

**Minutes of the Hereward Group Practice Patient Participation Group
held on Monday 20th January 2014 - Draft**

Present

Mr Robert Casbault, Mr M Wright, Mrs M Wright, Mr R Rose, Mr T Arnold, Mr T Reecher, Mrs J Reecher, Mrs K Dolby, Mrs J Payne, Mr B Sadler, Mrs S Michael, Dr Tom Ashley Norman

Visitors – Cllr Sue Woolley, Mr Martin De Jonghe

Apologies

Mr B Goldsworthy, Mrs J Scott, Ms Galloway Ms Ford, Ms Ellen Hicks, Ms A Martin

Minutes of the Last Meeting

The minutes of the last meeting were accepted as a true record.

Visiting Speaker(s)

Cllr Sue Woolley – Bourne Abbey (Portfolio Holder NHS Liaison & Community Engagement, Chair HWB)

Cllr Woolley provided the members with a detailed overview of the role of the Health and Well Being Board (HWB) including the Lincolnshire regional CCG's, Healthwatch Lincolnshire, the GP practices and Lay member feedback. The GP practices in Bourne are represented on the South Lincolnshire CCG (SLCCG) on which Sue sits as a member with Dr Wheatley. The HWB priorities post April 2014 call for an integrated Social Care and Clinical Commissioning joint plan to which budgets and resources will be focused. That patient focused plan will be implemented over the next 5 years. The HWB joint strategic needs assessment (JSNA) would be refreshed on an annual basis together with the counties CCG's and the Social Care Requirements. SLCCG's plan working with the 17 local GP practices will be free to commission the most appropriate clinical services at the local level. There is unlikely to be more NHS money available as a whole but that budgetary sum can be directed to new pathways as appropriate keeping today's and tomorrow's requirements in mind.

Sue made the point that the effect of new organisational structures needs patient feedback from the local level. Patients complaining about the GP practice should still contact the Practice manager or PALs as they do today. However they could also make their views known to their own PPG representatives or Healthwatch. These organisations (PPG's / Healthwatch) will have direct access to the patient representatives on SLCCG and work with that representative to identify common issues.

During the Q&A it was clear that the GP practices organisational plans was still work in progress. So finding answers for resolving immediate patient appointments issues would still rest at the practise level. So for Hereward Group Practice we keep the best of what we have already but expect to see year on year service improvements going forward.

Martin De Jonghe - Galletly PPG

Martin stated that the Galletly PPG had been in place for approximately 10 years. Their PPG wants to encourage younger members to join because younger people have different issues. The Galletly PPG has the same number of members as Hereward PPG. They find they can support the Practice in a number of ways, Raffles, small donations, helping out at the flu clinic and taking vulnerable people out for the day. They have a small PPG bank account which supports that activity. Also giving full time carers an older people a day out also allows people to get away from the world of sickness to recharge their batteries. The Galletly practice offers a 2 weekly coffee morning where the PPG and the Practice manager can discuss patients concerns. Martin provided an update on the Patient support booklet which is being compiled jointly with the Hereward PPG. Both PPG's would welcome further co-operative projects going forward. (Support booklet proof attached for information only)

General Practice Issues - Sally Michael/ Dr Tom Ashley Norman

Patients Survey

The patient's survey is continuing to obtain a bigger return sample. However the trends received to date indicated the key points are:

- Obtaining appointments is still an issue especially with named Doctors
- People seem happy with the emergency appointments including triage as there are more doctors now. Doctors are also calling back.
- Car Parking is still an issue but expansion is limited by the available land.

Summary Care Records.

Summary care records have gone "live". The default condition is that patient Summary records are "opted in". Meaning patient records currently consists of current medication and allergies only are now available to approved national health commissioning services country wide if patients require medical services while away
Please advise the practice if you wish to 'opt out'.

Patient Appointment Changes

There is an appointment backlog to clear due to Doctor Illness and

retirements. The PPG agreed with Sally's request to work down the backlog by having a sit and wait policy for the time being on Monday mornings. All Doctors are available on Mondays. There would be a small number of fixed appoints for each Doctor for those patients that need to get to work. Let's see how things go!

New Staff / Changes

Dr Hussain has now left the practice (Visa Issue)
Dr Jo Wong joined the practice in November
Dr Juliet Hackney joined the practice in January
Current registrar is Dr Andrew Irving.

Prescriptions

Prescription service times have changed to 08:30 to 18:00 in line with surgery hours.

Web site

Work is in hand on the new practice web site. There will be a page for the PPG

Suggestion Box

A new practice suggestion box has been made and will shortly be available on the front desk.

Data Protection

Please read the following carefully.

In response to a request Sally confirmed that the practice held patients medical data securely. The practice did not sell patient information to third parties.

Under the new system the Health and Social Care Information Center (HSCIC) is empowered to hold confidential care information securely for NHS England. Such Care Data (Care data care guide attached) will be used for 2 distinct purposes from Spring 2014:

- Summary Care Records
- A Care data programme to be used for purposes other than direct care (i.e research). The Care Data programme will capture a patient's full life medical history. There are 2 uses for the care data: -
 1. Care Data extracts for improving the CCG service through its own internal General Practice Extraction Service
 2. Providing Care data sets to Universities or to third parties.

The Hereward practice has a legal requirement to provide such patient data to HSCIC.

Patients are considered "opted in" to both Care Data sub programmes unless they specifically "opted out". Opting out of one programme does not automatically "opt out" the patient from the other.

Information about you and the care you receive is shared, in a secure system, by health care staff to support your treatment and care. NHS England would like to link information from all the different places where you receive care, such as your GP, hospital and community services, to help them provide a full picture of your medical needs and the care you are receiving. To do this data will soon be extracted from your medical records by the Health & Social Care Information Centre.

This is the first use of the new powers under the Health & Social Care Act 2012 from providers into the HSCIC. The intention is to make increased use of clinical information with the aim of improving health care by ensuring that data is made available to NHS Commissioners so that they can design integrated services and to third parties for research purposes.

Patient Opt out forms are available on the front desk of the practice if patients do not want this service. (Copy of the "OPT out" form and Care Data Frequently asked questions attached)

Doctors and the HSCIC can still be obliged under exceptional circumstances to provide data extracts in the public interest.

The NHS will be writing to patients during January 2014 explaining the changes.

Feedback on Meetings attended

To be updated at the next meeting. (Time constraints).

Any Other Business

1. Certain local pharmacies are losing paper prescriptions. In certain instances those lost prescriptions are later found resulting in further confusion and time waste. Sally advised that the practice is will be moving to an electronic system in the near future. The problem seems to rest in the inefficiency of certain pharmacies. The general feeling of the group was that patients vote with their feet (where possible) and uses local pharmacies that offer a good service.
2. The notice board will be updated shortly by Ben and Barry.

The next meeting of the PPG would be 24th March 2014 at 6.15pm.