

Elmwood Family Doctors Patient Participation Group

Minutes of the Patient Participation Group (representing Holmfirth & Meltham Sites) Tuesday 3rd September 2019 7:00 p.m. at Holmfirth

Present: Jane Gledhill (Chair), Dr James Morton, Sarah Shepherd, Sue Johnson, Alan Barlow, Linda Blanchard, David Brown, Janet Clapham, Phil Hack, Jill Hayfield, Stephanie Jameson, Anne Little, Jane Lockwood, Claire Sellens, Les Thomas, Keith Wilberforce.

Apologies; Sue Cran, Howard Johnston, Rob Hodgson, Wyn Kemp

No.	Item	Actions
1.	<p>Apologies and introductions</p> <p>Jane welcomed everyone to the meeting and thanked everyone for attending. She introduced our new member Keith Wilberforce.</p> <p>Jane distributed the member booklet to new members and gave a copy of the updated inserts to existing members.</p>	<p>Members who have not yet completed a members pro-forma (Stephanie Jameson & Howard Johnson are requested to do so if they are able and to email it to sjohnson@elmwoodfamilydoctors.co.uk</p>
2.	<p>Minutes from previous meeting: agreed.</p>	
3	<p>Progress since last meeting :</p> <p>3.1 – Elmwood PPG is now a member of N.A.P.P. National Association for Patient Participation. Jane thanked Phil Hack for arranging this and the practice for paying the annual subscription. Phil issued guidance on how to log in and recommended some reading lists. Phil reminded members not to share the log in i.d. and password as this is monitored by N.A.P.P.</p> <p>3.2 - Extended access has now been added to Elmwood Website and Facebook. The MyHealth Huddersfield film to promote extended access has now arrived however it can't be played on the call screen as it has sound</p> <p>3.3 - Suggested read - A book by Michael Mosely: The Healthy Gut has been added to the call screen . Les Thomas suggested a book and James Morton encouraged any member who would like to recommend a book to contact Sue or Sarah to have this added to the screens.</p> <p>3.4 - Elmwood had arranged for a Fire Risk assessment to be completed at Meltham site by Hydrofire. The risk assessment deemed the Fire exits met Fire regulations requirements.</p>	<p>Sue to produce slides to promote extended access which can be played on the call screens</p>

4.	Network meetings: Feedback to members	
	<p>Jane fed back from the PPG network meeting (<i>see attached notes</i>)</p> <p>Jane said that she had been struck by the differing forms of PPGs - some meet for two hours more regularly whereas others had trialled a virtual meeting. Jane talked about the new Patient Care Networks and a discussion followed. Sarah mentioned that within the PCNs it is envisaged that in the future practices could deliver services together and that a patient from a network could access other practices within the network. James said that we were happy with our cohort of practices, two of which are rated by the CQC as “outstanding” and said that he hoped Practices would share best practice. He reassured members that we will protect access for our current patients. He stated that PCN’s would see a greater proportion of Advanced Clinical Practitioners and Advanced Nurse Practitioners given the shortage of GPs and with the PCNs we will see the appropriate clinician seeing a patient and that they will be able to focus on meeting local needs.</p> <p>Jane suggested forming a PCN PPG however Sarah pointed out that the PCN had a duty to involve PPG members in its operation and that it remains to be seen what form this will take. E.g. there had been a suggestion that PPG members attend PCN meetings. The practical application has yet to be decided and is on the PCN agenda for discussion.</p> <p>Phil fed back from the CCG engagement meeting which himself and Jane had attended at which the CCG shared their 5 year vision involving the new PCNs. He stated that the communication from the CCG was one way and that he had hoped that PPG members would be asked for more feedback on their plan. He issued a useful diagram of the NHS structure from National to Local level. Sarah explained the role of the CCG (Clinical Commissioning group) who hold the budget for the health service at a local level including hospitals as well as GP practices. Phil also issued a handout detailing the “Valleys” Health and social Care network. (<i>see attached notes</i>) Phil issued a paper copy of N.A.P.P’s E -Bulletin which he will email out directly to PPG members bi-monthly in future.</p>	Jane and Phil to email out feedback from meetings attended to members.
5.	Updates from the practice –	
	Jane Hinsley has joined the practice as Pharmacist	
6.	Social Prescribing	
	Jane showed a video with Dr Zoe Williams describing the positive improvements to patient wellbeing derived from social prescribing. She explained that our PCN will have two link workers from Community Plus who will work at our surgeries , helping patients (referred by GP’s) who need support to find and access exercise and other classes or community services.	Jane to invite link workers to attend December meeting Jane to invite Helen from Healthwatch to attend December meeting.

<p>6. What should we focus on as PPG?</p>	<p>Jane Gledhill raised that with only four meetings per year it would be important to have a focus and choose a few aspects of patient concern to move forward with. She summarised the key themes which had come from Member introductory booklet which were:</p> <ol style="list-style-type: none"> 1. Hosting self-help group meetings in the surgery and inviting key speakers to attend e.g. Diabetes UK, Alzheimers 2. Social Prescribing – helping Community plus keep their directory of community services up to date and providing patient feedback for the service. 	<p>Members to reflect on the two work streams and contact Jane if they were interested in meeting up between meetings to progress the focus areas from ideas to actions.</p>
<p>7. Other business</p>	<ol style="list-style-type: none"> 1. Jane raised that she had received feedback from a patient regarding Elmwood only having one BP monitor to borrow. James Morton explained that this was a 24 hour BP monitor and we do have more than one. Also home BP monitors are available to purchase from most chemists for around £10. 2. Les Thomas raised that it seemed contradictory to be advised by a GP to book a review appointment with a GP in 12 weeks' time when appointments are only put on 6 weeks in advance. James Morton explained that this is because schedules cannot be planned further in advance to avoid having to cancel appointments due to last minute meetings / annual leave. James explained the balance that the practice tries to maintain between advanced and on the day appointments and that it was not always possible for patient to see GP of choice. David Brown advocated use of online appointment booking and checking results e.g. of blood test. 3. Les Thomas raised the idea of Saturday morning opening. James Morton explained that this had been trialled and that the uptake on appointments had been poor (less than 30% booking rate) Results from our recent patient survey results were that patients are satisfied with appointment availability. 4. Jill Hayfield raised concerns about the potential closure of Holmfirth Technical College. 5. 	<p>It was agreed to put "How to best can we communicate changes to services to our patients" e.g. Social prescribing on the agenda for the next meeting</p> <p>Sarah to put Jane Gledhill's name on Elmwood website to enable patients to feedback to Jane (via the surgery address)</p> <p>Jill to send details to Jane so that she can distribute these to members so they are aware of who to write to in support of keeping the College open.</p>
<p>8.</p>	<p>Next Meeting 3rd December, 2019 at Holmfirth 7pm at Holmfirth surgery.</p>	