Notes of the meeting of the Drayton and Wootton Street PPG

Date: 11 April 2019 (5.30pm)

Notes for the meeting were taken by AP and GK

<u>Present</u>: Chair: Mary Ramsay (MR), GK, AP, LI, AR, SA, MV; Sandra Jordan (SJ) and Dr Swindells (MS) were present from 5.45pm. Apologies were received from FrA.

Previous meeting notes. These were agreed unchanged as an accurate summary of the meeting

Repeat Medication Change Letter Change. MV tabled a letter from the Surgery that had addressed the patient incorrectly, and had advised that a third party (a Japanese Pharmaceutical Company) had participated in a review of the patient's risks, the outcome being that the patient's medication dose has been increased. MV requested clarification of the detail of the review, the involvement of the Pharmaceutical Company and expressed concerns that the patient was not aware of any form of review and that the letter came as a complete surprise.

Dr Swindells and Sandra Jordan joined the meeting at 5.45pm and joined in the discussion of item 1. Neither had sight of the final letter (although they were aware of its existence). They agreed to look into both the content and the process and report back (**Action 1: SJ**).

Sandra tabled a report from the Practice (see Annexe 1 below). Discussion ensued on a number of points within the document.

- Staffing: It was agreed that the new staffing manager (Andrew Hamilton) would attend the PPG
 meeting in July, and he is keen to do so. The practice pharmacist (Sarah) will await the expansion of
 her team before joining us.
- 2. Practice Development. No additional points were raised.
- 3. Primary Care Networks. It was re-iterated that these networks are nothing to do with merging practices, just closer working together. It was not entirely clear how they differed from Hubs. The Chair will investigate the possibility of joint PPG meetings with North Harbour (Cosham Health Centre). (Action 2: MR)
- 4. New Models of Care. No additional points were raised.
- 5. eConsult. No additional points were raised.
- 6. Patient information Screen. Although this was now working, the Patient Call screen is still not functional, and we continue to have audibility problems. Although clinical staff had agreed to step fully into the waiting room to call in patients, at least two committee members stated that this was not always happening (especially with more junior staff, or recent recruits). This applied to both Drayton and Wootton Street surgeries. Sandra and Dr Swindells agreed to push the message harder. (Action 3: SJ/MS). MR requested a slot on the patient information screen for the Patient Participation group (PPG).

7. Virtual PPG membership. Of the 56 patients now signed up, there is a good gender balance and between the ages of 24-75 there is also a good spread. Very few were <24 (2) or >75 (1; ~85% are white British. The vast majority are drawn from Drayton surgery.

We also discussed membership of the PPG and noted that most of us were coming up to 3 years service in the summer of this year. In order to allow for some turn-round, it would be good to recruit new members and it was suggested that Sandra email the virtual ("patient reference") group (PRG) to trawl for possible recruits for PPG, also to be highlighted on the practice website (**Action 4: SJ**). It was further suggested that it might be useful to have a get together between the two groups, including a welcome from the Chair (**Action 5: MR to investigate**).

- 8. Pavement Area. The PPG were in favour of paving the grassed area at the front of the surgery to make for ease of getting out of vehicles parked in the disability bays in wet weather. This might be especially relevant as patients will be unable to use the car park at the back throughout the building works (see point 2 of report).
- 9. PPG Awareness week (10-15th June). The possibility of a "come in for a chat" session at the surgery was also raised, although no details were discussed regarding how this might be managed. This would be a possible agenda item for our next meeting (Action 6: MR/SJ).
- 10. City-wide PPG. No additional points were raised.

AOB: LI outlined the difficulties of carers who needed an urgent appointment at the surgery for themselves, if they could not leave the patient they cared for at short notice. While the practice was sympathetic, MS pointed out the difficulties of reserving time slots for such eventualities.

The meeting finished at approximately 7pm

Next meeting: May 23rd, 5.30 pm

Date and time of meetings for the remainder of the year to be confirmed by email (Action 7: MR)

Summary of Action Points:

Action 1 (SJ) Prescription Change Letter from $3^{\rm rd}$ party to be investigated

Action 2 (MR) Possible joint PPG meeting with network partner

Action 3 (SJ/MS) Audibility issues in waiting room(s)

Actions 4 (SJ) and 5 (MR) Recruitment of PRG members to PPG

Action 6 (MR/SJ) Future agenda Item on PPG Awareness Week

Action 7 (MR) Time/date of future meetings

Annexe 1

Drayton Surgery Patient Participation Group Meeting 11.4.2019 - Practice Update

- 1. Staffing Dr Concannon and Dr Sethi are now firmly established in regular sessions on Mondays/Wednesdays and they will both be working with us for the foreseeable future. The new Reception Manager, Andrew Hamilton, joined the practice with effect from 1St April, 2019. Andrew has a wealth of experience in Customer Service in the retail sector. As his induction period will last until end May 2019 to enable him to gain an understanding of how the NHS works, we feel it would be best for him to attend either the May or July PPG Group meeting. We believe Andrew will bring a fresh approach to improving the service the reception team provides and he has settled in very well so far.
- Pam Clarke, who manages the branch surgery at Wootton Street, will be leaving us at the end of April 2019, as she has decided to retire after over 20 years' service. We will miss her and hope that she has a long and happy retirement. Some elements of her role will be taken on by Andrew and others will be shared within the existing administrative and managerial teams. (Action point 1 from last mtg)
- The PPG requested that the clinical pharmacist attend a PPG Meeting to explain her role however, the role this was explained prior to Sarah taking up the position, and the role hasn't changed. It is felt that it may be more beneficial to hold fire until potential other new staff are in post (Item 3 refers) and then have a meeting where each is invited to meet the group and give more detail about how the roles fit into the practice. (Action point 4 from last mtg)
- 2. **Practice Development**. We are still awaiting confirmation of the planning permission for the development of the basement area due in part to Portsmouth City Council having lost staff and struggling to manage the volume of submissions. However we did have to make some minor alterations to the original submission which has also impacted upon the timescales. We have an agreement with the CCG regarding the funding which had been agreed previously, and has now been carried forward to the current financial year. The detailed specification will be sent out to the builders, to tender for the works required, as soon as the permission has been granted formally. The city council have already indicated verbally that it would pass the application, so we are hopeful that by the next PPG meeting things will have moved on considerably.

In response to comments made by the PPG members and also from personal observations, we have been discussing pedestrian access to the basement rooms once they are completed and used. We hope to install a pedestrian only ramp on the opposite side of the building to the existing ramp to the car park – i.e. between the surgery building and the pharmacy building next door. This would enable access to the car park via a gentler gradient ramp. This would hopefully improve ease of access for patients with mobility needs as well as being safer for all as it will be well away from the vehicles entering/ leaving the car park. The option of adding on a lift to the exterior of the premises has not be completely discounted , however it is not something the practice is actively considering at present. However, having met with the Quantity Surveyor, Architect and one of the potential builders, we have been made aware that we will need to close the car park to patients during the build. This is due to a significant section being

required for storage of building materials, machinery etc. It is hoped that this will be for as short a period as possible, but is unavoidable. The practice will continue to keep the PPG appraised of developments and will seek the involvement via AP on the specific concerns raised by the document tabled at the last PPG Meeting regarding the specifics of internal layout, fittings etc.

3. *Primary Care Networks*. As mentioned at the last PPG Meeting there is a new initiative called Primary Care Networks. All GP practices have very recently been asked to join together with other practices to form Networks. There is considerable funding available from the NHS, which will be allocated to these new Networks, to enable them to recruit additional staff to help ease the pressure on clinicians and improve access to services for patients. The funding will be available, on a recurring basis, over the next 5 years. The current year, April 2019 – March 2020 will be a preparatory year to establish the Networks and potentially recruit Clinical Pharmacists and Social Prescribers who will provide services to the patients of the practices involved in each individual Primary Care Network. Thereafter, there will be funding available to recruit other staff such as Paramedics, Physicians Associates and Physiotherapists. We will be linking with North Harbour Medical Group to form the Portsmouth North Primary Care Network (PNPCN). Our network will have approximately 28,000 patients.

The 5 proposed Networks that will form across Portsmouth city have been verbally approved by NHS Portsmouth CCG, and also by the Local Medical Committee. We are required to sign an agreement to work collaboratively with the other practice and to have processes in place to administer the funding that will be given to the Network.

We anticipate that our patients will see little change in the day to day running of the practice, and the services we provide, for the first year. As the Network develops new ways of working and additional staff will hopefully enable us to provide our patients with additional services. It is very early days and we have only had the National specification for the Network for a week or so and we are still getting our heads around the detail. There are some specific deadlines we have to meet for setting up our network and Dr Swindells and Sandra will be taking a lead on this on behalf of the practice. We will update you as to exactly what this will mean at the next PPG Meeting and will provide some info to the patients via a newsletter as soon as we can. It is important to stress that this is a way of working together, to gain best benefit and funding for both the practices and their patients. It is categorically NOT a merger between the practices.

4. **New Models of Care across the city – Portsmouth MCP Programme**. There are a number of pilot schemes being developed across the city as part of the Multi-speciality Community Provider (MCP) project between the CCG, the Primary Care Alliance, Solent Trust and Portsmouth City Council. We are already involved in some of these projects and will be supporting others as they commence. For more info about the pilots, please explore the following link:

www.healthandcare.portsmouth.gov.uk/wp-content/uploads/2019/01/Portsmouth-MCP-Away-Day.pdf

5. *eConsult* The numbers of patients using eConsult are steadily increasing. Jan 2019 - 285 visits to the site -67 consultations - approx. 40 face to face appts saved Feb 2019 - 297 visits to the site -80

consultations – approx. 48 face to face appts saved March 2019 – 336 visits to site – 111 consultations – approx. 65 face to face appts saved. Each month there has been very positive feedback about the service from patients and word is spreading.

- 6. **Patient Information Screen.** The screen is now working again (at last). The plan is still to replace the patient call screen at Drayton however discussions are ongoing as to where to site this and whether to install before or after the building works are completed watch this space! (Action point 2 from last meeting) The doctors and nurses have all been advised of patients concerns around audibility in the waiting area and now step fully into the waiting room when calling patients through. (Action point 4 from last meeting)
- 7. *Virtual PPG Membership Update.* The Virtual PPG numbers are steadily increasing we have approximately 56 patients signed up 27 male and 29 female. The age spilt is as shown on the attached printout that was produced prior to the date of the meeting moving to today.
- 8. **Pavement area at front of practice.** One of our local councillors has asked whether our patients would welcome the public pathway at the front of the practice being changed so that it becomes all paved, rather than having the grass sections? We understand this to be a proposal which came about from comments about having to get out of vehicles onto a grassy area which can be slippery and muddy when wet. Could the PPG please give us some feedback on this, which we can then forward on to the councillor.
- 9. **PPG Awareness Week** 10^{th} 15^{th} **June 2019.** We wondered whether you would like to promote the work of the PPG in some way to raise awareness during the week 10^{th} 15^{th} June, and what form you would like this to take? Posters in reception area informal meet and chat session staffed by PPG members? Perhaps a discussion to follow up on at the next meeting?
- 10. City Wide PPG Meeting. Just a reminder that the next city wide PPG meeting will be on Weds 22nd May at 8pm at The Portsmouth Academy Training & Learning Centre, St Mary's Road, Fratton.