



Prices Mill Surgery Patient Participation Group
<http://www.pricesmill.co.uk/ppg.aspx>

Part of
Nailsworth Health Partnership
www.nailsworthhealthpartnership.org

Minutes PPG meeting Wednesday 1st November. 12:30 to 14:00

1. **Present:** Suzie Colley (practice manager), Richard Easthope, Norman Kay, Marilyn Miles (chair), Betty Young and Paul Young
2. **Apologies for absence:** Sally Millett (secretary). There was no doctor this time, but a new partner has recently started - Dr Malines. The practice will decide at their December awayday who will be the PPG lead. We look forward to having a GP representative at our meetings
3. **Minutes of last meeting.** 5th July 2017. Accepted
4. **Matters arising not covered by the agenda:**
 - a. Aileen Bendall, having lost her job with GRCC as our local village agent when the contract was changed to Independence Trust, is no longer able to join us but wishes us well. The social prescribing and village agent role have now merged into a single job and will be called Community Connectors. The new provider is the Independence Trust, but we are yet to know how it will pan out. Referrals are still being made for social prescribing services, but they are not being responded to. Marilyn Miles agreed to contact the Independence Trust asking how the new roles would be implemented and saying how much we have valued in the past the people in the role of village agent and social prescribers. She will also mention it at the next PPG cluster meeting.
5. **Increasing membership of PPG.** Norman Kay has recruited Mohib Miah and Pat Coyle as members of the PPG. Mohib is one of the managers at the Passage to India restaurant and Pat runs the computer shop in Nailsworth. We reiterated that any patient of the practice is welcome to come to meetings. Norman has also spoken to Tracy Young at the youth club who has suggested that a repeat of the previous interaction (Kate Kay as chair of PPG and Dr Mulhall went to a session at the youth club) could be arranged. Suzie Colley was not certain if it would be possible for a GP to attend such a meeting but felt that one of two members of the PPG could go and meet with young people to ascertain their views about their experience of the practice and local health services. Norman Kay will discuss further with Tracy Young about how best to progress the involvement of young people. Norman Kay has resigned as chair of the Nailsworth Health Partnership (NHP) and is happy to come to the PPG meetings in his own right. He was concerned about the seeming lack of commitment by the practice to the NHP, but Suzie

assured him that this had been discussed with the partners. It would seem that her email in response to Norman's had got mislaid or not arrived with him.

6. **Dementia Friendly GP practice.** Accreditation. The practice has submitted to the CCG their bid for additional money to implement the accreditation of becoming a dementia friendly GP practice. It includes funds to carry out improvements identified by the survey/audit of the practice done by Sally Millett and Marilyn Miles after the last PPG meeting. The practice is still awaiting a response
7. **Other changes in the practice**
 - a. Cluster around **extended opening hours** (item 6A on the previous minutes). The original proposal for the cluster around extended visit opening hours has been shelved and they are now looking at a Stroud wide collaboration, probably with some surgeries acting as a hub. Price's Mill has offered to be a hub. Choice + will continue until the new system is in place. Out of hours service (OOH) is not run by GPs and is accessed via the 111-telephone line and is run by GP Care UK. When extended opening hours for the practices are in place the out of hours service will continue to cover those times when practices are closed.
 - b. **New computer system.** Despite efforts by the practice to learn from other practices who had transferred to a new computer system, Price's Mill still had unexpected problems when they changed recently. They had used mainly EMIS, but the new system will have extra functionality and interoperability with other health systems. In future it will be possible, with patient consent, for the doctors to have access to records from other settings for e.g. hospitals, Gloucestershire Care Services. Although much information is already transferred electronically the practice still has approximately 400 paper records a day which are scanned and then allocated to the relevant patient record. For those patients who had online access to the old system they will need to be transferred to the new one and the patient will be alerted of their new password and user ID. Transferring to the new computer system has caused some difficulties with repeat prescriptions - there was a period when electronic prescriptions could not be transmitted – but this has now been resolved. Information from the old system has not all automatically transferred to the new system and some of it is having to be transferred manually. Once the new system is up and running it will be possible for patients, with their consent, to book appointments, order repeat prescription and also have access to their medical records.
 - c. Concern was expressed by Paul Young about the possible **closure of Lloyds pharmacist** across the country. There are two Lloyds pharmacies in Nailsworth. the CCG has given extra money for pharmacies to offer the pharmacy direct service. This has not been available in Nailsworth as they are still having difficulty providing a permanent pharmacist available during their opening hours

8. Patient surveys.

- a. The national GP survey has been completed and overall the county was above the national average, and Price's Mill was above the Gloucestershire level. The practice was pleased to note that the results were very similar to last year. A link to the Price's Mill results is here <https://gp-patient.co.uk/report?practicecode=L84065>
- b. Prices Mill Surgery own survey was carried out in September using a commercial company which they have used in the past. the advantage of this is that the results are comparable from one survey to the next. There are two parts to the survey. The first part is where the individual GPs have 360° survey which involves 48 patients being given a survey form to complete during a specific period. For the results to be valid there needs to be at least 28 responses for each GP. Unfortunately, 4 out of the 6 GPs did not have enough responses from patients and it will be necessary for further questionnaires being given to patients to make up the numbers to 28. The second part of the questionnaire (which included the questions that the PPG proposed) has been completed but until the results of part one are analysed the company will not release the overall results. Suzi hopes that the final results should be available by the end of this year or early next year

9. Survey on patient transport. This has come to all PPGs and is a south west region initiative

A number of CCGs across the South West are working collaboratively to develop a consistent approach to eligibility for NHS-funded non-emergency patient transport. National eligibility criteria were set in 2007. However, these have been subject to variation in local interpretation, agreed exclusions and the way that eligibility is applied. Together, the CCGs want to ensure that NHS-funded **non-emergency patient transport** is provided in a fair way for all those who need help getting to hospital appointments.

In support of this aim, the six CCGs have agreed a short patient/public questionnaire to help inform the process. We would be grateful if you would complete the [SURVEY](#) and **circulate this within your PGG and wider to patients registered with your practice through your normal communications channels**. The survey will close on **10 November 2017**. We are looking for responses **from both users and non-users** of NHS- funded patient transport.

We will consider the results in November and then determine whether any changes to current eligibility arrangements are required. Results will be published on the CCG website in due course. We will then seek further engagement e.g. with patient representative groups, as appropriate, and implement any agreed changes thereafter.

If you would like to have any hard copies of the survey (which include freepost address) or would like any further information please contact gill.bridgland@nhs.net or fiona.fleming@nhs.net

Members of the PPG are encouraged to complete the survey about nonemergency patient transport and invite their Friends and family to do the same. Whether or not the person uses the hospital transport service they are still encouraged to complete the survey

10. Next **PPG cluster meeting**. November 2nd.

- a. agenda item on how practices follow up non-attendance for appointments (DNAs). If a person does not attend an appointment a code is added to the patient record. These are reviewed monthly. If someone has 3 DNAs in six months, then this will be looked at by the GP to see if there is a pattern and they decide on follow up e.g. the patient needs to be spoken to. For children who do not attend this could be a safe guarding issue as they are reliant on the parent bringing the person to the surgery. These are looked more frequently than the adults and the same applies to vulnerable adults such as people with a learning disability. Although this system could apply to people with dementia this has not yet been discussed at the practice level. Reminders of appointments by mobile phone have made a big difference. The person can cancel by text the appointment when they get the second reminder the day before. This automatically frees up an appointment on the system. Although the practice has to pay for the service they feel that it is well worth it. The rates of DNAs have declined by 40% because of these reminders by mobile. There is no national guidance about how to deal with DNAs - it is up to its practice to decide how to do it. Interestingly the receptionists have noticed anecdotally that in good weather the rate of DNAs goes up and on a dull day there are more requests for appointments.
- b. Agenda item on how did the roll out of flu vaccinations went. Up to the present day 1700 flu injections have been done out of an eligible population of 2400. The practice received their vaccines early and so could offer appointments earlier than last year. Children are now being invited for their jabs. There were 2 Saturday clinics at the surgery and 3 during the week. Two years ago, the practice had only flu clinics and then last year they trialled having a drop-in system as well as the clinics. This year, responding to patient requests they have offered drop-in facilities from the beginning of the vaccination period. Receptionists keep an eye on how things are going but the maximum wait has usually been in the order of about 10 minutes. The doctors and nurses give the flu vaccination to people waiting in between scheduled appointments. The number of flu vaccinations from the local pharmacy have been much reduced now this year - under 100. Some people were also offered timed appointments if they preferred not to use the drop-in facility.
- c. Agenda item. Patient gender. It was not clear if this referred to gender per se or sexual orientation. On October 29th the Prices Mill surgery added the following to their Facebook page "It is true that there are mental and physical

health inequalities between LGBT and straight patients, but we have no plans at Price's Mill to ask this question routinely in every consultation!" The practice does not ask what people sexual orientation is as they feel that it is not relevant clinically. They do ask what the patient's gender is, but they were first register them but still accept them if they have not indicated whether they were male or female.

11. Next PPG county meeting. 24th November 20 at 12.30 in Churchdown community centre (between Gloucester and Cheltenham. Up to 2 people from each PPG can attend. Richard gave some feedback from the last PPG county meeting that he attended with Marilyn. Neither he nor Marilyn can attend the November meeting.

12. Any other business. There was none

13. Date of next meeting. We meet 3 times a year. next meeting **5th March 2017. 12:30 to 14:00.**

Meeting ended at 14.10

Marilyn Miles. 3rd November 2017.