**PRG Meeting Notes – Monday 2nd December 2019**

**Present**

Rianne Norton Minutes

Kate Lamb Assistant Practice Manager (Temp Chairperson)

Shaun Hodson Patient Representative

Eleanor Horobin Patient Representative

Janet Neville Patient Representative

Paul Stephens Patient Representative

Ian Womersley Patient Representative

**Apologies**

Angela Marwood Practice Manager

**Introductions -** Introductions were made and new members were welcomed to the group. Apologies were noted from Angela who is off work at present and the PRG members wished her a speedy recovery.

Kate advised that there has been a lot of work to pick up on with new changes and work, and therefore additional information may be included in these minutes to correct or add to any information that wasn’t known or mentioned at the meeting.

**Action Points from Previous Minutes** **-** Minutes from the previous meeting were discussed and agreed by all group members.

**DNA Procedure** **-** The new DNA procedure has been approved by the GP Partners and has now been implemented. We want to encourage patients to cancel their appointments if they are unable to attend. Appointments can be cancelled via phone, text or online.

**Revised Opening Hours** **-** The surgery was considering closing Greenview Medical Centre and Kinsley Medical Centre for 1 x afternoon per week to help facilitate staff training/mentoring. There would have been no loss to clinical appointments. Unfortunately this process had been made very difficult by the CCG, and therefore we will not be taking this initiative forward at this time.

**Comments and Compliments** - Comments and compliments will be discussed at the next meeting.

***Post meeting note*** *– please see up to date list of Comments and Compliments to date.*

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| *May 19* | *Hems* | *Dr Ahmed received a large basket of fruit and thank you card from a grateful patient* |  |
| *May 19* | *Hems* | *Patient called to say how brilliant Helen is, she has helped her a lot since the passing of her mother.* | *She says Helen is fantastic and has helped her a lot through such a difficult time and that she has a lot of trust for her.* |
| *July 19* | *Kinsley* | *A receptionist (not sure who has dealt with this lady) to say a huge thank you. They have said when they come to Kinsley the receptionist who dealt with them was very helpful and advised them to go to urgent treatment centre as we had no free appointments left to book.* | *They took the advice given went to UTC and were sorted with whatever treatment she needed. They wanted to pass their regards on and say a huge thanks to whoever it was who dealt with the. They think it’s a great service that when we don’t have apps to offer we can navigate them elsewhere.* |
| *June 19* | *Endo* | *Thank you for the reminder for my endoscopy investigation. I was aware it was due and my GP has arranged it at a clinic nearer to home.* | *I would like to thank the pleasant doctors and staff at the Grange for helping me through past procedures making an unpleasant investigation bearable.* |
| *July 19* | *Verbal* | *Dr Ahmed is lovely; he is a really lovely doctor.* |  |
| *Aug 19* | *Hems* | *The staff are all really caring and do their best to help. I think that time /appointment constraints are confusing for patients because if you have more than one problem you can only talk about one thing.* | *This is not a helpful holistic approach.* |
| *July 19* | *Endo* | *Very sympathetic & caring staff. Well run, efficient service.* | *Better entrance and approach for disabled people* |
| *July 19* | *Endo* | *All staff involved, very supportive* |  |
| *Sept 19* | *Hems* | *Every time I call for an apt I can’t get one. I feel like the receptionists are not interested. Also when I have asked for documents that the doctor has requested they have never been ready to collect.* | *Needs more communication and staff need to care about their job or find another that they like* |
| *Nov 19* | *Hems* | *Dr Sundaram was excellent with my wife xx. Thank you for her help.* | *She is brilliant and very kind and helpful* |

**Winter Workshops** **-** Posters advertising Winter Workshop sessions to be held in Wakefield were distributed to the group. Copies are on display in each of our reception areas.

**Primary Care Home** **-** The surgery is working closely together in a ‘Primary Care Home’ (PCH) with four other local surgeries and also as a Primary Care Network (PCN) with other PCH’s in Wakefield. We are working together with the aim of improving local services/care for all of our patients; the funding is streamed to us through the CCG (Clinical Commissioning Group).

The initiatives proposed by the Primary Care Network are:

* Mental Health
* Childhood obesity
* Pharmacists

Part of this work will involve having a Link Worker available to liaise between all of the practices for our PCH – she has attended the last PCN meeting and further information will become available soon.

Kate explained that we have previously had pharmacists working at the surgery but as they were funded by the CCG they were, predominantly, working to CCG ‘Key performance indicators’.

If we have pharmacists employed by the PCH then we can have more control in the type of pharmacist (patient facing or non-patient facing for example) and the work that they carry out in supporting our patients.

This will be discussed by our partner GP’s tomorrow and there is a further PCH meeting on 10th December 2019 where our views will be heard.

**Loss of Services/Funding** **-** It was agreed by all members of the group that the local area has been adversely affected by the removal of funding and secondary care services from The Grange Medical Centre. It was explained by a member of the group that the local area is in the top 1% of impoverished communities in the UK.

Kate explained that we have been offering secondary care services, not only to our patients, but to all patients in the Wakefield district, for over 20 years. We offered consultant-delivered and not just consultant-led services, meaning patients are seen by a consultant - and almost always by the same consultant - for the whole of their care pathway with us.

The whole group were very keen to support the practice in raising awareness of the loss of services amongst the local community and looking at ways to make contact with the CCG to highlight the effect that these funding cuts have had to local patients.

Kate explained that the CCG do have Patient Reference Group meetings and also Committee and Probity meetings which patients can attend. Patients should contact the CCG for more information.

It was explained that information being passed to us from patients is that waiting lists for patients at Mid-Yorkshire hospitals are well in excess of the agreed and documented timescales, and patient care is suffering.

There was concern amongst the group that further funding cuts would be made, leading to the withdrawal of further services. This community deserves to receive a high standard of care. It was agreed that there may still be many patients who are unaware of the loss of services in the local area, and how this may affect the care that they receive.

Kate explained that members of the group can write to the CCG and/or Mid-Yorkshire Hospitals Trust (MYHT) under a FOI (Freedom of Information) request, to ask for information on the length of waiting times for different specialities. When we offered our Gynaecology and urology consultant-run services at the practice, patients were seen well within 6-weeks of referral for routine appointments.

It was noted that after great investment, we also an on-site operating theatre which could be further utilised for services – we currently use it for non-urgent ophthalmology procedures and we have Marie Stopes using it to carry out vasectomy procedures. We have had discussions with MYHT about using the theatre, but unfortunately these conversations have not been productive.

**Gastroscopy /Endoscopy service** **-** Kate explained that the practice is working alongside Leeds Teaching Hospital Trust (LTHT) in delivering the gastroenterology service and also the direct access endoscopy service to their patients to assist with their waiting lists. We are able to do this as we have the capacity, we have a national accreditation and our own waiting lists are short. Again, this is primarily a consultant-delivered and not just a consultant-led service.

We are also assisting LTHT with their 2-week-wait-referrals and recently cancer was identified in two of these patients. Now that the patients have received a quick diagnosis they are able to commence their treatment. It was noted that even within the routine referrals, cancers are incidentally found.

We have also recently starting accepting referrals for 16-18 year old patients from LTHT. This was after in-depth discussions both clinically and clerically to ensure patient safety and clinical governance and is helping to reduce the waiting lists at the hospital.

Kate further explained that the practice has had conversations with Mid-Yorkshire Hospital Trust (MYHT) about helping to reduce their waiting lists, but despite our best efforts, unfortunately no progress has been made and patients are still waiting for longer periods of time before they are able to undergo their appointment or procedure.

**Action Point – To look for information regarding CCG Public Meetings**

***Post-meeting Note*** *- Information regarding public meetings can be found via the following link:*

[*https://www.wakefieldccg.nhs.uk/home/patient-in-wakefield/get-involved/meetings/*](https://www.wakefieldccg.nhs.uk/home/patient-in-wakefield/get-involved/meetings/)

*The information is also detailed below:*

*Public Governing Body – Dates of meetings for 2020*

* *14th January 2020 – 1pm (Boardroom)*
* *10th March 2020 – 1pm (Boardroom)*

*Probity Committee meetings – Dates of meetings for 2020*

*Venue: White Rose House, Wakefield*

* *28 January – 10am to 12pm (Boardroom)*
* *24 March – 1am to 12pm (Boardroom)*

*Members of the group agreed that they would try to attend a probity and/or Public Governing Body Meeting prior to the next PRG meeting.*

**Practice Update**

Ultrasound/Non-Urgent Ophthalmology Service Provision - The contract for the ultrasound service expires in March 2020 and will be changed to one provider for the whole of the Wakefield CCG area. However Kate explained that we have been in discussions with other providers and are very hopeful that we may still be involved in providing this service to the local community as a sub-contractor to the successful bidder.

This is the same for the non-urgent ophthalmology contract which is also due to expire in March 2020. It is likely to be a single provider that secures the service but we are hoping that we will still be able to be involved in providing this service to our patients.

GP Connect - We are working with NHS 111 – this service provides out of hours patient care. We will be providing a small number of appointments each day (likely to be morning appointments) which the NHS 111 triage service can use to book our patients into if they need to be seen by a GP and are appropriate to wait until the next working day.

Staffing Update - We have recently said goodbye to Dr Bellas and Dr Oye. We do have Dr Meenadchisundaram who came to a previous PRG meeting and seems well settled in the practice.

We have struggled for many years to attract GPs to the practice – this is a UK-wide problem – and so we have had to think about new ways of working.

We have built our nursing team with clinicians who can prescribe and have Jayne Robson (nursing manager and Advanced Nurse Practitioner) and also a Minor Illness Nurse (Richard Phillips). Richard is being supported by the GP’s here to complete his Advanced Nurse Practitioner (ANP) training ***Post meeting note*** *– we have also recently managed to recruit a further full-time ANP in Steve Agar.*

We also have Joanne Taberner, an ex-district nurse who triages the home visits and takes on the majority of the home visits. She has reduced her working hours and is now working two days per week. The partner GP’s decided to employ a further two full-time ‘Home Visit Triage & Support Nurses’ (both ex-district nurses) to manage the bulk of the triage/home visits. It is also intended for them to do regular ‘ward-round’ type visits to our many care homes to manage the care more proactively.

One of the new members of staff has started with us today, and the other is currently working out her notice; we are hoping that she will be with us by the end of January 2020.

We are very much hoping that this will relieve a lot of the pressure of home visits for our GPs and ANP’s, who can then concentrate on the many other work areas within the practice.

CQC (Care Quality Commission) - We are due our annual CQC regulatory review. This is carried out through a telephone conference call with the inspector rather than a visit to the surgery.

There are 19 set questions to which we need to provide written evidential answers prior to the conference call which will be submitted to the inspector around the 09.12.19, and the call will take place on 13.12.19. The purpose of this call is to ensure that we are maintaining our high standards.

This telephone inspection will not change our overall rating of ‘Good’ as this is not the aim of the reviews. We will then be due our full inspection around this time next year, as it will have been 5 years since our previous inspection.

**Date of next meeting -** Monday 10th February 2019 - 10am to 11.30am - The Grange Medical Centre, Hemsworth. Please meet in reception.