

HARDWICKE HOUSE GROUP PRACTICE

PATIENT PARTNERSHIP

MINUTES OF MEETING – Friday 2nd June 2017

NAME	REPRESENTATION	ATTENDANCE	APOLOGIES
Sylvia Bambridge (SB) Chair	Patient – Hardwicke House	X	
Dianne Middlemiss(DM) Vice Chair	Patient – Hardwicke House	X	
Phil Worsley (PW) Secretary	Patient – Hardwicke House		X
Tanya Millar(TM) Minutes	Patient – Hardwicke House	X	
David Cripps (DC)	Practice Manager	X	
Dr Susmitha Pavuluri (SP)	GP		X
Dr James Gilmour (JG)	GP		X
Margaret Carpenter (MC)	Patient – Bures	X	
Nicki Garrard (NG)	Patient – Great Cornard		V
Valerie Burrows (VB)	Patient – Hardwicke House	X	
Barbara Hamblett (BH)	Patient – Hardwicke		X
William Snelling (WS)	Patient Bures	X	
Sylvia Norton (SN)	Patient – Hardwicke House	X	
Pam White	Chair - Great Cornard PC		X

V – Virtual Member, unable to attend due to time / day of meeting but kept informed of group activities

1.0 Welcomes Introductions and Apologies

Attendees and apologies as above.

Members were sorry to receive the resignation of Nicki Garrard. It is hoped that Nicki may return to the group at some time in the future. Letter to be sent asking Nicki if she would like to nominate someone else to represent the views of people with neurological disorders. **Action:SB**

Guest speaker – Gail Cardy, West Suffolk Clinical Commissioning Group, Dementia Friendly

Association. There has been training in as many surgeries as possible across West Suffolk. Dementia Together – run by Sue Ryder with level 1 and 2 assessors sees patients and carers. Referral information pathway can be found on WSCCG website but patients are advised to see their GP for a dementia screen and referral. Dr Roz Tandy is working on a care plan for GPS. Hardwicke House assessed by Gail as being excellent.

2.0 Minutes of last meeting and Action Log

Minutes from last meeting

Everyone happy with the minutes from last meeting and all actions completed – well done all !!.

3.0 Updates

3.1 Hardwicke House Group Practice

Dr Ruddock is returning this month from maternity leave.

DC said there is bound to be change from the forthcoming election – such as current reconfiguration from Sustainable Transformation Plan/ACO, meaning the Clinical Commissioning Group might eventually go. To watch, wait and find out any more regarding CCG.

Action: Members to raise at the Patient Revolution.

The workforce here is okay at the moment but links with training GPs are declining as our GPs get older and the distance from their own training becomes greater.

We are under pressure with a population/housing rise, meaning more patients. We are being encouraged to work to scale – i.e merging with or working closely with – the cut off is 30,000 patients, another surgery. There is £750,000 available in Suffolk to help “solve the GP recruitment

crisis”, but this is based on a model that requires the existing workforce to work longer hours to demonstrate to prospective GPs that working in primary care is a good choice and looks more like yet another attempt to achieve 7-day working and meeting election promises.

3.2 Cancer Nurses – it has been said that over the next 4 years surgeries will have their own cancer nurse. DC had heard about this proposal but instead of being supplied with a specific cancer specialist nurse, it would involve training a nurse already in situ as it is not being resourced. This would take nurses out of already stretched clinics. This is not the model the practice helped to pilot.

3.3 Map of Medicine – Hardwicke House Group Practice doesn’t use MoM as it is slow and takes too long. It doesn’t always merge patient data, but referral forms will be formatted to use in EMIS (the practice’s clinical computer system).

3.4 GPs attending meetings – It was suggested that perhaps the days of the meetings could be changed some months so that other GPs could attend. NOTE: Mondays & Tuesdays not good days.

3.5 Methotrexate (80 patients within practice) - WSCCG are aware, this is still ongoing but there are 5 pieces of evidence have been submitted to Linda Lord.

Action: This will be brought up at the Patient Revolution meeting on 12 July.

3.6 Phone system – DC said he is changing the phone systems so there is a queuing system and menu options to help manage demand at high volume periods, e.g. by moving calls around surgeries. DC asked the PPG to be involved in the design of these systems.

3.7 Website – to be updated

Action: SB/PW/DC

3.8 Patient Revolution - 2017 date 12th July, details available.

Action: Tickets to be booked for five members to attend. SB.

4.0 Progress Update PPG aims and actions.

4.1 Meeting Date / Time - It was suggested that maybe having an evening meeting might attract younger members and also contacting other groups (such as National Childbirth Trust for young parent’s views).

Action: VB and SN offered to contact other groups.

4.2 2017 Patient Satisfaction Survey: It was decided to use last year’s survey to take place 4th to 8th September.

Action: It was suggested that the patient survey could be given out in early September via the website, noticeboards and in prescription bags to gain good response. PW/DC

4.3 NAPP - TM provided details of the NAPP conference on 24th June . PW to set up stand-alone PPG organisational email address to allow PPG members to access NAPP members only sections of website.

Actions: PW to set up HH PPG email address. TM has booked her place at the Conference.

4.4 PPG Notice Boards – New topics include information on ICE (in case of emergency,) WSH Parking and support of the Open Bag Campaign (prescription medicine.)

Action: The Dementia Champion at WSH will be asked what to put on the notice board from the hospitals point of view.

Action: TM & DM Update PPG notice boards.

4.5 PPG Newsletter

Action: All submit ideas and articles for newsletter to PW.

4.6 Web Site / Members Profile – PW requested those who had not done so already to complete a PPG members profile pro-forma.

Action: PW to update membership profiles – DC waiting for profiles

5.0 Agenda for next meeting

- Check practice website updated.
- PPG awareness week
- Patient Satisfaction Survey.
- Meeting Days/Times. GP attendance.

6.0 AOB

No issues raised.

8.0 Future Meetings 4th August, 6th October, 1st December