

Notes of the meeting of the Drayton and Wootton St PPG

Date: 24th Jan 2019

Notes for the meeting were taken by AP and GK

Present: Mary Ramsay (Chair) GK AP LI AR SA MV FrA (Observer SA at last meeting has decided not to join due to other commitments). Sandra Jordan and Dr Drake were present for part of the meeting.

Apologies: None received

Previous meeting notes were agreed, with no actions to report or matters arising.

Drayton Surgery Proposed Development. AP gave a brief overview of the discussions associated with the proposed extension to the Surgery and MR gave a brief overview of her meeting with the Surgery on the same subject. The points covered by AP & MR are contained within the attached document entitled *Drayton Surgery Proposed Development*

Practice Update. Dr Drake (AD) and Sandra Jordan (SJ) joined the meeting at 6.50pm. SJ tabled the practice update and took the Group through the 10 points listed. These are all contained within the attached document entitled *Drayton Patient Participation Group Meeting 24.01.19 - Practice Update*.

Dr Drake spoke in some detail about the proposed development plan, including the financial and regulatory aspects, as well as the possible disturbance to the smooth running of the practice, which would need to be minimised. He explained that although there were difficulties recruiting GPs, the Practice (following national trends) has been employing a variety of alternative health professionals to spread the load. This is a major driver in the need for additional space, in addition to the possible increase in the patient population for a variety of reasons.

The Practice were grateful for the specific points raised by PPG, some of which have already been passed on to the architect. He also explained that the main hurdle to be crossed at the moment is getting planning permission. When (or if) that happens - the decision will be made on 8th February - further details can then be discussed with the PPG, for which AP has been delegated as the main point of contact, since he has considerable experience of such projects within the NHS. Four building companies have been put on alert to tender for the work and, if all goes according to plan, the work could commence by 31st March.

A major point of discussion centred on access to the new extension for disabled patients. A lift system would be ideal, but considerations of cost could rule it out. Other alternatives were discussed and would be further explored at a later date.

Some discussion of the Wootton St surgery followed, and it was pointed out that the building is not owned by the Practice, but is rented. There were plans to do some small internal building works at the surgery to make the usage of the space more efficient.

SJ and AD outlined plans to recruit a new post of Reception Manager, who would report to the Practice Manager. The process was being organised by a specialist recruitment agency ("First Practice Manager"). The primary role of the Reception Manager would be to oversee the training and recruitment of receptionists, with their increasing responsibilities as part of the triage process.

AR requested likely timescale for the appointment of the Reception Manager. SJ advised that interviews will be held on March 4th and appointment to follow but determined by the notice period of the successful applicant (which could be up to 3 months). SJ will report back to PPG on progress with the appointment. **Action 1: SJ**

Flu clinics. There was a short discussion around PPG assistance with this year's flu clinics in light of the queue management and accessibility to seating experienced last year.

Taking patient survey results forward. This item has been deferred until the next meeting due to time constraints.

Any Other Business

a) A large centrally located monitor /screen should soon be installed, in place of the two existing ones. Sandra will report back on progress. **Action 2: SJ**

b) In the absence of such a system (or when it is not working), the GP/health professional speaks out the name of the next patient to those in the waiting area. GK stated that not all of the speakers were audible, especially given the poor acoustics, and he had received complaints from patients, especially (but not only) those with hearing difficulties. This would be addressed at the forthcoming GP meeting and reported back to PPG. **Action 3: AD**

c) STEER. The Practice are not aware of any referrals to Hampshire Fire & Rescue Service at this time.

d) Healthwatch: Mental Health related Leaflets have not been received.

e) GK proposed action log be introduced in order to separately record actions that are generated at each meeting. These will be kept live for future meeting until they have been completed. All agreed.

f) FA requested the Practice Pharmacist attend a PPG meeting and talk the group through her role and tasks; SJ to advise. **Action 4: SJ**

g) MR requested that the new Reception Manager attend a PPG meeting and talk the group through her role and duties; SJ to advise when the post has been filled and taken up.

The meeting ended at 8.30 pm

Next Meetings March 28th 5.30 pm & May 23rd 5.30 pm

Actions for Next Meeting:

Action 1: SJ to report back on progress with reception manager appointment

Action 2: SJ to report on progress with new screens

Action 3: AD to report back on the issue of audibility in the waiting room

Action 4: SJ to advise whether the pharmacist will be able to attend a PPG meeting

Drayton Patient Participation Group Meeting 24.01.19 - Practice Update

1. Staffing Changes

There are two new regular doctors working in the practice: Dr Pete Concannon will be with us from next Monday afternoon and will add in Wednesday afternoons from the beginning of March 2019. Dr Perminder Sethi joined us at the end of November and is available on Wednesday Mornings. We are currently advertising for another Salaried GP to join the practice and bolster our numbers. We have a Pharmacy Technician – Emma Coombs - joining the Prescribing team at the beginning of February 2019. She will work alongside Sarah, our Pharmacist and the Repeat Prescription team to help with Repeat Dispensing and synchronisation of medication initially. We have started the process of recruiting a new Reception Manager who will hopefully be in post late spring/early summer.

2. Practice Development

The plans to develop the currently unused space in the basement of the practice site at Drayton are proceeding. Planning permission has been applied for and a decision will be given on 8th February, 2019. The CCG is supportive of the development and are funding a significant % of the costs involved – without this funding we would not be able to proceed. It is vital therefore that the planning process moves swiftly. Dr Drake and Sandra met with Mary recently to discuss what is involved in the development process and the approximate timescales we are working to. We have to move fast in order to secure the CCG funding, as without this funding the project would not be viable. It will be good to have input from the PPG once we are further along in the process although Mary has already made a few suggestions which are being taken into consideration. In tandem with waiting the planning application decision we are working with our Architect and a Quantity Surveyor to draw up a detailed specification which we can then be used to Tender for the building work required. We will update the PPG at the next meeting – and I suspect this will be an Agenda item for quite some months yet.

3. Primary Care Networks

There is a national initiative to encourage practices to work collaboratively to cover groups of 30k -50k patient populations. More detail about this can be found via the following link:

<https://www.england.nhs.uk/gp/gp/fv/redesign/primary-care-networks/>

4. NHS App

As you may already be aware there is a new NHS App which is being rolled out across practices over the next 6 months or so. More information is available via the following link.

<https://digital.nhs.uk/services/nhs-app#summary> Once registered, people can:

5. eConsult

As previously advised the eConsult system went live at the beginning of December 2018. The number of contacts via eConsult is slowly increasing. The app will be fully integrated with the IT system used (TPP SystemOne) and will be fully available across England by 1 July 2019. We do not have a date when this will be “live” for our patients yet.

- check their symptoms using the health A-Z on the NHS website
- find out what to do when they need help urgently using NHS 111 online
- book and manage appointments at their GP surgery
- order their repeat prescriptions
- securely view their GP medical record
- register as an organ donor
- choose whether the NHS uses their data for research and planning

The total number of contacts via the system during December 2018 was 97. 25 were converted into electronic consultations, 10 were dealt with as self help, 4 were self referrals to local services (i.e.Physio). Overall a saving of 15 face to face appointments. So far during January 2019 there have been 160 contacts, 43 have been converted into electronic consultations, 6 self helps, and a total of 25 face to face appointments have been saved.

We anticipate the numbers will continue to grow as more patients become aware of the system.

6. Patient Information Screens in waiting room at Drayton

There is still an issue with the handset for the Information Screen in the waiting room at Drayton (Left hand side when sitting in reception) and we are chasing the company to sort this a.s.a.p. A revised quotation for the replacement of the other screen at Drayton (Right hand side when sitting in reception) is currently with the CCG awaiting outcome of a bid for funding.

7. Enhanced Access service

The CCG are working with Healthwatch to find out patient views about the emerging projects across the city, in particular the Enhanced Access Service. This will involve Healthwatch coming into the practice to speak to patients during AM and/or PM surgery sessions during February 2019.

8. National Patient Survey

It is that time of year again and the national patient survey is underway. We have no involvement in this Survey as patients are contacted directly to take part.

9. NHS Long Term Plan

The NHS Long term plan was recently launched and covers the plans for the next 10 years. It may be of interest to the PPG members and is available via this link: www.longtermplan.nhs.uk

10. Flu Clinics

We do still have flu vaccine available for any patient in the “At Risk” groups who has not yet had a jab. We are also still doing the housebound vaccinations and do have a limited supply of vaccine for both the >65’s and the under 65’s. In total so far this season we have vaccinated a total of 3585 patients – 737 <65’s At Risk group

2531 >65yrs 317 children This is more patients than we vaccinated last year, despite the chaos at the start of the flu season. The local Pharmacies have in fact vaccinated less patients than they did last year – 797 in total so far. 511 patients have declined vaccination.

Drayton Surgery Proposed Development

At the last PPG, we briefly discussed the proposed development of the lower ground floor of the Drayton Surgery, and we are certainly supportive of the concept of expanding the current site. However, we are disappointed that the Surgery felt unable to agree to our request to view and comment (if necessary) on the proposed development plans prior to the details being in the public forum (on the Planning Portal).

We believe that the unwillingness to consider our request is contrary to the PPG Terms of Reference: specifically Objectives 3(a) "To act as a consultative group for proposed changes at the Practice" and 3(b) "To encourage suggestions for improvement of services and feedback on performance". It is also contrary to the spirit of the NAPP guidelines (e.g. *Growing Patient Participation, 21 ways to help your Practice thrive* https://www.napp.org.uk/GPP_21Ways_acc.pdf).

We would welcome the opportunity to meet to discuss the above principles of the PPG terms of reference and resolve this specific issue in a spirit of co-operation and consultation. Now that the plans are in the public domain, a small working group led by Alan have considered the plans and have made some suggestions that may be helpful. We would make the following comments from a Patients perspective and would ask you to consider these points prior to commencing works.

- Review the proposal against the Dept of Health Document guidance documents (eg. HBN 11-01).
- There is no dedicated disabled or ladies toilets (strange shared arrangement) how will this be managed. (Disabled males ? Dementia sufferers ?). Would it make more sense to have two unisex toilets (one of which is for disabled patients)?
- There is no baby changing facility.
- There is no baby feeding facility.
- There is no children's area in the waiting room
- Consulting rooms opening directly onto the waiting area is an unusual arrangement, as this may compromise privacy. If the requirements of Dept of Health guide HTM 08-01 have been applied to the rooms and waiting area, then this will help considerably.
- There are a number of doorsets to pass through on the route from Entrance to the waiting area; will these be automated or on "hold open" devices?
- Access to the Lower Ground floor is by a shared (pedestrian and vehicle) tarmac ramp without any segregation, the gradient is in excess of guidance and generally does not appear to comply with the Disability Discrimination Act on a number of counts.
- The Lower Ground Floor car park has one disabled parking space but most of the patients escorts/carers don't have a disabled badge and the car park rarely has empty spaces. The vast majority of patients will be required to use the shared tarmac ramp.
- The previous proposal (2007) for the development of the Lower Ground Floor was very similar to this one but included a lift between the Ground floor and Lower Ground Floor. If this could be included, it would help mitigate the risks associated with the ramp.
- We believe that consideration and discussion of the above points would be beneficial to the patient experience on the proposed development.