

# Prices Mill Surgery Patient Participation Group

## Minutes of PPG Meeting 3<sup>rd</sup> December 2012

In attendance: Liz Green  
Jo Hofman  
Kate Kay (Chair)  
Duncan Mann (Practice Manager)  
Marilyn Miles  
Ros Mulhall, GP  
Paul Young

Apologies: John Miles  
Winfred Page  
Betty Young

### 1. Welcome

Kate welcomed everybody to the meeting.

### 2. Minutes of Last Meeting & Matters Arising

The minutes of the last meeting were not available.

All note

### 3. New GPs

Duncan noted that the two new GPs, Dr Andrew Sampson and Dr Michelle Cooper, were now well integrated into the practice.

A brief biography of both GPs has been posted onto the practice website, and the practice also arranged for an article in Nailsworth News to introduce both to the local community. An extract of the website posting is given below:

***Dr Andrew Sampson** is originally from Northamptonshire, studied medicine at Nottingham University, and completed his training as a GP in Penzance, Cornwall. Since then he has worked as a locum in a number of practices, starting in Cornwall and moving to Gloucestershire in 2010. He has interests in musculoskeletal medicine, education and pre-hospital care. He now lives in Nailsworth.*

*Dr Sampson's wife is a physiotherapist, and they have a son born in April 2011. His hobbies include cooking (and eating!), and he enjoys spending time in the great outdoors, mountain-biking, surfing and power-kiting. He does note however, that since their son was born, he has pursued more sedate hobbies such as rambling and gardening!*

*Dr Michelle Cooper was born and brought up in Africa, returning to England for her schooling. She is a Bristol University graduate who went on to do most of her hospital training in Cheltenham and Gloucester, and in 2001 completed her GP training in St. George's Surgery in Cheltenham. She has spent the last ten years working as an associate GP in a large South Gloucestershire practice. During that time, she has developed a keen interest in women's health and dermatology, completing the Diploma in Practical Dermatology in 2009.*

*Dr Cooper has lived in Gloucestershire for the last six years, and visits to Nailsworth have previously been for special occasions, eating out, shopping and whiling away a pleasant day - so when asked why she wanted to work in Nailsworth, her reply was "who wouldn't want to work here!" She is married to Bill, who is not medical, and who keeps her medical side grounded and her golf handicap from climbing too high! She has two 'fabulous' young children who keep her busy and who have taught her what the books can't teach about parenthood and child health.*

*The practice are very much looking forward to welcoming them both to the team, and we know that the residents of Nailsworth will do their bit to make them welcome too!*

#### **4. Patient Survey Actions Review**

##### **i) Website awareness**

All correspondence sent from the practice now includes a large and reference to the practice website address ([www.pricesmill.co.uk](http://www.pricesmill.co.uk)).

##### **ii) Improvements to web access**

The practice is receiving many more requests to register patients for web access – to book/cancel appointments and order Repeat prescriptions. It is anticipated that with the new clinical software system in place, the practice will be well placed to expand the range of facilities on offer, including the facility to electronically transmit prescriptions to the pharmacy of the patient's choice, thus speeding up the preparation of medicines and minimising the potential for communication errors.

##### **iii) SMS text messages**

Since the practice's major upgrade to its computer systems in October 2012, patients now have the facility of receiving an SMS text message to confirm appointment bookings and cancellations, and also to remind them of imminent appointments.

##### **iv) Waiting room delays**

The reception staff have been briefed to ensure that patients are advised when a clinician is running behind schedule.

The touch screen check in system has also had its software updated along similar lines to advise those patients who opt to use this for check in purposes about any delays.

The reception staff have also been briefed to scan the waiting room at frequent intervals to detect patients who have been waiting longer than normal.

v) Triage system review

The practice is working with an outside agency called the Primary Care Foundation to review the structure of appointments offered to patients. An initial audit will be followed up in January, and the practice will feed the results back to the PPG in due course.

vi) Patient feedback & kiosk

The practice has investigated the prospect of installing a system in the entrance lobby to allow patients to feed back their comments to the practice about the services offered. The software required for this has been in development over the summer and autumn months, and is understood to be ready soon.

### 5. Care Quality Commission (CQC) Registration

The practice has now completed the background work required to complete its registration with the CQC. This has taken a considerable amount of work over the last few months.

The CQC currently have responsibility for regulating hospitals, care homes and dentists, and with effect from 1<sup>st</sup> April 2013, will similarly have responsibility for regulating GP practices. Details of the work of the CQ can be found at:

<http://www.cqc.org.uk/public>

The practice will need to declare itself compliant in 16 key areas, before the 1<sup>st</sup> April 2013, or provide an action plan where this is not possible. The standards applied to general practice are exactly the same as for hospitals. Many of the requirements contained within these standards are new to general practice, so it is anticipated that much work will need to be done to understand the implications of these and how they are applied.

The practice is fortunate in having excellent, purpose built facilities, so it is not expected that there will be any issues arising in this area.

However, there are many recommendations in respect of standards expected in terms of communication and procedures, and these will need to be implemented where not current practice.

### 6. Feedback on NHP

Kate stressed the two way nature of this process.

### 7. Care for vulnerable patients

Kate referred to patients who may be elderly, and may be living alone, and what can be done to improve their care. The role of carers was also discussed in this context, as was the prospect of Personal Budgets in the NHS.

It was thought that it may be helpful to have Aileen Bendall along to a future meeting, to get her input - as Village Agent for the area, she will have has some experience of assisting vulnerable patients.

### 8. End of life pathways/living wills

Kate asked how the PPG could assist the practice in respect of the acceptance and implementation of living wills. It was thought that it might be helpful to have reference to this on the practice website, and perhaps also in the practice booklet.

It was perceived that with housing benefit reductions, there was the potential for an increase in depression and symptoms of stress. Ros referred to the availability of various forms of counselling to assist with these problems, such as Cognitive Behavioural Therapy (CBT) through the IAPT initiative (Increasing Access to Psychological Therapies).

It was thought that it would be helpful to have an informed discussion about the way that Personal Budgets for NHS care will work – perhaps an agenda items for a future meeting?

### 9. Community Services Consultation outcome

Subsequent to the success of the local community's campaign to resist the imposition of a CIC to take over the work of the Community Services Trust, there is a process currently under way to tender for this. It is understood that whatever entity takes over will be formalised as an NHS Trust, as opposed to the previously proposed model.

### 10. AOB

#### i) Let's Talk Health

Marilyn referred to the "Let's Talk Health" consultation on Social & Health services. This can be done online. Further details and resources are available at:

<http://www.gloucestershire.gov.uk/healthandwellbeing>

#### ii) Lloyds Pharmacy

There was a discussion about the perceived lack of efficiency of the local pharmacy. Duncan noted that this item will be brought back to the next meeting for wider discussion.

#### ii) Date & Time of Next Meeting

The date and time of the next three meetings will be:

All note

Monday Jan 28<sup>th</sup>

Thursday 7<sup>th</sup> March

Thursday 25<sup>th</sup> April

Duncan will update the practice website accordingly.

DDM