

Central Healthcare Centre  
 Patient Participation Group  
 Meeting Friday 18<sup>th</sup> August 2017 @ 10.00 am



Minutes

Present:	Ray Cleveland Tina Cleveland Graham Dunhill	Gavin Gardner Lyn Gibbs Dawn Jermany	Chris Smith Tony Waring
Apologies:	Val Cadmore	Sue Knight	Sandra Peppiatt
Guest	Mike Swallow, GP IT Facilitator		

Item	Action
<p>1. Tina welcomed everyone to the meeting especially Mike, the guest speaker.</p> <p>2. Minutes from the meeting on 3<sup>rd</sup> July 2017 were agreed as accurate. The action point log was reviewed and updated as follows:            AP13/17 – C/F, Dawn and Tina will get together w/c 4.9.17.            AP21/17 – C/F, for discussion at HE PPG Forum on 21.8.17            AP24/17 – C/F, met with Clare Angell, CCG on 18.8.17 who proposed a locality event encompassing all four Gorleston practices. Awaiting responses from other practices.            AP27/17 – Cleared, first SDG meeting arranged for 23.8.17            AP28/17 – C/F, 6 staff outstanding so further session on 22.8.17            AP29/17 – Cleared, CHC will produce their own survey which will be undertaken in September.            AP30/17 – Cleared</p> <p>3. <b>Practice Update:</b>            Despite a successful appeal against some elements the CQC final report still placed the practice in special measures with an Inadequate rating. An action plan was produced and improvements are being introduced ready for the re-inspection in October. A new team of Inspectors will visit the practice within six months for a further re-inspection. Weekly reports are sent to the CCG and Sadie Parker from CCG is being very helpful. A team from the Royal College of GP's should also be coming in to help and support the practice while improvement work is ongoing. Staff have been upset and demoralised by some of the comments made to them but on the whole patients have been very supportive and appreciative of staff efforts.</p> <p><b>AP31/17</b> - Tina will produce a poster for waiting room asking for patient understanding and consideration while improvement work is being done.</p> <p>Dawn said it has been a very difficult time and thanked Tina and the PPG for their help and support. GP's have been working extremely hard and the practice is still advertising a GP vacancy. They are also looking to recruit a clinical pharmacist.</p> <p>CCG are looking at how to finance the new build on the Shrublands site which may not be ready by 2020. Upon completion, CHC were planning to occupy three rooms but having been quoted a yearly charge in excess of £30,000.00 have decided to withdraw from having a presence there.</p>	<p>Tina</p>

The Practice is trying to build up its register of carers and are looking at the best way to make contact with them as carers are entitled to a health check.

**AP32/17** – Gavin will do some work around carers and consider how this aspect can be publicised

Gavin

**4. Enhanced Summary Care Record Presentation:**

GP's, hospitals and Out of Hours service all have their own IT systems which, unfortunately do not talk to each other. GP practices and hospitals also have various IT systems which again, do not talk to each other.

Summary Care Record (SCR) can be seen by all of the IT systems used by the various NHS organisations which contains information about

- Current medication
- Adverse reactions to medication
- Allergies.

96% of patients have an SCR as you had to opt out if you didn't want one.

Enhanced Summary Care Record (ESCR) would include additional information including details about

- Long term conditions
- Relevant medical history including hospital procedures / test results
- Healthcare needs and personal preferences
- End of life preferences
- Details of immunisations

Being able to access this information would be extremely helpful, and may save lives as it can be accessed by GP's, hospitals, ambulance and paramedics as well as the Out of Hours service. Confidentiality and security are paramount and only clinicians with the correct authorisation can access the SCR and ESCR systems.

All patients should be advised about the benefits of ESCR and have the opportunity to sign up, and PPG are asked to help to do this. Leaflets will be available from September, and would ideally be issued to patients during Flu clinics etc.

**AP33/17** – Mike to send Lyn a copy of his presentation and article for Facebook / newsletter to help publicise ESCR.

Mike

Issues with System One IT system used by CHC which doesn't allow patients to access appointments online for Advanced Nurse Practitioners etc. without impacting on just booking their own GP. Other practices are trialling opening up all appointments and giving out information leaflets to patients.

**AP 34/17** – Mike to send Dawn an example of the patient information leaflet being used by other practice. He will also send Dawn current figures for patient take up of online services.

Mike

**5. Update from HE PPG Forum:**

The Healthwatch event in July about the Transformation and Sustainability Plan didn't receive a good reception from members of the public. Sadie Parker and Fran O'Driscoll will attend the next HE PPG Forum meeting on 21.8.17.

**6. Patient Survey:**

CHC will produce its own questionnaire and will conduct a patient survey in September. This will gather meaningful information which will enable CHC to ascertain what the actual problem areas are. PPG members will be asked to

issue and, where necessary, help patients complete the survey. Copies will be posted out to all housebound patients and there will be links on the website. PPG virtual members will receive an email copy and there will be a link on the PPG Facebook page. Following collation of results, the Service Development Group will produce an action plan which will address specific issues raised by patients. This will be followed up by a "You said – We did" poster in the waiting area and an article in the newsletter to keep patients informed.

**7. DNA's:**

No information from HE PPG Forum. CHC will continue to look at ways to reduce DNA's through the Service Development Group. Patient mobile numbers are being obtained and checked for accuracy so that text reminders can be sent to patients about appointment details. Patients can also text to cancel appointments. Emails received from two of our virtual members were shared. It was suggested that some patients may not understand the cost implications around DNA's so more emphasis should be on making appointments available for other patients.

**8. PPG Funds:**

There is currently £103.03 in the PPG bank account and approximately £6.00 in the donation box.

**9. Help Us to Help You Campaign:**

This was shared on the PPG Facebook page, posters were displayed in the waiting room and there was a link on the CHC website. However, there is no way to measure whether there are any successful outcomes from the campaign.

**10. Any Other Business:**

- A GP and a Nurse Practitioner are on call each day to see patients that need an urgent appointment that day. Staff training is ongoing to ensure that all staff can identify urgent need and that patients are seen by the appropriate clinician
- Dawn was asked to thank staff on behalf of the PPG for all the good service that they provide
- Specific patient details are required before any answers can be given when any issues are raised about inability to book an appointment
- It is the patient responsibility to check blood test results so they should check online or contact the practice. CHC are not notified of results for tests ordered by the hospital.
- Transformation funding (£1.50 per patient) is available for each locality for two years. Our locality is comprised of the four Gorleston practices. The lead GP for this locality has not yet contacted CHC but Dawn would welcome the opportunity of closer working between the four practices involved.
- The phone in the nurses' station is transferred to the main reception when there is no one manning it.
- Tina, on behalf of the PPG thanked Dawn and all the staff for all of their efforts and hard work recently under very difficult circumstances.

**Dates for future meetings:**

Friday 22<sup>nd</sup> September 2017 @ 10.00 am

Friday 17<sup>th</sup> November 2017 @ 10.00 am

Meeting closed 11.50

