

Minutes of PPG Meeting 12 July 2017

Present

Shobhna Dave (SD) Pauline Coulthard (PC) Beverley Tavares (BT)
 Daphne Tibbles (DT) Sandra Reed (SR) Sue Sullivan (SS)
 Charmaine Richardson (ChR) Claire Robinson, D/PM (CR)

Apologies : Elisabeth Clarke, Linda McComie, Pat Gidley

	ITEM	ACTIONS
	The meeting was joined by new PPG member, Charmaine Richardson, and Ben Thomas, Director, Citizens Advice.	
1.	<u>Minutes of Last Meeting</u>	
1.1	Minutes of last meeting on 05 April 2017 were approved.	
2.	<u>News from the Practice</u>	
2.1	Staffing The Buckingham University students now present at Hilltops are receiving good feedback from patients.	
2.2	A new GP Registrar (name tbc) joins Hilltops in August, as does Dr Abigail Taylor.	
2.3	Emily, Sam and Safia, all from the admin office, are currently on maternity leave.	
2.4	The new practice pharmacist, Rajiv, joined Hilltops in June 2017 and is settling in well.	
2.5	Current difficulties with parking continue, with particular problems caused by misuse of the parking area intended for the use of disabled drivers. Following contact with the, the local council has responded that the cost of repainting the disputed bays in order to help resolve this is high, and the allocated use of the area is apparently unenforceable. Hilltops has been placed on a long waiting list for the addition of yellow lines. It was suggested that a local councillor and MP be consulted for advice and possible support for control of this essential space.	
2.6	CR advised that a patient had asked staff the price of DVDs for sale. BT pointed out that this is displayed on the notice above the bookcases where the DVDs are held for sale.	

<p>3.</p> <p>3.1</p> <p>3.2</p> <p>3.3</p>	<p>Update on PPG</p> <p>NAPP</p> <p>PC gave an overview of the 39th Annual Conference held in Basingstoke in June 2017 and attended by PC, DT and SD. The meeting, the theme of which was Patients, Partnership and Power, was attended by 96 delegates who also included GPs, Practice Managers and host Dr Patricia Wilkie and speaker Professor Pali Hungin, whose talks can be heard in full on YouTube.</p> <p>Please see Appendix B. attached, for a detailed report. This is also available as a separate document.</p> <p>Future NAPP Conferences</p> <p>SD expressed the need for other PPG members to attend and benefit from next year's NAPP conference and this was agreed. The need for the presence of Hilltops staff was also expressed, and possibly students in order to introduce them to the concept of the PPGs.</p> <p>SD advised CR that the subject of GP surgery ratings was discussed and that ratings should be visibly displayed in surgeries, not just published on websites. CR agreed to action this.</p> <p>Also discussed was the issue of what happens when a GP surgery closes down and its impact on surrounding surgeries.</p>	<p>CR</p>
<p>4.</p> <p>4.1</p> <p>4.2</p>	<p><u>Treasurer's Report / PPG Funds</u></p> <p>PC provided those present with the most recent statement. This year's expenses included a donation to the Church of the Holy Cross for use of its facilities by Tea Pots, two bookcases and NAPP conference fees. Those present expressed their thanks to SD who donated the cost of fuel used to travel to Basingstoke to PPG funds</p> <p>PC advised that PPG income continues to benefit from good sales of books and DVDs. As previously, money raised from separate sales of DVDs is to be donated to Willen Hospice.</p>	
<p>5.</p>	<p><u>Talk by Ben Thomas, Director Citizens Advice</u></p> <p>This item was moved to the start of the meeting, prior to the above items, in order to allow Mr Thomas to leave before discussions on routine PPG meeting matters.</p>	

5.1	<p>After providing a background of the CAB, Mr Thomas outlined CAB MK's proposal to place CAB staff and volunteers in five selected GP surgeries, Hilltops being one of these, in Milton Keynes in order to offer wide ranging non-medical assistance and advice, thereby freeing GP time whilst enhancing services provided by GP surgeries. A business plan has been submitted to the CCG and a response is expected by September 2017. Those present agreed to Mr Thomas's request that the PPG provide a supporting letter to the CCG.</p> <p>Please see Appendix A. attached, for details of his talk. This is also available as a separate report.</p>	
<p>5</p> <p>5.1</p> <p>5.2</p> <p>5.3</p> <p>5.4</p> <p>5.5</p>	<p><u>AOB –</u> <u>Matters arising</u></p> <p>A query was raised as to a problem with a repeat prescription request that was faxed by a patient to the surgery but was subsequently unavailable for collection. CR confirmed that, whilst incoming faxes are monitored hourly and logged, it is not standard practice for repeat prescription requests to arrive by fax and that patients should not use this method. CR will ensure that receptionists are aware of this.</p> <p>CR advised further on the subject of facilities to be provided by the new surgery in the Western Expansion development, as discussed at a recent meeting for practices on the west side of MK. Practice Managers have been asked to communicate with the local council as to what their plans are for this new surgery, what facilities it should have etc., in order to avoid the growth of surgeries overtaking planned facilities. PMs have been asked to try and find out who at the Council they need to speak to. PMs are therefore pushing to be involved in the planning process.</p> <p>ChR raised the subject of the impact of the new housing development on Hilltops. CR covered Hilltops' current list size, which continues at around 16,000, adding that not all families on the new development are covered by Hilltops. The new surgery is due for completion around 2019. PC advised that Iain Stewart MP was recently asked to confirm this and he responded it was anticipated to be in around two years.</p> <p>ChR asked if Hilltops has a resident counsellor. CR advised it does not. Among other aspects, counsellors require separate payment and resources are not available for this. Waiting lists for NHS counselling are over-long, hence the support for the future presence of CAB within surgeries.</p> <p>SD will circulate the report prepared by LMCC following a meeting she attended earlier in 2017.</p>	<p>CR</p> <p>SD</p>

5.6	DT has responded to an adverse comment posted earlier this year on the Friends of TMA Facebook page and has included positive feedback from Hilltops patients as well as pointing out the practice rating. No further such comment has been posted.	
5.7	No further news has been received by SS from the Hilltops IT team. CR will chase.	CR
5.8	The matter concerning Hilltops physios is pending.	
5.9	The blood pressure machine is currently in working order but its future is still being considered.	Hilltops
5.10	Concerning online appointment bookings, CR confirmed it is in order to reserve an appointment without spending time completing the box provided for the reason for the appointment. Omitting this will help avoid the risk of losing the appointment slot before confirming the choice. This box can in fact be completed after confirmation of the reservation of the slot has been received and is, in any case, more relevant to bookings with the Practice Nurse.	
	<p>The meeting ended with thanks to all in attendance.</p> <p>The next meeting will be held on Wednesday 11 October 2017 at 6.15pm.</p>	

APPENDIX A

Talk by Ben Thomas, Director Citizens Advice, Milton Keynes

Following introductions, Mr Thomas outlined his role as Director within CAB MK. Since 2009, his first role at CAB was as caseworker within GP surgeries under the Primary Care Trusts, offering support and advice. Following changes after 2010, CCG was developed and CABs within surgeries declined. However, a CAB presence was recognised as a sound project, with benefits provided to numerous patients via facilities within surgeries for non-health and practical issues that impact on health, eg being signed off work with work-related stress ie the need for advice concerning employment rights etc. This being a legal, not medical matter, outside help is needed, such as that provided by CAB. Welfare benefits advice can be provided in relation to health (eg PIP, replacing Disability Living Allowance). GPs are often asked to complete forms with patients – whilst willing, GPs recognise that they are not qualified and cannot spare the necessary time. CAB specialises in this and could provide considerable support.

CAB, as a charity, wants to return to this service in GP surgeries. People have not been going to CAB offices in general during the early stages of changes, but welfare reform has brought about an increase in the number of those needing support and advice. CAB has consulted with CR about these requests being put to GPs. Such requests also include housing authorities tending to send tenants to GPs for letters of authority in order to action housing problems.

Plans are to reintroduce the 2009 service into 5 surgeries acting as 'delivery centres'. Anyone using any of the practices in MK could be referred to one of these 5 surgeries by their GPs. A CAB costing presentation has been submitted to the CCG, and Hilltops would be one of the delivery centres, with scheduled appointments on a weekly or fortnightly basis under a project named Advice on Prescription. Practical solutions to non medical problems will become available, signposting patients to CAB for support. CAB sees 10,000 pa currently and MK is growing. The UK is recognised as a large charity sector alongside state support. The NHS will not be expected to fund the CAB but CCG is being asked to give financial support to possibly two paid members of staff among numerous volunteers in attendance.

All these services will be free to patients. In the last five years, CAB has widened its scope, partly because of funding changes. Its Board of Trustees helps with fundraising, along with CAB itself. Leaflets were provided by Mr Thomas outlining areas now covered such as fuel poverty whereby provider calculations can be made. Funds have been made available to the CAB to provide IT assistance in order to give people on-line training for such processes as GP appointments, benefit forms completion, job applications, refunds via company customer services etc. Community Neighbourhood Mediation is also now undertaken following the demise of the charity formerly handling this, alongside housing associations. This is a free service provided across MK, S Northants, etc.

CAB is presenting to the CCG in September. In the meantime, Mr Thomas asked that PPG consider providing a supporting letter for CAB, outlining how such a service would be helpful in the practice, noting health problems that impact on finances, etc. He explained that CAB is looking to liaise with patient groups to enhance their services, adding that CAB works with CarersMK, who also provide benefits advice, etc., and often receive referrals from them.

Mr Thomas provided his contact details. BT asked if PPG members, when attending at Hilltops to talk with patients, should advise patients of CAB services, and Mr Thomas welcomed this. A recent CAB survey revealed that a fifth of GP time is currently spent on non-health issues. Whilst this support is acceptable to GPs, it is not within their expertise and they would welcome the support of CAB. BT and SR will liaise on this procedure with CR.

PC asked if age range statistics are recorded and Mr Thomas confirmed that they are. AgeUK help the older age group, over 65s, but they don't cover all issues. MK's population is getting older and the CAB sees more over 65s concerning pension advice, winter fuel allowances, etc. There are also queries from more of the younger age group, 20 – 30s, who can't get on property ladder, can't afford rent, are on zero hours contracts, etc. Services provided in UK as opposed to services overseas was discussed. Services are more widely available in UK. A question raised as to whether there is too much focus, leading to a 'nanny state' culture. Mr Thomas pointed out that more complex provisions and situations necessitate a wider range of services offering support. For various reasons, people may fail in their own attempts to find and communicate with the appropriate person for a particular issue, or even bother following it up in the first place. CAB can advise on these problems.

CR gave the example of patients who present frequently and regularly for no apparent reason. CAB may be able to identify the underlying cause of such behaviours and provide the appropriate support. Whilst not being social workers and having an awareness of not wishing to create dependency, CAB is available to offer additional support to the wider population of people who, for example, live alone without the support that would otherwise be provided by family.

SR requested details of procedures. Once the service is up and running, Mr Thomas will provide a timetable of scheduled consultation services available at Hilltops. There will also be a drop in service available to patients from all practices, but, because of the range of services already provided at Hilltops, this will probably be held at another practice in MK. Mr Thomas explained that patients don't necessarily have to go through their GP to book a CAB consultation, they can do this at reception and PPG members can offer this suggestion to them, however the larger percentage will be GP referrals.

Currently, a business case has been submitted and the CCG has come back with additional suggestions. As it stands at the moment, the CAB needs to be more easily available – currently the office telephone is frequently engaged so Email contact is the recommended method of contact.

CR pointed out that Hilltops is one of the more affluent areas and therefore their demographic and its requirements will differ.

In summing up, Mr Thomas explained that CAB MK employs 16 staff, mostly part time, plus 110 volunteers, with a training officer employed for these volunteers, who include retired professionals who can bring their skills to the service. Recruitment is ongoing.

Information and contact details were left with the PPG to peruse and circulate. Mr Thomas plans to return at October's PPG meeting with further news.

Mr Thomas left the meeting with thanks from all in attendance.

APPENDIX B

Overview of 39th NAPP Conference held in Basingstoke

Attendees: Shobhna Dave, Pauline Coulthard, Daphne Tibbles - Hilltops PPG

The theme of this year's conference was Patients, Partnerships and Power.

Attendees were welcomed by the Chair, Dr Patricia Wilkie who, in her introduction, spoke of the challenging times for practitioners and how patients are part of the solution in learning to work with and support them, and challenging policy makers at national level -

"Patients have more to offer than their illnesses".

The first speaker was **Professor Pali Hungin, Dean of Durham Medical School and recent President of the BMA**. He began with the contentious statement *"Power is crucial in these challenging times from patients all over the world"*.

He described the work of the BMA and his project – changing the role of medicine in the world. He raised the question as to whether we cope with changes worldwide and expressed his concerns about CCGs making decisions.

He mentioned BMA policies and projects, such as:

- *Ethics – end of life care and inequalities in health;*
- *Growing older in the UK;*
- *Obesity and smoking campaigns;*
- *Staffing in the health service and adequate funding for health services.*

His project aims at changing the face of medicine and the role of doctors, and what is happening in the world.

He discussed the plight of doctors and their prevailing symptoms in some countries, such as:

- burnout, with an early dropout of GPs, alongside their risks of mental health problems by the age of 35 – 40;
- high suicide rates in the USA and Canada;
- these problems not being voiced because of hierarchical structures in place.

Living as we are in a world that is no longer recognisable, with a population in England of 55m, what is the future for primary care? With bigger changes the world over, we are facing a paradigm shift and Prof. Hungin suggests we now need to 'think outside the box'. He mentioned AI and IT and gave one example of a change in treatment; that of ulcers which are now treated with medication rather than surgery. However, doctors are reluctant to change.

Prof. Hungin presented the problems facing medicine:

- *What do changes represent for patients?*
- *The redistribution of work;*
- *The roles of AI and IT;*
- *New technologies, including diagnostic and therapeutic devices.*

In summing up, he told those present that PPGs need to be active participants in shaping the future.

The second speaker was **Ruth Rankine, Deputy Chief Inspector of General Practice, CQC**. Ms Rankine spoke of a requirement for general practices to publish their ratings where they are visible to all.

She also commented that PPGs are not representative of practice populations.

There are exciting and innovative projects but discussions are needed in order to ascertain how these are to be shared and measured.

The question of how the CQC can support PPGs was also raised.

The CQC is moving to monitor rather than inspect and those practices with a rating of outstanding and good may no longer be subject to regular inspections.

PPGs have an important role to play in working with the CQC in order to achieve a common view of quality.

Both Professor Hungin's and Ruth Rankine's talks at the Conference can be seen in full on YouTube.