

DRS SHAMSEE, WARD, WILDING & ASSOCIATES

**Slaithwaite Health Centre
New Street, Slaithwaite, HD7 5AB
Tel: 01484 846674 Fax: 01484 841602**

Minutes of Patient Participation Group Meeting 12th February 2015

Attendees: Dr James Ward (GP Partner), Kelda Childs (Operational Manager), Robert Bamforth, Irene Chaloner, Brian Turner, Kevin Souter, Andrea Gregory, Ann Middleton.

Welcome: The group warmly welcomed two new members to the PPG meeting – Alison Crawford and Barry Jefferies.

Minutes of Previous Meeting: The minutes of the last meeting on 14th July 2014 were made available for review.

Matters Arising:

- Water dispenser – As requested, a water dispenser has now been installed in the waiting room.
- Family and friends test – The surgery has now implemented this and patients are being asked to complete a short survey after visiting the GP.

Winter Pressures Surgeries: These are now running on a Saturday afternoon for patients who need to be seen urgently. The appointments are controlled by the NHS 111 service and are not bookable by the surgery itself. Patients phoning NHS 111, when the surgery is closed, may be offered an appointment at a location that is geographically suited to them. There are several HUB surgeries offering this service in the Huddersfield area, of which Slaithwaite Health Centre is one. So far, the number of patients referred via this service has not been huge and it is difficult to assess just how much pressure has been taken off the Accident & Emergency and Out of Hours systems.

Federations: To counter rising pressure on GP practices, groups of GPs are now working together in federations. The aim is to provide high quality services together. We are currently working with our federation on Care Closer to Home, to commission a service for some of the community care provisions, such as District Nursing. It was asked how these federations had been decided and Dr Ward explained that they had formed largely through groups of people who have been able to work with each other in the past; people who are ideologically similar and want similar outcomes.

The Greater Huddersfield CCG is the commissioner of the services and the federations are working to provide the services on the ground. The federations have the necessary knowledge, resources and trained staff to implement the services.

Function of the PPG: For the benefit of the new members, the function of the PPG was explained. As a practice we wish to be able to converse with our patients and to convey what is going on in the surgery, in the CCG and in the health service as a whole. We wish to explain how we commission services and what provisions and changes we can influence. We also want to listen to our patients and welcome their views on how we can make Slaithwaite Health Centre a better place to visit.

Care Plans: Care plans now have to be produced for the top 2% of patients who are deemed to be at high risk of hospital admissions. There was general disillusion with the scheme from a PPG member. Dr Ward explained that the rate at which the scheme had to be implemented had made things very difficult and agreed that it had not worked as well as expected. He believes there is merit in the scheme, but producing 150 care plans, in such a short space of time, has not been feasible. The idea of the care plan scheme is to reduce the number of hospital admissions and to support a proactive approach to staying well at home for longer. The implementation of the scheme wasn't planned adequately. The volume of plans that were requested and the rate at which they were requested was not helpful. There have been a few patients for whom care plans have been beneficial, but not many. The scheme is likely to continue in the future, but probably under a different guise.

Methods of Communicating with Patients: It was suggested that there may be unexplored methods of communicating and interacting with patients that the surgery could utilise, such as telemedicine or email. If patients just require a quick, straightforward answer to a question, could they not just email the GP, rather than asking for a telephone ring-back? This is something which demands further investigation due to the security/confidentiality issues arising from email. There is always the huge pressure to manage capacity and demand and GPs could end up spending a lot of time just answering emails. Telephone triage is not something that has been tried at the surgery. Dr Ward's feeling was that telephone appointments would benefit those patients who work full time and find it difficult to get to the surgery. However, it should feel like an adjunctive service and not a barrier. Illnesses are difficult to diagnose over the phone, but certain conditions, such as thyroid function, would be easily manageable.

Access to Records: The General Medical Services and Personal Medical Services contracts (2014/15) include the requirement for general practices to offer and promote to patients: online appointment booking, online ordering of repeat prescriptions and, by 31 March 2015, online access to summary information as a minimum in their patient record. It is anticipated that the surgery will hold an information evening for those patients interested in accessing their records. This will demonstrate how the access works and what it will look like. Accessing records has a great deal of potential in managing certain conditions and will give patients a greater understanding of their medical conditions. It was recognised, however, that not everyone will want access to their records and it may create fear for certain people.

National GP Survey: The Huddersfield Examiner recently published the results of a national, independent survey of patients. Slaithwaite Health Centre rated very favourably and its sister practice, Oaklands Health Centre, was rated top in the whole of the Greater

Huddersfield CCG. Whilst we are extremely pleased with Slaithwaite Health Centre's rating, there is still room for improvement. What lessons can we learn from Oaklands Health Centre?

Experiences of A&E: Members of the PPG discussed their experiences of local A&E services. Overall, patients seemed to have had positive experiences, with quick turn-around times.

NHS Choices: This is a very useful on-line tool for patients to use when choosing which GP surgery to register with when moving into an area. One PPG member had utilised NHS Choices to decide upon Slaithwaite Health Centre and, thankfully, has not been disappointed!

Results Letters: The practice has now ceased sending out result letters following blood tests, etc. We will instead contact patients by telephone where possible. Letters will continue to be sent only when attempts to contact by telephone are unsuccessful.

Patient Reference Group Network: Patients are invited to join the wider CCG Patient Reference Group Network meetings. Details are available on request.