

MINUTES OF THE PATIENT PARTICIPATION GROUP MEETING

Datchet Health Centre 5 November 2014

Michael Shefras - Chair	MS	Present
Jayne Crampton (Honorary Secretary)	JC	Present
Ernie Addicott	EA	Present
Martin Chan (Partner)	MC	Present
Pam Curry	PC	Present
Suresh Gogna	SG	Apologies
Bill Joy	BJ	Present
Anita Kapur	AK	Present
Rowena Mignot	RM	Present
John Paulson (Practice Manager)	JP	Present
Sandeep Sharma	SS	Not Present
Vivien Walton	VW	Present
Mick Watts (Partner)	MW	Present (for Item 4)

MS noted the resignation of Mark Smithers. BJ said Mark had contributed very effectively to the work of the PPG and had offered to provide advice by correspondence, if the Group so wished.

1. Minutes of last meeting

The Notes for the last meeting, held on 8 September 2014, were approved
The Minutes based on those notes were also approved after minor amendments..
MS asked JP to post the Minutes on the DHC website.

2. Matters arising not covered in the Agenda

MS said he had received no response to his comment to the consultation on out-of-hours GP services for Windsor and Maidenhead that Datchet, Horton and Wraysbury appeared to have been overlooked.

PC advised that patients requiring non-medical assistance can self-refer to RBWM social Services Advice & Information Team who will sign-post to the appropriate Team.

ACTION PC agreed to send details of out-of-hours Social Care to MS.

3 Patient Survey 2015

MS reported that Surveys had been discussed at the recent PPG Network meeting. Some PPGs may not be able to conduct online surveys because of the cost of Survey Monkey. BJ said he had been told by WAM CCG Managers that the CCG was considering entering into a contract with Survey Monkey in order to provide access to this service for all PPGs. He added that DHC already had a suitable contract with Survey Monkey. MS suggested the survey would be improved if there were fewer questions, say 12 essential ones instead of last year's 23, and proposed a method for identifying them. However, after a vigorous discussion, it was agreed to have the same questions as last year.

The need to maintain or enlarge the present "large" comment boxes was emphasised by several members.

ACTION JP undertook to create and issue the survey, with the addition of the compulsory "Friends and Families" question.

4. The Future of DHC

4.1 The Present

MW said DHC, like all GP practices, was under considerable pressure and that the PPG should understand these pressures. He hoped it could help by suggesting how they might be reduced. He added the Partners were well aware of the shortfall in the availability of appointments. He said they were keen to expand them for both GPs and Nurses, but that would have to be bought from a decreasing budget; balancing costs against income is a real problem. He added that compliance with current government initiatives requires more data collection and the resultant additional demands on staff have adversely affected the excellent service they strive to provide.

JP said he is working to improve the appointments system, but has to complete his analysis before changes are feasible.

MW commented that DHC was having to rely on transient locum GPs, adding that DHC aimed to move some of the workload into facilities being provided by changes in primary care commissioning. He said DHC aimed to recruit a Nurse Practitioner in the near future.

4.2 The Future

MW said the WAM CCG is very keen on the networking of GP practices, eventually combining them into one super-practice. He doubted it will happen but he foresaw that over the next 5 to 10 years the practices will work closely together

4.3 Out-of hours Services

MW said an Out-of-Hours service, funded by WAM CCG, had been opened as a pilot study at King Edward VII Hospital. He reminded members that Primary Care, commissioned by NHS England, does not include GP cover from 6:30pm to 8:00 am Monday to Friday and at weekends. CCGs are responsible for funding and monitoring Out-of-Hours GP services; the money to fund this service was taken from the GP budget.

BJ commented that although NHS England commissioned Primary Care which is the main concern of PPGs, it was odd that it is not possible for PPGs to contact that organisation.

5. December Newsletter

MS referred to several letters received from patients. It was agreed that the newsletter should include an item on GP appointments for the vulnerable, including those with mental health issues. PC asked if receptionists were trained, and able, to easily identify those who should be given priority. MC replied that DHC has arrangements for urgent cases to be seen immediately.

ACTION MC agreed to write the item.

6. Documents from NHS sources

6.1 Proud to be Grey.

JP said he could not speak for the Practice about the document MS had received and circulated.

PC said this initiative was launched by WAM CCG in October. It is about an attitude to growing old, keeping active and involved, and contributing and taking part. It is about challenging ageist attitudes and valuing what age can bring. She also mentioned a parallel organisation, Silver Line,

promoted by Esther Rantzen MBE (launcher of Childline) which aims to alleviate loneliness and isolation. She suggested the local pharmacies should be asked to include leaflets with repeat prescriptions for housebound patients, This would of course need permission from the Snr. Community Pharmacist) and that GPs should mention it to appropriate patients.

6.2 Friends and Family Test (FFT)

JP said this programme is up and running. Practices that do not comply will be in breach of contract. He said DHC will make it available online, by SMS and on paper at reception. Returns are required monthly. Members commented on the lack of realism in the question "Would you recommend this Practice to your friends and family?" if they live outside the catchment area.

6.3 Better Care Fund

This fund, announced by the Government in 2013, is to be spent locally on health and care to drive closer integration and improve outcomes for patients and people with care and support needs.. It is not new money, having been extracted from CCG budgets. CCGs and local authorities have to agree how the money will be spent to achieve better outcomes for patients and also satisfy local needs and the national conditions attached to the grant.

6.4 Summary

MS said he was not sure how PPGs were expected to respond to this kind of information. MW replied that these initiatives offer potential for practices to engage more with their patients and that the PPGs could help promote these schemes for the benefit of older people. He suggested the PPG could set up a sub group to deal with these matters and that it is worth considering inviting Marianne Hiley of WAM CCG to the next meeting.

ACTION MS agreed to issue the invitation and to write a piece on Better Care for the Newsletter.

7 Any other business

7.1 NAPP Website

BJ agreed to provide members with the Datchet PPG member log-on details.(done)

7.2 Departures

MC announced he was resigning from the Practice for personal reasons and would leave on 31 December 2014.

JP also announced he would leave at the end of the year

8. Date of next meeting(s)

Wednesday 14 January 2015 at 13:00 in the DHC meeting room.

BJ 28/11/14