contact SS after March when SS can recommence contact with the team.</p> <p>PPG Network Event PPG members attending the above (SD, BT LM & SR) circulated two reports on discussions at the event, one on the general discussion and the other focussing on proposed changes to physiotherapy services.</p> <p>The general discussion mainly concerned the ongoing problem of DNAs. NS outlined a widely researched method of effectively overcoming this issue, but emphasised that it is dependent upon the co-operation of the entire practice. It simply involves appointments booked at reception being written on a card by the patients themselves, and appointment dates and times booked by phone being read back by the patient. The method has been tried and proved to work by an accountancy and business advisory company, BDO in London. SD asked CR if she would be willing to trial it. The former PCT originally funded BDO, and there have been conferences on the subject.</p>	<p>CR</p> <p>CR</p>

3.4	NS reiterated the simplicity but emphasised it can only work if everyone in the practice is involved. CR asked that NS contact her to discuss further, and this was agreed.	NS/CR
3.5	DL asked if patients are reminded of forthcoming appointments. CR confirmed there are various reminders in place, but in too many instances these are to no avail.	
3.6	LM raised the subject of the temporary 24 bed ward at MKUC Hospital. SD confirmed that much publicity has been given to the situation and it is generally known.	
3.7	CR agreed to resend a recent email from physio Belinda Wetherell which was not received by all PPG members.	CR
3.8	SD advised that the subject of Congress numbers was discussed but pointed out that it is currently considered by Hilltops PPG that we don't have sufficient numbers to attend further meetings that, in any case, cover the same subjects. We consider our attendance at PPG Networking and Healthwatch to be sufficient at this time.	
3.9	<p>Forthcoming NAPP Conference</p> <p>SD asked if anyone present would like to attend this year's conference. Last year's achievements were discussed, including the various Apps that are now available for phones, for example to assist with language issues or offer support contacts. PC explained that the conference includes workshops, one or two of which can be attended by delegates. This year's workshops include guidance on PPGs making the best use of social media, how can PPGs of struggling surgeries be effective and PPG social prescribing.</p> <p>On this latter subject, CR advised that she is keen to have the Citizens Advice Bureau represented at Hilltops to provide consultation services to patients presenting with stress and issues arising from social care, and has looked into joining with one other interested surgery in MK to achieve this. CR added that she has been made aware that costs to the CAB to have surgery representatives in place amount to £19,000 per year, for three days per week to look after all local surgeries, for which they do not have available funding.</p>	SD
3.10	CR said that Hilltops management is discussing the use of its reserve funds to cover this cost.	CR
3.11	PC advised of a fourth workshop – Group 100 – forming a group of PPG representatives providing views on various topics.	
3.12	The question of Hilltops representation attending the NAPP conference was raised. CR pointed out that NAPP is a PPG organisation and it was therefore doubtful that a GP would wish to attend.	

3.13	SD will circulate the NAPP Conference details, allowing one week for responses from prospective candidates in order to obtain better accommodation, etc., rates. Expenses for this year's conference in Basingstoke on 24 June will be covered by the PPG.	SD
3.14	CR requested dates for the next year's PPG meetings. SD will circulate suggested dates and confirm. These will be posted on Hilltops website and will include the AGM in July. PPG will provide posters for display in the waiting area.	SD/SR
4.	<u>Treasurer's Report / PPG Funds</u>	
4.1	PC provided those present with the most recent statement.	
4.2	PC advised that PPG income has benefitted from good sales of books. Money raised from separate sales of DVDs is to be donated to Willen Hospice.	
5	<u>AOB – Matters arising</u>	
5.1	CR confirmed that receptionists have received further training in appropriate practice protocols.	
5.2	Further to information gathered by the PPG at the recent Network meeting, CR confirmed that Hilltops does not own a contract for physiotherapy services	
5.3	The subject of DNAs as discussed at the PPG Network meeting has been covered in a separate PPG report.	
5.4	The pod for the blood pressure machine has not been replaced. As covered in Item 2.11, CR is considering the benefits of the machine and looking into alternatives such as the emailing of weekly blood pressure readings by patients.	CR
5.5	CR will contact MKCCG with reference to the outdated floor standing poster in the waiting area. Some of the conditions listed on the poster for 111 consultation can now be seen at Hilltops Minor Illness Clinic.	CR
5.6	CR confirmed that there is no store of incoming books for PPG sale. All are now in the bookcase in the waiting area.	
5.7	CR advised that Hilltops does not have a spare noticeboard for PPG use. PPG will obtain one instead.	SD/SR

5.8	Nadia Shaw, Healthwatch Overview	
5.9	Nadia is a Healthwatch volunteer and is on the Health & Social Care Committee with a special interest in primary care. Healthwatch is in the process of appointing a new CEO and Deputy CEO.	
5.10	NS described the Health & Social Care Committee's role, with particular emphasis on care for Milton Keynes' growing homeless population and provided those present with information leaflets.	
5.11	NS further described the role of Healthwatch in overseeing all NHS premises, with the right to enter and view at any time.	
5.12	The results of a Healthwatch survey into patients' A & E experiences are now in. This survey was carried out at the request of Joe Harrison, MKUC Hospital CEO.	
5.13	Much Healthwatch research is currently going into the situation of MK's growing homeless population and the underlying causes of their various situations.	
5.14	NS emphasised the benefits of PPG liaising with Healthwatch on any patient concerns and experiences arising in order to enhance their overview of the NHS. Specific concerns include care of patients whose practices go into special measures and subsequently fold.	
5.15	NS advised that the Healthwatch AGM is due and new members for the Health & Social Care Committee are being sought. NS also gave an overview of funding. The next Healthwatch meeting will be on 11 April at 2pm and is open to all.	
5.15	Dr A advised that It is hoped a federation of GPs can be formed.	
5.16	LM discussed a meeting she recently attended concerning changes to services.	
	The meeting ended with thanks to all in attendance. The next meeting will be held on Wednesday 12 July 2017 and will begin with the AGM.	