

# Minutes of PPG Meeting 06 November 2019

## Present

Pauline Coulthard (PC)  
Sandra Reed (SR)  
David O'Donnell

Daphne Tibbles (DT)  
Elisabeth Clarke (EC)  
Samantha Duffin, PM (SJD)

Susan Sullivan (SS)  
Jennie Herbert (JH)

Apologies: Shobhna Dave; Pat Gidley

	Item	Actions
1.	The Minutes of the last meeting were agreed by those present.	
2.	News from the Practice	
2.1	Hilltops is awaiting the final report following the recent CQC visit. A couple of areas need improvement. It is anticipated a spot check will be carried out in about three months. CQC agreed that Infection Control is satisfactory but Level 2 training needs completion.  The Urgent Care Team has been given a grade of excellent by the CQC. The feedback box has provided close to 100% positive comments.	
2.2	A prospective new GP (f) has been interviewed and an offer has been made on a salaried basis with a view to a February start.  Dr Bradshaw returns in January 2020 and, also in January, Dr Alifoe retires.	
2.3	The Reception Manager, Deborah, is currently completing Customer Service training which it is anticipated will be passed on to all receptionists.	
2.4	Christmas surgery dates are closure at 13.30 on both 24 December and 31 December. This will be subject to CCG approval.  It is hoped that the Urgent Care Centre will agree to cover closed hours.	
2.5	The vacancy for a Deputy Practice Manager remains open. Plans for a temporary PA are being considered in the interim.	
2.6	Hilltops is now a Veteran Accredited Surgery. Patients fulfilling the criteria will be given priority. (Please see attached information at the end of these Minutes).	
2.7	The process of distributing electronic prescriptions is underway. Patients requesting a repeat prescription are now offered a nominated pharmacy. If a particular item is unavailable at the nominated pharmacy, a numbered token will be issued that will match an on-line code that can enable any alternative pharmacy to issue the prescribed medication.	

2.8	<p>Letters are being sent to patients found to be living outside the Hilltops catchment area, asking them to find an alternative GP surgery within the area covered by their home address. Hilltops' patient list is now growing too large to accommodate out of area patients.</p> <p>Kingfisher and Brooklands surgeries are available to take patients from all areas within Milton Keynes.</p>	
2.9	<p>The next flu vaccination clinic is Saturday 16 November 2019. It is hoped that publicity will be given in future advising patients not to have flu vaccinations before October, thereby avoiding the risk of the vaccination losing its effectiveness before the end of the flu season.</p>	
2.10	<p>Stony PPG is doing a flu vaccination audit in order to assess take-up rates within the various age groups.</p>	
2.11	<p>It is hoped that talks on IVF and minor illness in children can be added to future PEEs (Patient Education Evenings). PEEs are shown on the waiting area screens, and invitations to attend are sent to relevant patients.</p>	
3.	<p>Update on PPG</p>	
3.1	<p>The PPG has taken part in the CQC inspection by way of a telephone interview.</p>	
3.2	<p>The PPG has been in discussion with the CCG concerning 'one issue per consultation'. A CCG representative has requested an attendance at the next PPG meeting in order to take part in further discussions, and this has been agreed. If possible, a GP should be present at this meeting.</p>	
3.3	<p>A new layout for the PPG Newsletter in line with the Network of surgeries has been agreed. The first Newsletter in the new format will be covering Autumn news.</p> <p>It was agreed that the PPG can continue to make use of Hilltops copier facilities for the printing and distribution in the surgery of the Newsletters.</p>	PPG
4.	<p>Action items</p>	
4.1	<p>Item 6.7 September : Following consultations, follow-up hospital letters are received by patients first. Copies subsequently arriving at Hilltops are checked on arrival and urgent letters are identified and given priority. In order to deal with any backlogs in uploading copy letters on to patients' records, consideration is being given to integrating Network admin teams, bearing in mind the varying protocols within the Network and subsequent training processes required to achieve a shared protocol on all aspects of admin.</p>	Hilltops
4.2	<p>There having been no response from Samsung concerning two tablets for Hilltops reception to replace the written repeat prescription box, this item remains outstanding.</p>	o/s

4.3	Enquiries with Sainsburys regarding availability of end of day fruit and veg for distribution locally have been unsuccessful and will therefore be discontinued.	Closed
4.4	Item 4.7 September : Patients arriving at 7am to book on the day appointments are generally assessed on arrival in order to ensure that those requiring an urgent consultation are given priority for available appointments with the Urgent Care Team. Patients unable to get an early morning appointment in this way can generally be seen later in the day.	
4.5	The possibility of including on-line appointments with the Urgent Care Team is being looked into. Discussions will be held with the website providers as to how the process of navigating patients to the appropriate Team clinician can be achieved.  The Network Teams have funding for Link Workers, Social Prescribers, Youth Counsellors for 12 – 21 year olds, focusing on mental health, and interviewing is in progress for the addition of a physiotherapist specialising in musculoskeletal issues.	Hilltops  Network Team
4.6	Item 5.2 September : Available funds in the PPG’s cash tin are in order. It was suggested that a form be left in the tin on which sales can be recorded. SJD agreed to monitor recorded cash transactions for the PPG’s book/DVD sales.	SJD
4.7	Item 6.4 September : Discussions continue on the various change options concerning appointments issues.	Hilltops
4.8	Item 6.5 September : Customer Service Training (formerly ‘Care Navigation’) has been completed. Protocol guides for receptionists’ ongoing use are available at all times.	SJD
4.9	Item 6.6 September : Further to item 3.2 of these Minutes, those present discussed the availability of 20 minute appointments and patients’ awareness of them, together with difficulty in obtaining one in any case.	Hilltops
5.	<b>Treasurer’s Report</b>	
5.1	PC advised that approximately £802 is held as PPG funds, split between an amount banked and the remainder in the PPG’s book sales cash tin.	
5.2	It was agreed that the PPG’s nominated charity for this year will be Carers MK who will receive 60% of funds from PPG’s book sales. The remaining 40% will be allocated to expenses.  It was suggested that The Food Cupboard be considered for next year’s charity as well as other alternatives such as Macintyre.	

<p>6</p> <p>6.1</p> <p>6.2</p> <p>6.3</p>	<p>Any Other Business</p> <p>Hand sanitising dispensers These are now in place. Touch screens are being wiped at two/three hourly intervals throughout the day and recorded. Two members of staff currently spend two hours a week carrying out infection control audits on a rota basis.</p> <p>It has been suggested that a Network Lead be appointed who could co-ordinate CQC style spot checks at each other's surgeries.</p> <p>SJD will request the IT team to add PPG Minutes for July and September to the website.</p> <p>Printing/paper Use of paper was discussed and, whilst it was agreed that the PPG could continue to use Hilltop's photocopier for Newsletters, it was further agreed that the possibility of using the meeting room screen for displaying meeting documents would save printing costs and paper. SJD will look into providing SR with the means to transfer meeting documents on to the appropriate necessary hardware.</p> <p>Pending this, those present agreed to print their own paperwork or bring their tablet for future PPG meetings.</p>	<p>Network</p> <p>SJD</p> <p>SJD</p> <p>PPG</p>
<p>7</p> <p>7.1</p>	<p>Next PPG meeting</p> <p>Wednesday 08 January 2020 at 1700 hrs .</p> <p>The meeting ended with thanks to all those in attendance.</p>	

## Veteran Friendly Practices

Veteran Friendly Practices utilise processes that require them to meet specified criteria and provide evidence that they are supportive of veterans' healthcare.

The Veteran Friendly Practices accreditation programme was launched on 05 June 2019 as the centrepiece of a workshop and forum held at the Royal College of General Practitioners (RCGP) with Veterans Trauma Network, NHS England and NHS Improvement. Positive feedback came from veterans, who shared their experiences of the NHS in their recovery journeys following serious trauma.

The RCGP is working alongside NHS England and NHS Improvement to accredit practices as 'Veteran Friendly'. This involves a simple process where practices are required to meet specified criteria and provide evidence that they are supportive of veterans' healthcare. After a successful pilot in the RCGP Midland Faculty, the programme is being rolled out nationally across England (and hopefully the rest of UK in due course). This work is fully supported by the Government and Defence Committee. There are now more than 180 accredited GP Veteran Friendly Surgeries across England.

This is a voluntary initiative; however, it is hoped that GPs will want to take part to help with the local identification of veterans. Knowing that a patient is a veteran will help the NHS to better meet the health commitments of the Armed Forces Covenant, whereby the armed forces community, including veterans, should face no disadvantage in accessing health services and should receive priority care for military attributable conditions, subject to the clinical need of others.

Accreditation is very simple and includes \*Read coding the veteran on the GP computer system and having a clinical lead for veterans' issues within the surgery. Once accredited, practices will receive an additional information pack to help with veterans' healthcare. There will also be a training package. It is hoped that practices will then be able to assess veterans' health needs more accurately and refer them to the appropriate services, in particular those set up for veterans, such as the NHS veterans' trauma network or the NHS veterans' mental health services.

On leaving the forces it is not uncommon for veterans to miss the structure, support and friendship that being in the forces can provide. Reliance on both formal and informal military structures and systems could be a major barrier in the transition to civilian life. Transition to life outside the military is likely to be stressful. The healthcare needs of veterans can be different from those of other patients in a number of ways. Acknowledgement of this fact is a crucial first step in providing effective healthcare for veterans. Treatment of veterans may require some understanding of military life.

\*Read Codes are a comprehensive list of clinical terms intended for use by healthcare professionals to describe the care and treatment given to patients. They include signs, symptoms, treatments, investigations, occupations, diagnoses and drugs and appliances.

This coding system was invented and developed in 1982 by a GP, Dr James Read, following the introduction of a GP-based computer system called Abies.