



Patient Participation Group

**Old Town Surgery
Patient Participation Group
Meeting 13 October 2016 at 18:45 hours**

Attending:

(MC) Maurice Cleary – Chair
(CO) Chris Ockwell– Vice Chair
(KT) Krystyna Tworek – Treasurer
(ES) Elaine Sullivan – Secretary
(HS) Hayley Slatter – Practice Manager
(BB) Beryl Bowles
(KB) Karen Burgess
Dr Heaton

Apologies from:

(TB) Terasa Beach
(SB) Susan Bradford
(QC) Quentin Clothier
(CW) Chris Watts – Cllr/patient
(NW) Nadine Watts – Cllr/patient
Dr Carson

Leavers:

(RF) Richard Fuller

Visitors:

Jo Osorio

Virtual/non attending membership (email only)

Agenda

1. Minutes from the last meeting (15th September)
2. Actions from the last meeting
3. Guest visitor – Jo Osorio
4. PPG Objectives
 - 5th October Educational Event – reschedule
 - Objectives setting 2016/17 – feedback on CO draft
 - OTS website review (virtual members action)
5. Complaints handling (new item)
6. Practice Manager's update (standing item)
 - Flu Clinic update



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7. PPG Forum (standing item)
8. Special Interest (standing item)
9. Accounts & Fundraising (standing item)
10. AOB
11. Date of next meeting – 10 November 2016

Welcome and apologies

Apologies were given for the meeting.

1. Minutes of the last meeting

Minutes of the September PPG meeting were discussed and agreed.

Action: HS to upload a copy of the minutes of the September meeting onto the PPG page on the surgery website.

2. Actions from the last meeting (11 August)

Action 1. Done (standing item).

Action 2. Information on Spirometer and other equipment now on website. Done

Action 3. HS has meeting scheduled with Deputy Head on 14/10. Done

Action 4. Done

Action 5. Done

Action 6. Done

Action 7. Done

Action 8. N/A

Action 9. CQC report on Website. HS to inform ES when league table information available on site

Action 10. Done

Action 11. Done

Action 12. Dr Aldridge drafted a response, no action for the Complaints working group

3. Guest Visitor – Jo Osorio from HealthWatch

In September we wrote to HealthWatch to invite Jo to come along and answer several questions. Firstly JO informed the PPG that HealthWatch's remit is to listen to patient's views on service received from the Healthcare providers, and to share with the providers/those who hold the financial purse strings to solicit answers to the questions or concerns raised by the patients and members of the public. HealthWatch also attend Health & Wellbeing Board and other boards and committees. They are invited to circa 30 meetings on a regular basis. HealthWatch also provide an advocacy service, which allows the organisation to get a rounded view of the issues in the locality (specific and general concerns).

JO wished to make it clear that he was not an apologist for the various organisations that HealthWatch have relationships with, but would happily listen to the concerns of the PPG and take these back to those organisations.

Feedback is as follows.

"Can you give us a "progress report" on the NHS 5 yr Master Plan that we've been hearing about for the last year or so - but- to respond from a HealthWatch, Swindon perspective"



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JO confirmed the focus is now on the development of the Sustainability & Transformation Plan (STP). Local authorities across Swindon, Wiltshire and BANES are tasked with developing the plan. Dept. of Health/NHS England have restrained any publication until 31st October. Local authorities have until 21st October to submit final versions. Once plan is produced, the authorities will have to engage with the population to explain the Sustainability & Transformation Plan. Plan will cover organisations working together, changes in staff, making best use of resources. HealthWatch's responsibility will be to make sure the public/patients are aware of the published plan and get an opportunity to comment.

Dr Heaton expressed strong concerns re the GP surgeries handing back their NHS Contracts. There are already 50 free GP vacancies in the Swindon Locality, plus the idea of sharing staff seems to be unrealistic. CO mentioned that the STP sounds like another 'white paper' like the 5year plan/10 point document, which is being produced as opposed to another evidence of actions.

JO confirmed that the CCGs have the responsibility to communicate with the public, not HealthWatch. Overall Dept. of Health/NHSE is accountable. The local Councillors' roles are to scrutinise what's going on.

"An update & Health Watch view on the implications of the recently announced SEQOL close down"

JO explained there is an interim arrangement in place before the Contract procurement completes in February 2017. In some cases the same organisation will run the services but without the SEQOL management. GWH have secured the contract for three years with the option of a further two years.

There are two care homes, which have gone back to Borough Council control. Some other services have been 'divvied up' between other services/management organisations.

Primary Care Services procurement. Current public position was set out in the Primary Care Committee papers, which were discussed at the recent meeting (w/c 3rd October). This is the Joint Committee of Swindon CCG and NHSE called Joint Primary Care Commissioners (JPCC). There is lots of information on the Agenda papers but shortly the public will be informed on where the contract has been secured and patients will be able to get involved.

Work continues on development of the SUCCESS centres and their work to support primary care/urgent care services. Dr Heaton mentioned the closure of the walk-in centre at the Carfax centre, which will close on 31st March 2017. Currently there are no plans to re-commission the service. Presently 4000+ patients use this service. Dr Heaton is not sure whether the Home Visiting service will continue, which was a good service to back up the GP surgeries. Dr Heaton's views on the SUCCESS centres are well known and stem from the fundamental problem that the locums are attracted to the SUCCESS due to higher rate, yet frequently are reported to be under-utilised. This at a time when the GP surgeries are still 50 GPs short in terms of recruitment, planning to retire or closing their surgeries. The service provided at the SUCCESS centres does not match that of the surgeries; for example, there are no blood tests/diagnostics undertaken, which results in the patient returning to local surgeries for the investigations to take place. Dr Heaton acknowledged it does take heat out of the day, but very expensive and under utilised. Figures collated recently show that 90% of the usage is from two surgeries, with the remaining 24 surgeries making up the other 10%. This imbalance requires further investigation.



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JO mentioned another innovation, which started back in August, which is the Telephone Prescription Ordering Service. This is something offered to all using EMIS. Basically there is a dedicated phone number, which is picked up by the CCG for the relevant surgery, just for taking prescription orders. This is to alleviate some of the pressures for the surgeries. OTS currently has the Vision online ordering and therefore, this is not a requirement.

“Your view on the progress / successes / (or not) of the HW 2016 Objectives & your draft thoughts for the 2017 HW Objectives”

JO confirmed the contract for HealthWatch has recently changed to The Care Forum (from April 2016). Still finding their way with this new organisation (non profit). The Care Forum have a good track record, advocacy support etc. that fits with the HealthWatch remit. HealthWatch are taking a pragmatic line on what they [HealthWatch] are doing.

HealthWatch are currently recruiting local volunteers to act as representatives to attend the various meetings (as mentioned above) that HealthWatch are invited to. On a day-to-day basis, respond to issues raised by members of the public. Part of the contract is to provide a complaints advocacy service, which allows HealthWatch to get a fairly rounded view of the issues.

“How do you see the "involvement & engagement" of HW with the 20+ surgeries around Swindon, given for instance at the last forum virtually as many PPGs failed to attend as those that did”

JO confirmed there are approx. 15 PPGs that are regularly involved in the PPG Forum. There is a small steering group (5 people) helping to decide what the PPG Forum should. JO regularly visits PPGs such as OTS. JO stated that whilst surgeries must have a PPG contractually, the PPG are not obliged to attend the PPG Forum, which is a voluntary forum set up to support the PPGs.

JO left the meeting at this point and the meeting continued with the standard agenda.

4. PPG Objectives

Rescheduling of the October Educational Evening.

HS confirmed the venue and speaker has been agreed for Tuesday 13th December. HS also confirmed there were over 20 registrations. Good response from the text reminder service.

Action: ES to update the poster/press release for Radio/Press advertising.

Action: ES to circulate the evening to Nationwide Staff for uptake opportunities.

Action: HS to send out text reminders and focussed emails.

Action: ES to produce A3 posters for display in reception & laminate some A4 posters for notice boards.

Action: ALL to supply more donations for tombola and assist with preparation of room and other duties ahead of the evening. Recommendation to be in attendance from 5pm onwards.

Objective Setting 2016/17:

Objective	Owner
Website Review & comparison with best practice at other surgeries	Bowen W Krystyna T Elaine S



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	Karen B
Carry out 2-3 Education Evenings (with the next possible subject being – “Young Persons”)	ALL
PPG response / reaction to the July 16 CQC Inspection report (ES to look at Poster options to promote the GOOD result)	Chris O Hayley S Elaine S
Maintain the HealthWatch interface & try to influence its activities	Chris O Krystyna T Susan B
On a quarterly basis visit other PPG’s to understand their best practices & current issues	Chris O
Get ideally (2/yr) in person updates from the CCG	ALL
Develop & extend our Patient Communication Strategy	Elaine S
Challenge surgery on its progress on specific (mandatory) tasks (i.e. patient data, iPod etc.)	ALL

5. **Complaints handling** (new item)

none this meeting.

6. **Practice Manager’s update** (standing item)

HS confirmed that the additional chairs have been ordered, when arrived KT will provide cheque on production of surgery invoice for same.

Meeting Mr Batty (Deputy Headmaster at Commonweal School) on Friday 14th October looking to recruit younger PPG members. More updates to follow.

New text reminder service will start with effect from Monday 17th October, which interfaces with Vision.

Patient Access to records. This is now possible. Dr Heaton and HS discussed the information that will be provided when/if requests come through. Could be more confusing than beneficial.

Expect the requests to be useful for patients who need to confirm dates with insurance companies etc. but do not expect this access to have any major benefit to patients due to system coding on patient records and the lack of free text commentary being made available.

Flu Clinic. A total of 542 patients were seen on Saturday 8th October. Excellent feedback on the day. Well done to KT and KB for running the tombola, on the day

HS mentioned that patients of Hermitage and GWH Surgery have been told of the closure of those surgeries.

7. **PPG Forum** (standing item)

None this meeting

8. **Special Interest** (standing item)

None this meeting



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9. Accounts & Fundraising

KT confirmed that from the flu Clinic a further £220 was raised. Once the patients were given examples of what the funds were used for, the patients generously contributed to the tombola. In fact more prize donations are required ahead of the next Educational Evening as only 4-5 items left.

HS suggested PPG leaflet is prepared outlining what PPG does and what has been achieved by the group, along with the donations over the previous years.

New balance now stands at £822.82. MC asked when Steve Wheeler (Accountant) could visit the surgery to review the books. HS suggested afternoon appointments are best.

Action: ES to prepare initial leaflet detailing the PPG and what it does for review.

Action: KB/HS to update the newsletter and the OTS website with details of the fundraising.

Action: HS/KT to buy pasting table for use when holding tombola

Action: KT to purchase Christmas items for the 13th December evening from the PPG bank account as prizes for the tombola.

10. AOB

HS confirmed the notice boards have been ordered. MC to organise the handyman to fit same.

11. Date of next meeting:

Next PPG meeting(s) will be: 10 November

Apologies from KT

Meeting closed at 20:10 hours



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APPENDIX A – Useful contact(s)

Contact details for MP Robert Buckland QC's office

Andrew Timlett

Parliamentary Assistant to Robert Buckland QC MP

Member of Parliament for South Swindon

01793 533393

andrew.timlett@parliament.uk

29b Wood Street Swindon SN1 4AN

Useful Links

This is what the Clinical Commissioning Group does

<http://www.swindonccg.nhs.uk/what-we-do>

This is what Seqol do

<http://www.seqol.org/health>

<http://www.seqol.org/careandsupport>

This is a link to the community services consultation

<http://www.swindonccg.nhs.uk/provision-of-community-services>

This is a link to the work of HealthWatch

<http://youtu.be/lGc0-L2BIXQ>

[Link to the RCGP/NHSE/BMA GP Workforce Action Plan](#)

[List of the national awareness days \(months\)](#)