

# HARDWICKE HOUSE GROUP PRACTICE

## PATIENT PARTNERSHIP

### MINUTES OF MEETING – Friday 2<sup>nd</sup> February 2018

NAME	REPRESENTATION	ATTENDANCE	APOLOGIES
Sylvia Bambridge (SB) Chair	Patient – Hardwicke House	X	
Dianne Middlemiss(DM) V. Chair	Patient – Hardwicke House	X	
Phil Worsley (PW) Secretary	Patient – Hardwicke House	X	
David Cripps (DC)	Practice Manager	X	
Dr Susmitha Pavuluri (SP)	GP		X
Dr James Gilmour (JG)	GP	Part	
Margaret Carpenter (MC)	Patient – Bures	X	
William Snelling (WS)	Patient Bures	X	
Sylvia Norton (SN)	Patient – Hardwicke House	X	
Pam White (PW)	Chair - Great Cornard PC		
Norman Hume (NH)	Patient – Hardwicke	X	
Lisa King (LK)	Patient – Hardwicke		
Tanya Millar(TM)	Patient – Hardwicke	X	
Eric Catton (EC)	Patient – Clare	X	
Bryan Williams	Patient – Clare		X

#### 1.0 Welcomes Introductions and Apologies

**Welcome** – Sylvia Bambridge (Chair) welcomed members.

SB expressed disappointment that for the 2<sup>nd</sup> time no minute taker was available from the practice. It was noted no apologies had been received from Pam White for the 3<sup>rd</sup> meeting in succession.

**Action:** SB to contact PWh.

#### 2.0 AGM.

2.1 **Chairs Report** – attached.

#### 2.2 **Election of Officers**

PW reported he had not received any new nominations for the group's key posts. However, all existing post-holders agreed to stand for another year. All re-elected unanimously.

**Chair:** Sylvia Bambridge,

**Vice Chair:** Diane Middlemiss,

**Secretary** Phil Worsley,

**NAPP Rep.** Tanya Millar.

#### 2.3 **Review of PPG's Terms of Reference**

**Item 2.9** EC asked about money donated to practice. DC said when money was donated, the donor usually specified what it should be spent on.

**Item 4.2** The group will meet at least quarterly” changed to “The group will meet every 2 months”.

**Item 5.5** A practice member will be responsible for taking minutes and posting information about the PPG on the practice web site and notice boards”, changed to “A practice member will be responsible for taking meeting minutes”.

Revise copy of Term of Reference attached.

#### 3.0 Updates

##### 3.1 **Hardwicke House Group Practice**

- **New Premises Update** - JG said they were still talking to Babergh re new premises but no progress yet being made. Could be included in new Boreham Centre development if and when the project went ahead. JG to meet with John ? to see what pressure can be put on Babergh. MP also talking to Jeremy Hunt. No immediate rush as quite comfortable at present.
- **Dr Laura Jenkins** back from maternity leave, therefore, full GP staffing.
- **No of patients** - Currently 23,166.

- **Bigger Practices** - Trend towards bigger practices with 30,000 patients, therefore, smaller practices under threat.
- **Premise costs** are “cost neutral” as NHS pays landlords direct.
- **New Practice Nurse** appointed.
- **Nurse Prescribers**. - 3 Nurses trained as Nurse prescribers
- **Respiratory Care training** - ? Nurses on Respiratory Care training, COPD and Asthma.
- **Health Care Assistants** - All HH HCAs keen to progress to full nursing training (4 yr. course). DM asked if HCA could be listed on the HH web site. DC agreed.  
**Action: DC to list HCAs on HH Web site.**
- **DNA's** - DC said he writes to patients who persistently DNA. 1 patient DNA 26 times in a year. DC said he did not feel writing a DNA policy would serve any purpose as patients who DNA do not read policies !!  
**Care Navigator** – DC has not booked any staff on course as there are problems with the “Care Navigator” Dashboard, also concern about the misdirection of patients.

### 3.2 West Suffolk Clinical Commissioning Group (WS CCG)

WS CCG working closer with East Suffolk / Ipswich CCG, and closer ties with the Suffolk / North East Essex STP.

Moving towards hospitals being at the head of the care chain i.e. Hospitals having greater control of community health and GPs.

### 4.0 Minutes of last meeting and matters arising – action log

The minutes of the last meeting were agreed as being a correct record of the meeting

#### 4.1 Action Log

- **Involve local schools with PPG** - PW and MC reported no response from Ormiston Academy and Thomas Gainsborough School. MC and PW to follow up.
- **2018 Meeting Dates** – See item 5.1 below
- **GP Specialism** – DC to add GP specialisms to website, but no photos due to abuse of photos.
- **Methotrexate** – Not discussed.
- **Flu Injections** – HH policy is there must be a doctor on site when flu jabs dispensed. EC questioned why Community Pharmacies could give flu jabs when a doctor was not on site. DC said he could only comment on the policy adopted by the HH practice. A flu jab appointment would only have been made if it was known a GP would be available, however, on occasions a GP may not have been available due to sickness or an emergency.
- **Inaccurate Hospital letters** – Patient pursuing with consultant direct.
- **HH Phone System** – Meeting planned for 6<sup>th</sup> February. MC, DM, TM to represent PPG.

### 5.0 Progress Update PP aims and actions:

#### 5.1 Meeting Dates / Times

Preferred meeting days / times received from all group members. It was agreed to change the meeting day to the 2<sup>nd</sup> Wednesday of each month as from 11<sup>th</sup> April. Meetings to start at 2pm. A decision on evening meeting to be taken later in year.

#### 5.2 Patient Survey 2017

DC asked if there were any issues we wanted the practice to pursue.

**Action: PW to review and liaise with DC.**

#### 5.3 NAPP News

TM said this year's NAPP conference was in Nottingham on 19<sup>th</sup> June, but she would be unable to attend. Were any other members interested in representing the HH PPG at the conference ?.

NAPP web site contained tips on compiling patient surveys.

Also a guide to reducing GP workload.

**Action: PW to re-issue NAPP web site passwords.**

#### 5.4 PPG Notice Boards.

Notice boards have become crowded and there is a need to rationalise items and make use of more colour to make them more eye catching.

EC said he would look at the Clare noticeboard and welcomed the opportunity of going into the surgery as a PPG rep and not as a patient. PW said it would be useful if all members had badges to show they were PPG members.

**Action 1:** TM / DM to review

**Action 2** PW to issue badges to all members.

#### 5.5 Pharmacy Press Info. & Transport

PW said Transport schedule for Clare needs to be reviewed to reflect transport availability in Clare area.

**Action:** EC / DM to review Clare transport

#### 5.6 Newsletter

Winter edition issued, PW printed 200 copies for PPG members to distribute, DC agreed to print copies for display in surgeries.

Usual plea for more ideas for articles for next edition in Spring 2018.!!

**Action:** DC to print copies of newsletter for display in surgeries.

#### 5.7 HH Web Site

PW / DM had reviewed the PPG section and sent DC a list of a number of items for update.

**Action:** DC to update PPG section of HH website

#### 5.8 Sudbury Area Support Groups – items of interest.

**Success after Stroke** – PW said he had recently been to an open morning and was very impressed with what he saw. The group which meets on Tuesday and Friday mornings at the Stevenson Centre, Great Cornard has nearly 60 members. There were a number of activities taking place and 3 physios to help members improve mobility. The group has been running for 15 years and is entirely self-funded.

**Breathe Easy** meets in the Stevenson Centre at Great Cornard on 1<sup>st</sup> Wednesday of the month from 2 – 4 pm. Lost 2 members this month, gained 4 !!

**Suffolk Family Carers** – SB and PW attended a Lunch and Learn session given by SFC. It emphasises the importance of Carers registering with their GP and SFC. Carers who accompany patients to the West Suffolk Hospital should make it known they are carers and obtain a carers pack which contains specific information for carers. The carers pack also contains a carers badge and information about parking concessions.

#### 6.0 Patient experiences

**WSH No coordination of Care** - NH spoke about problems he was having with the WSH over a hand injury. He said there appeared to be no coordination of care, and damage to one of his tendons has still not been repaired. He was advised to contact PALs at the WSH.

**SHC Phlebotomy** – PW and SB have continued to pursue the Phlebotomy Service over poor service at the Sudbury Health Centre. Problems were due to staffing which they hope will be resolved by the end of February. Phlebotomy Services which were provided by the Pathology Partnership are now provided by the North East Essex and Suffolk Pathology Services.

**WSH Medication** - PW said he was aware of a patient who had a problem obtaining a prescription for eye drops. Normally the WSH will dispense 28 days medication, however, as a change of prescription was made over the phone the WSH relied on HH to dispense the medication. This was not communicated to the patient resulting in a wasted visit to the WSH and delay receiving the correct medication.

#### 8.0 Agenda for next meeting

No discussion due to time pressures

#### 9.0 AOB

PPG Budget

#### 10.0 Future meetings – Note changed to 2<sup>nd</sup> Wednesday alternate months

Wed. 11<sup>th</sup> April, 2pm.      Wed. 13<sup>th</sup> June, 2pm.      Wed. 8<sup>th</sup> August, 2pm.

Wed. 10<sup>th</sup> October, 2pm,      Wed. 12<sup>th</sup> December, 2pm.