



Patient Participation Group Meeting
Tuesday 14th June 2016 – 5pm

Attendees:

Patients

Alan Rule – AR
Linda Rule – LR
Shenene Fontenelle-Struthers – SFS
Jean Kyle – JK
Annie Brotherton – AB (British Sign Language Interpreter)
Eric Fallais – EF
Harry Firth - HF

SMG Staff

David Nicholson – DN – Practice Manager
Dr Phil Lamballe – PLL – GP Partner

Other Attendees:

Apologies

John Tait
Richard Bettencourt
Mark Hollings
Alan Gowers

1. **Introductions** - AB to explain how best to communicate with JK
2. **Previous Minutes**

Patient Access – text reminders for appointments now stating which surgery they are booked at

Property – Project Initiation Document submitted in January but we have not had any further response from NHSE. The Primary Care Transformation Fund bid is still ongoing, the government portal set up for such bids has resulted in a request for a lot more information and we are working with staff from our CCG to submit ahead of the 30th June deadline.

Test Results – this piece of work is still ongoing, we currently don't have the functionality within our clinical system EMIS Web to make results more easily available but we are in the process of buying an add on system called Patient Chase that we hope will provide greater flexibility.

Patient Online Access – Has proven popular with patients since it was implemented in our Practice in March, staff have reported system is working well and both staff and patients well informed about the operation of this new facility.

3. New CCG enhanced services

Dr Lamballe gave an explanation of the new enhanced services commissioned by Newcastle Gateshead CCG which involves various pieces of work being done in the primary care setting of GP Practices rather than in secondary care.

These services are as follows:

- Supporting Transfer of Care (SToC)
- Administration of Denosumab
- PSA Monitoring and Androgen Deprivation Therapy for Patients with Prostate Cancer

4. Practice Update

DN gave an update on main news within the Practice

1. **GP Recruitment** – In last 2 weeks we have had a number of applications and one request for an informal visit. Also taken on an apprentice in IT.
2. **Dr Grant** has returned from maternity leave so Dr Beal who has been covering for her is leaving to work in Australia. We are still paying for locums to cover sessions worked by Dr McGeever until such a time as we can replace her permanently.
3. **Patient Chase** – investing in a bolt on system for patient recall, aim is to reduce number of times patient have to come in to the surgery.
4. **The Practice website** www.savillemed.co.uk has had a major revamp, suggestions and comments most welcome.
 - EF would like to see an update on the roles of all our Nursing team.
 - JK – text messages not always appropriate to all patients, recent example being text sent out by Practice about the Electronic Prescribing Service – EPS that stated patients should telephone the Practice. DN took feedback on board and will mention to the Practice team who are looking at improving communications with patients with differing communication needs to ensure we are compliant with Accessible Information Standard that is being brought in by the DH.

- HF – getting results from tests is still an issue for patients, it is important to be told you are ok.
- EF would like to see Doctors do more with patient medication reviews. PLL mentioned we are working with our Intrahealth on site pharmacists to look at a number of projects including patients on multiple medications and that medication reviews are also being done via the EPS system.
- JK mentioned lack of PALS leaflets in the Practice for service they provide for deaf patients, DN will look into this as normally we have sufficient supplies of literature from PALS.

(b) Contract Changes 2016-2017

Main changes are as follows:

1. Increase in payment for Practices vaccinating patients from £7.64 to £9.80.
2. QOF (Quality Outcomes Framework) – no changes this year, GPC & NHS looking at ways to end QOF in its entirety.
3. Dementia enhanced service has ended.
4. Access survey – Practices required to supply even more information on evening and weekend appointments.
5. We are to aim for at least 80% repeat prescriptions to be transmitted electronically, likewise 80% for e-referrals and 10% of registered patients to be using one or more online service by 31st March 2017. Also to receive all discharge summaries electronically (from April 2016).
6. Develop arrangements for identifying Patients with European Health Insurance Card (EHIC) and S1 & S2 at point of registration. No discussion has taken place to address additional workload for GP Practices. Government aim is to implement by December 2016 but EU referendum may have halted this for a while until outcome of vote on 24th June 2016 is known.

PEP

As with previous years we have signed up to the CCG Practice Engagement Plan (PEP).

There are 2 sections to it:

1. Prescribing Engagement Scheme – involves prescribing leads, Dr Lamballe in our case is managing a number of projects to improve prescribing in Practices and achieve savings to CCG prescribing budget.
2. A series of projects involving the whole Practice working with a CCG facilitator on 4 main areas.
 1. Engagement
 2. Long Term Conditions
 - Part 1 – Care and Support Planning (Year of Care)
 - Part 2 – Respiratory (COPD & Asthma)
 - Part 3 – Early Diagnosis of Cancer (Bowel Screening)
 3. Urgent Care
 - Part 1 – Home Visits
 - Part 2 – Children & Young People
 4. Planned Care
 - Part 1 – Individual Funding Requests (IFRs/Value Based Clinical Commissioning Policy (VBCCP)
 - Part 2 – E-referrals
 - Part 3 – 2 week wait referrals (2 WW)

AOB

Next meeting – Tuesday 4th October 2016 – 5pm at Saville Place