**Sunbury Health Centre Group Practice (SHCGP)**

**Patient Participation Group (PPG)**

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

**Tuesday 21 January 2020, 3.30 pm at SHC**

**Agenda**

**Present:**

**SHC:** Richard Fryer (RF) and Sasha Thurgood (ST).

**PPG Core Group:** Neil Huntingford (NH Chair), David Butler (DB), Tom Fidler (TF),. Polly Healey (PH) and Diana Huntingford (DH).

**Guests:** Ian Morris (IM) and Alison Richardson (AR)

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

NH welcomed everyone to the first meeting of the New Year. He also welcomed IM and AR to the meeting; both of whom are interested in possibly joining the Core Group.

It was noted that Dave Gill (DG) Dorothy Linter (DL) and Paul Thompson (PT) had sent their apologies. RF explained that DG has been particularly unwell and NH asked RF/ST to pass on the group’s best wishes to DG and hope that he makes a full recovery.

**2. Minutes of the last Core and Meeting**

 It was agreed that the minutes from the Core Meeting on 26 November 2019 were an accurate record of the meeting. Thanks to PH for standing in and taking the minutes at the meeting.

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

The 2019 Patient Survey Report

RF confirmed that the Action Plan is being implemented as shared at the PPG Open Meeting (15 October 2019).

The next edition of Bitesize News

RF explained that Cassie Boyles (CB) has taken over the responsibility for drafting Bitesize News. TF suggested that if we are in the fortunate position of having too much information for this edition it could be saved for the next one, which is scheduled for the March. This was agreed as a good idea.

Action: *CB to communicate directly with DH to produce a draft copy which will be sent to RF to agree. It will be then be photocopied on headed notepaper and made available to all who visit SHC. A copy will also be placed on the web-site. Deadline for agreeing draft copy is 30 January 2020.*

Recruitment up-date

NH reported that the screen in the Waiting Room had been productive and three people have expressed an interest in the vacancies on the PPG Core Group. IM and AR are attending today’s meeting as potential new members and NH explained that he is meeting another patient on Friday 24 January to discuss the role of the PPG further. PT has also met with a potential new member. (*Post meeting - AR has confirmed that she would like to join the Core Group, IM is interested but his personal commitments mean he will reconsider joining later in the year and the patient NH met with on 24 January is very interested in joining the group and will attend the next PPG Core Meeting to see the group in action. NH is hopeful that he will also join the Core Group*).

The Practice’s response to the Local Plan consultation

RF reported that the Practice has not sent a response. TF was disappointed to learn that the Practice has not been contacted about involvement in discussions about the infrastructure needed for the planned new developments in the local area.

RF explained that although there has been a lot of new residential development in the area in recent years, since 2015 the patient population has only increased by 374 patients. A new development does not always lead to a large increase in patient numbers. RF added that as a consequence of the additional space the Practice has acquired in SHC there is not the same pressure experienced previously.

It was however noted the Council has been supportive in helping to fund developments at SHC and it was hoped that this would continue, especially with the future allocations of Section 106 funding.

Action: *TF to lead on involvement with the Council and update the group accordingly*.

**4. Provide support and challenge:**

Up-date from the Practice, including progress on Primary Care Network (PCN) projects

Due to DG’s absence RF led on this item.

There have been a number of the meetings with the PCN and as a consequence the Practice is hoping to benefit from the Pharmacist that has been recruited by Ashford & St Peter’s hospital, the PCN will have access to the Pharmacist four days a week (likely to be one day per week for SHCGP). The network is hoping to recruit a Social Prescriber (a healthcare professional who is able to refer patients to local, non-clinical services to meet their wellbeing needs) who will work across the all Practices in the Network. SHCGP is hoping that this new service will operate at the Practice for one to two days a week. Working arrangements are still being clarified.

Action: *RF* *to provide an update on this new service at the next PPG Core meeting.*

It was disappointing for the Group to learn that the contract specifications for the PCNs, recently distributed by the NHS, are being challenged (nationally) as unrealistic and will create more work than provide additional support - which was the original intentions of the Networks.

Dr Adam will be taking maternity leave in February and Locum arrangements are in place to cover this period of absence in the interim. The Practice is currently advertising for a permanent Doctor rather employing a long term locum .

RF explained that the trainee doctors have now finished their placements; Dr Singh is now working in Windsor and Dr Bramwell is currently working as a Locum doctor at SHCGP. Dr Bramwell is unable to take up the position permanently as she is also about to begin a period of maternity leave. Dr Gill & Dr Jopling continue to be involved in training doctors. Dr Mikicki is still at the practice and another trainee doctor will be placed at the Practice later in the year (August).

Christmas and New Year schedules

TF explained that he had received feedback that a number of patients were surprised at the changes to the Appointment System that were introduced over the Christmas period. NH confirmed that he and PT had also received similar feedback.

RF & ST reassured the meeting that this has been common practice for the last few years. Practices are asked to provide appointments ‘on the day’ during the Christmas period to provide extra capacity in local health centres and thereby help relieve the pressure on hospitals. RF agreed that there would be better communication about this arrangement this year.

Action: *The changes to the Appointment System will be on the agenda for the Autumn Open Meeting (DH) and it will also be communicated more widely (RF & ST).*

Changes to the appointment booking system

RF informed the meeting that a lot of changes have been made to increase capacity. The main purpose being to maximise the number of appointments available whilst maintaining control of the demand. He explained that although Patient Access was working well for patients, it wasn’t enabling the Practice to improve the capacity of the Appointment System. This is because patients were booking appointments with a Doctor when another member of the Multi-Disciplinary Team could have adequately met their needs. The Practice has no control over this. In addition a significant number of patients fail to attend appointments booked in advance – something that also impacts on capacity.

As a consequence Patient Access is available for booking appointments on the day only. If a patient wishes to make a non-urgent appointment this can be arranged through contacting Reception or by using Engage Consult. Doctors are also able to book appointments in advance.

The Nurse Practitioners and Paramedics Appointments are now effectively utilised due to the sign-posting by the Receptionists, who work to a script provided by the Doctors.

There has not been a noticeable impact on the telephone system. The new telephone monitoring system enables the Reception Mangers to move staff accordingly in response to demand.

RF is confident that the new system is having a positive impact on the availability of appointments. Moving forward the Practice is keen to implement online consulting more widely. This has been delayed due to the CCG’s decision to purchase similar software for all the Practices in Surrey Heartland to enable digital contact to be made by patients. Whilst this is positive as a fully funded solution it was hoped that contracts would have been signed in November 2019 and the Practice is still waiting for notification. Fortunately the Practice will be the first in the area to have the new software installed. Engage Consult has been very effective because it removes some of the pressure on the telephone system and there is no need for patients to visit the Health Centre. It is also more manageable than an open email system.

Action*: It was agreed that a small working party would work with RF to ensure that the patient population are well informed about changes to the Appointment System – as was achieved when the last major change was implemented.*

Fund raising

TF suggested that since the cake sales had been so successful he wondered if it was possible for patients to make donations on-line? He proposed that in addition to the annual cake sales, projects similar to the purchasing of a water dispenser for the Waiting Room could be posted on-line and patients could donate accordingly. This might also attract donations from patients who don’t attend the flu clinics.

Action: *RF to investigate the guidance on setting up such an account. DH to place on the next PPG Core Meeting agenda*

**5. Help disseminate information:**

Feedback from external meetings PPG Core members have attended

DB informed the group that he had recently attended a ‘Big Picture’ meeting. He had been overwhelmed by the large amount that had been presented but the main discussion had been about the lengthy delay in the establishment of Urgent Treatment Centres.

**6. Communications Plan:**

The Communications Plan 2019-20

This was postponed until the next meeting (Tuesday 10 March).

RF informed the meeting that *NHS Choices* is now *NHS.UK*. He explained that the Practice now responds to all of the comments that are left on this website.

**7. Improving the physical environment**

Up-date on Ceaser Court

RF explained that this was not a viable option for SHCGP because there was insufficient parking available on the site and that it was a lot more expensive. If another site were to become available the Practice would consider it but currently their focus is on improving SHC.

Unfortunately the Service Charges continue to rise and the disagreements with NHS Property Services regarding the justification for these costs continue to take place.

Central Surrey Health (CSH) continues to move their services out of SHC and this is enabling the Practice to acquire more rooms.

IM asked RF for clarification regarding the size of financial investment that is needed to make a difference to the provision of services in SHC. RF explained that it would need to be in excess of £750K. This is based on a bid, which was prepared by the Project Manager at St Peter’s hospital, for a previous funding opportunity. When asked if the Adult Education Centre, in The Avenue, could be a possible alternative location IM was informed that this had previously been explored and the poor transport links was one of the reasons it was not possible to relocate to this site.

A children’s book corner in the Waiting Room – further thoughts

Since the last meeting PH has helped to source a new bookcase. This has now been purchased and will soon be installed.

After the meeting NH & RF agreed a location in the Waiting Room for the new bookcase.

The children’s artwork project

NH updated the meeting on the progress of this project – 15 pictures have now been chosen which the school have agreed to frame. NH & RF are waiting for the school to give them a date to go into school assembly and present the prizes (book tokens) to the winners. The children will then be invited into the Health Centre to see their work on display.

Displaying of staff photographs in the Health Centre

RF shared that this was proving to be very difficult to achieve. It was agreed to return to this matter at the next meeting.

Progress on the installation of the Water Cooler in the Waiting Room

RF informed the meeting that this has now been purchased and is ready for installation. The money raised from the cake sale will cover the cost of installation and serving for three years. Unfortunately the cups provided are not recyclable, so the Practice will undertake research to ensure that subsequent cups are recyclable.

**9. Action Points** of the last meeting (not covered on the agenda)

The cleanliness of the building continues to be a concern. It is hoped that since CSH will soon be almost out of the building the CCG may consider using another provider?

Action: *NH & RF to undertake a walk of the premises to review the cleanliness of the building*.

**10. A.O.B.**

None

**The date of the next PPG Core Meeting is Tuesday 10 March 2020.**

**The date of the next PPG Open Meeting is Monday 30 March 2020.**