**Sunbury Health Centre (SHC)**

**Patient Participation Group (PPG)**

**Minutes of the Core Group Meeting held on**

**Tuesday 9 May 2017, 3.30 pm at SHC**

**Agenda**

**Present:**

**SHC:**  Dave Gill (DG), Richard Fryer (RF) Jackie Sheehan (JS) and Sasha Thurgood (ST).

**PPG Core Group:** Polly Healey, Neil Huntingford, Chair (NH), Dorothy Linter (DL),Roz de Lord (RdL), Jan Palmer (JP) and Paul Thompson.

1. **Welcome** and **apologies** for absence

NH welcomed everyone to the meeting and it was noted that Brian Catt and Wendy Doyle had sent their apologies.

It was agreed that since Wendy remains unable to attend meetings due to her personal circumstances she may wish to temporarily stand down from the Core Group.

Action*: NH to contact Wendy* *to discuss this further*.

**2**. **Minutes** of the last Core meeting

The minutes were agreed to be a true record of the meeting held on 28 March 2017.

**3. Be a voice in the community:**

* Patients’ survey 2017 – progress to date.

RF reported that the response to the survey has been slow.

PT added that he had put a reminder online.

*Action: RF/ST to send a text reminder about the survey to all patients (who have signed up to the texting service)*.

RF explained to the meeting that the NHS ‘Family & Friends’ survey is also providing useful feedback. In addition since the new software was implemented to support the appointments system (February ’17), over 1.5K responses have been received, this is also a useful source of feedback about the Practice, for example 87% of patients state that they would recommend the Practice.

It was agreed that receiving feedback is essential but the means by which this is obtained should be reviewed now that a number of ways are available.

Action*: Patients feedback to be discussed in more detail once the outcomes of the current survey have been analysed.*

* Format of the Open Meeting on 19 June 2017

At the last Core Meeting it was agreed to consider the format of Open Meetings and decide what we could do differently. After discussion it was agreed that the new format to the Open Meetings will:

* provide patients with a ‘presentation’ about an aspect of the Practice,
* include a very brief SHC update,
* maintain the important Q&A session (approximately 30 minutes).

The presentation for the next Open Meeting will be about the new role of Nurse Practitioner. NH added that he will adapt the poster advertising the meeting to reflect the changes and alert patients to the focus of the presentation.

The SHC update will focus on moving forward. The next meeting’s update will include the responses SHC has made to the concerns raise in the 2016 Patients’ Survey and discuss the ‘home visit’ and how the rise in requests for this service is impacting on the Practice.

At the end of the meeting NH will ask for feedback on the new format and ascertain opinion on the frequency of future Open Meetings.

Action: *NH will email poster to PPG Core Group members two weeks before the meeting to be distributed as normal.*

**4**. **Provide support and challenge:**

* Update from DG

The Practice has achieved its target for managing Chronic Diseases and at 99.3% this is the highest ever achieved.

Dr Das has been working as a locum since Dr Guppy left the practice, she is now due to move abroad and therefore Dr Alasadi will be covering this vacancy, up to three days a week until September.

A new Foundation Year (FY2) Doctor, Luvarnia Sadasivan, has begun her four month placement at the Practice. Dr Jopling is supervising Luvarnia, this is his first supervision of a FY2 Doctor.

The Nurse Practitioner, Emma Rao, has been in post for two months and is settling in well to her new role. Emma is working three days a week and is being supervised by Dr Jopling.

A GP registrar, Dr Oei, will shortly be joining the Practice. It is envisaged that she will be in post for approximately 17 months. She will initially provide an additional five clinics a week.

Dr Jopling will soon be starting a Post Graduate Diploma in Education, the course DG successfully completed last year.

The Minor Surgery Service has now started well; DG and Dr. Jopling are now on their fourth list of patients.

Sister Budkiewicz has commenced her training as a Nurse Practitioner.

Sister Cook has recently completed her training as a Nurse Prescriber.

Michelle Gerard,the Health Care Assistant (HCA), and Sister Boshoff are both due to return from maternity leave in the next few months.

The Administrative Team is developing and has successfully implemented the new CCG referral system. There will be no obvious impact for patients; however the majority of hospital referrals are now completed electronically. RF and ST are supervising this initiative.

The new provider of community services, CSH Surrey, is in post. In response to question from NH it is unclear if the new provider has also experienced the large increase in service charges that the Practice is experiencing.

PT asked how the turnover of GPs at SHC compared to other Practices in the area. DG explained that the comparison is very favourable, the doctors who have left the Practice recently have done so for personal reasons or because the position was a temporary appointment. DG stressed that patients should be reassured that changes in doctors do not affect the continuity of service. DG added that in most Practices patients no longer expect to see their designated doctor and this needs to be the norm at SHC, moving forward, teams rather than individual doctors will provide the majority of the services.

PT concluded this discussion by informing the meeting that a national shortage of doctors is predicted since the number of doctors retiring exceeds the number entering the profession.

* Property Update

RF informed the group that the container, for the relocation of patients’ notes, had recently been delivered. He added that the company had done a very good job physically relocating the notes. The container has the capacity for further notes to be added as appropriate RF was very grateful that staff had given up their time at the weekend finalising the moving of patients’ notes.

PT reminded RF & ST that PPG members would be very happy to help if a similar situation arose again.

RF again expressed his thanks to local councillors for their support with this matter.

Now RF and colleagues are focusing on making the long awaited changes to the Reception. The design is currently being agreed; NHS Properties are being very helpful and are assisting with this. NHS Fire Officer approval is pending. It is hoped that the renovations will start by the end of May. Reception will remain open and continue to operate as normal, the heavy, noisy work taking place outside of surgery hours.

RF was delighted to report that the Practice had acquired a lot of furniture from St Peter’s Hospital, Chertsey. This has helped address the issue of the quality of the chairs in the Waiting Room and has also saved the Practice a considerable amount of money.

The matter of the increase in Service Charges was recently highlighted in the national press by an article about Shepperton Health Centre appearing in the Sunday Times. Unfortunately a meeting with NHS Properties scheduled for today has had to be rescheduled at the last minute. Unfortunately due to the forthcoming General Election the local MP is currently unable to be involved with this matter.

SHC has now engaged a Property Consultant to help with the property issues. He is being very helpful with the service charge matter and is liaising with NHS Properties.

RF and colleagues are currently compiling a ‘wish list’ with regard to space in the building, with a view to potentially swapping some rooms with CSH Surrey.

Unfortunately the relationship with CSH Surrey has not begun as positively as the Practice had hoped. The Clinical Co-ordinator has reduced the number of days present at SHC from five to three, as a consequence once again there are additional enquires being made at Reception, hence increasing the queue. There are also disagreements about the ownership of areas within the building. These issues need to be resolved as soon as possible.

The Practice is unclear if the cleaning contract has been transferred to CSH Surrey because the quality of cleaning remains a concern. In the meantime this weekend staff from the Practice jet washed the front of the building and swept up leaves!

Since the Family Planning Service has now been closed and patients have to go to Feltham or Woking to receive this service, the Practice is very concerned about the negative impact for patients and consequently this has been discussed with the CCG.

* Local Support for SHC with regard to the increase in Service Charges

The CCG have done a very thorough review of the charges, which is what they offered to do. The Practice is now working with their Property Consultant to resolve the issues.

PT reminded the meeting that a local resident, Simon Scott, has a contact with the BBC Health Consultant and is very willing to help when the Practice feels it is appropriate. (Simon previously attended a PPG Core Meeting on 29 September 2014).

* Finalising the frequency of future PPG meetings

At the previous meeting consideration was given to the frequency of meeting dates for the forthcoming year. It was agreed to move to a meeting cycle of eight weeks, maintaining the current practice of RF liaising with NH and specific task groups meeting in between set meetings if the need arises, continues.

Action: *DH to prepare a draft 2017-18 meeting schedule and circulate for comment in advance of the 18 July meeting.*

**5**. **Help disseminate information:**

* Feedback from the CCG Stake holder Reference Group Meeting

The PowerPoint from the meeting had been circulated with the agenda for this meeting. JP explained that the meeting was primarily about the sharing of good practice. Matters discussed included:

* Workstreams, all of which have a full time project manager.
* The allocation of additional funding, as a consequence of successful bidding to the Transformation Fund, to developing psychiatric liaison between The Royal Surrey County Hospital and St Peters and improving diabetic care across Surrey Heartlands.
* Research, outcomes of which included that the difficulty of getting a same day appointment is a common issue and that the location of an out of hours service is not as important as being seen within 15 minutes of arrival.

NH added that there is engagement with the CCG and they are making this public, which is not the case with all CCGs nationally. NH feels that this is a useful group and that it is making progress.

* Feedback from the CCG meeting for chairs and Vice-Chairs

PT explained that he had proposed this meeting and was therefore pleased that eight of the 42 Practices in the (CCG) area were represented. The outcomes of the meeting were that:

* Everyone shared email addresses
* It was agreed to meet every three months
* One PPG member will attend Practice Managers’ meetings
* Next meeting will take place in Woking in July.

Several of the people attending had no idea of how to establish a PPG and PT felt he gave more than he took away. Since the meeting PT has had several enquiries about how SHC PPG operates and he has offered the opportunity to attend one of the Core Meetings.

NH added that he had also met with other PPGs in the area and most recently with Cllr Dunn who is hoping to set up a PPG in Upper Halliford Surgery.

It was agreed that spreading good practice is something we are all keen to do – and thereby also learn from others.

**6**. **Communications strategy:**

* Use of PPG website

Action: *DH to circulate latest information with the minutes*.

* The Spring Newsletter

RF confirmed that this was almost ready to go to print. DH and PH both offered to help with final proof-reading. It was agreed that we need to consider how to distribute the leaflets beyond SHC. In the meantime it was agreed to ensure copies were sent to Skinners Newsagents in The Avenue, local pharmacies and the Library in Sunbury Cross. Copies will also be available at the LoSRA AGM in June. Consideration will also be given to having further articles in ‘Sunbury Matters’.

Action: *RF to liaise with DH regard to finalising the newsletter.*

**7**. **Improving the physical environment:**

* The next round of artwork for the Waiting Room

NH explained that he is currently looking for new work to display and again asked for help with suggestions with potential new artists.

* Response to the new signage

RF confirmed that the Doctor’s names are now clearly displayed on the doors in a consistent style. JS confirmed that the new style is quick and efficient to operate and manage.

**8.** **Action Points** from the last Core Meeting (not covered in the agenda)

Cheryl Kimber is linked with RF and ST and will share her expertise regarding young people with mental health issues and the issues they can face when accessing medical services.

Kwasi Kwarteng is now in purdah until after the General Election and therefore contacting him is not appropriate.

**9. AOB**

NH tabled a draft copy of a leaflet he had very recently received from the CCG. The leaflet concerned NW Surrey Psychological Therapies Service. NH had been sent the leaflet for comment and he therefore asked those present to review the document and send any comments to him which he would then collate and send to the CCG.