

Minutes of the Neston Surgery PPG meeting held on 23 March 2015

Present: Sue Gould (chair), Heather Elkin, Dr Vikki Arista, Sheila Kennedy, Lesley Bell, Eleanor Braceland, Michael Darby, Katherine Culshaw, Peter Folwell, Grahame Owen, Alan Coulter, Dee Bolger, Joyce Coburn, John Ward

1. New member, Dee Bolger, was welcomed to the group and introductions were made round the table.
2. Apologies for absence had been received from Kath Roberts, Ann Flanagan, and Yvonne Williams

It was with deep regret that the group were advised of the recent death of Alan Golbourne.

3. The minutes of the meeting of 24 November 2014 were approved.

4. Matters arising

- 4.1 There had been no further advice from Deeside chemist regarding closing at lunchtime. Heather will follow this up.

ACTION: HEATHER ELKIN

- 4.2 Regarding the patient information screens in the waiting room, Heather advised that
.. the sound is now working, for calling patients to see the doctor or nurse
.. further training is to be provided for surgery staff in the use of the new system on 24 March
.. it remains the case that locally created WORD files cannot be loaded onto the system

- 4.3 It was agreed that Cameo Club, an organisation which helps to support people with dementia, be added to the practice's list of voluntary organisations.

5. Correspondence received since last meeting comprised:-

- Notices re Wirral governor events. Grahame Owen had attended one of these events, and noted that people were invited to put themselves forward to act as governors. Sheila Kennedy said that, although we can have 3 governors for our area, we cannot access Wirral NHS services directly.
- Latest edition of Good for You magazine
- Surgery information leaflets about the PPG
- Cancer and Health and Wellbeing event
- GP access survey feedback
- Working with patients and communities events
- PPG chair meeting documents on the web
- Invitation to Healthwatch Cheshire West "Listening Events"

6. The PPG report for 2014-15 was accepted.

7. Although no longer a requirement placed on the PPG, it was decided to carry out a local PPG survey.

It was felt that this survey could be carried out by PPG members asking patients questions face-to-face in the waiting room, so as to try to increase the response rate to the questionnaire.

All members were invited to send to Sue by e-mail 3 questions regarding issues of concern to 20 to 40 year olds, as it had proved difficult to engage this group of patients in PPG matters.

8. Alan Coulter commented favourably about his family's recent experience of using the new early visiting service provided by the surgery via a locum doctor.

Heather commented that the purpose of this early visiting service is to secure same-day hospital admissions where necessary or to reduce the admissions to hospital via A&E. The funding for this service is temporary until the beginning of April from the Vanguard initiative, with the service being shared with Neston Medical Centre and the Willaston practice. She advised that the practice is looking at ways to fund a continuation of this service after that date.

9. Feedback from Podiatry Consultation Event

Eleanor and Dee had attended this event in Neston, with 20 people in attendance (more than any other location) and 4 staff members from the podiatry service. The event was part of a public consultation process, at which it was explained that the service will have to change its criteria for providing NHS podiatry services. The present service was considered unfit for purpose, with only 13 podiatrists covering West Cheshire, and waiting periods of up to 60 weeks.

10. Phlebotomy appointments, and possibly use of Neston Medical Centre

Sheila commented that the waiting period for phlebotomy appointments appeared to have increased, from 2 to 3 weeks 12 months ago to 24 days recently. This length of time leads to people forgetting appointments and an increase in missed appointments. She was aware that Neston Medical Centre had a waiting time less than a week, with their nurses supplementing the phlebotomist appointments.

It was decided that this matter would be discussed again in the future.

11. Manchester NHS devolution

Regarding the reported proposed Manchester NHS devolution, it was unknown whether patients from outside their area would be excluded from treatment, e.g. by being excluded from Patient Choice (although it was felt that this would be unlikely). Dee commented that Manchester would be looking to save £250 million under any devolution process.

It was noted that we do not yet know of any implications of these proposals for patients outside the Manchester area.

12. Carers matters
The next Carers Meeting would be held at 2.30pm on 23 April in the 1829 Building, Chester
13. Report from PPG Chairs Meeting on 29 January 2015
The chair's report of this meeting is given in APPENDIX 1 to these minutes.
14. Other surgery news
 - A new telephone system with 6 new lines was soon to be installed, giving a total of 10 lines in to the surgery. The new system will hold patients' calls in a queue, minimising the need to re-dial to get through to the surgery
 - New wide-access automated entrance doors to the surgery had recently been installed
 - New flooring coverings had been fitted in all of the doctors' rooms
 - New chairs had been ordered for the waiting room, and the bench seats were to be re-upholstered
 - The waiting room was to be re-painted
 - New vertical blinds were to be installed in the waiting room
15. Nominations for chair of the PPG were invited, before the next meeting when Sue will have completed a 3 year term of office.
16. The **NEXT MEETING** will take place on **WEDNESDAY 13 MAY at 7pm.**
17. The July meeting will take place on **MONDAY 13 JULY at 7pm**

APPENDIX 1

Report from January 2015 PPG Chair Meeting

Cheshire View is a difficult place to find and navigate to, especially in snow! The meeting was quite well attended in spite of the weather and, as always, informative.

There was great discussion around the new non-separate funding arrangements for PPGs and whether they will stay in existence at all or in different formats. Nine of the region's surgeries still do not have one in place.

The presentation on the podiatry services will have been much the same as that attended by Eleanor and Deidre.

There was an interesting item on how the Hope Farm Surgery PPG had been involved in the clinical practice of dealing with leg ulcers. Their patient leader, a member of the PPG, objected to the current system. The views of the patients were listened to, a written copy sent to the CCG, where they were discussed and a new, more satisfactory approach to dealing with leg ulcers is in place and being piloted.

The discussion around Personal Health Budgets was a little unsatisfactory as NHS England has no definition of what is and can be included in these! There are currently 30 people locally receiving a PHB. The person usually has multiple health problems, the clinicians are involved in any decision, a plan of action is drawn up which often involves a third party. The situation of the patient is reviewed regularly. An example given was that a payment was made to provide a 'retreat' in a garden where a patient having to live with a lively noisy family - the hut gives him some space and peace and his state of depression has improved because of it.

Patient surveys were discussed with us all being encouraged to get people to fill them in especially as 90% of care takes place in GP surgeries and not A and E. Surgeries were asked to especially publicise the random national surveys around the time when they would be sent out to patients.

The huge variations in the latest published results were discussed, especially around the telephone answering systems and their efficiency. Disappointingly the number of patients serviced by the various surgeries was not included as a factor in the discussion.

AOB -

We were asked to comment on the PPG information leaflet which I circulated. There are now patient leaders in place and they will disseminate what is happening and where and feed back to the CCG. Their leadership training is currently ongoing. We asked that the role of the PPG and further information on personal budgets were included in the next PPG workshop day in April. The PPG Chairs meeting on that day is being attended by the Health and Well Being Board.