



The Swan Practice

**SWAN PRACTICE PPG**

**Minutes FOR MEETING HELD ON**

**Tuesday 20<sup>th</sup> February 2018 @ 7.30PM**

**The Centre, Verney Close, Buckingham (Old Red Cross Centre)**

1	Welcome & Introductions	GDJ	<p>Graeme welcomed everyone to the meeting. As there were some new members, everyone introduced themselves.</p> <p>Present: Kay Bradley, Debbie Ratu, Sandra Drew, Tejal Lovelock, Tracey Largent, Diana Medden, Angie Brown, Julie Anderson, Christine Strain-Clark, Tony Carroll, Jennifer Laws, Jenny Bates, Hilary Osgerby, Pam Pitchforth, Andy Mahi, Steve Long, Ben Burgess, Eileen Turner, Lynn Mazillius, Carol Penny, Pam Mears, Margaret Place, Barbara Smith, Graeme Johnston, Becky Pryse</p>
2	New Members & Apologies	GDJ	<p>Graeme welcomed Christine Strain-Clarke and Jenny Bates as new members to the PPG. Apologies were received from Els Otten, Rita Andrews, Mike Vince, Sarah North, Gail Daffurn, Diane Mason, Shelley Wagstaff, Sophie Rudolf, Katie Fricker, Ann McGahan (who will be a new member), Emma Hughes, Fi Walker, Jill Hammond</p> <p>Jonathan Greenough has resigned from the group.</p>

3	Minutes of the last meeting and matters arising	GDJ	No matters were arising from the minutes of the last meeting.
4	Tejal Lovelock - Specialist Nutritionist from Bucks Healthcare Trust - Preventing and recognizing malnutrition	TL	<p>Tejal gave a very interesting and informative talk about the recognition and prevention of malnutrition focusing on the over 75s. This project is being trialed in this area. It is in conjunction with the Patients Association, which is a charity set up in the 1960s to deal with any concerns that patients may have and it lobbies on behalf of patients re any issues or concerns. The pilot project, which is on old age nutrition, is centered on Dorset. 3,000,000 people in the UK are at risk of malnutrition and 14% of these are over 65s living at home. 80% of the cases are preventable. The aim is to:</p> <ol style="list-style-type: none"> <li>1. Raise awareness of malnutrition</li> <li>2. To know the signs</li> <li>3. To identify any weight loss</li> <li>4. To offer reassurance that it can be sorted out</li> <li>5. To provide information on nutrition</li> </ol> <p>Whilst obesity hits the headlines, malnutrition, particularly in the elderly, is actually a far greater problem. Emma Hughes is the Practice link person and will deal with any concerns of this nature. Emma is training front line care workers to recognise the signs. The project started in Buckingham two weeks ago as part of the pilot. Emma has put questionnaires on the front desks and the Patient Association has also created a video to be played in surgery waiting rooms. Emma has spoken to the whole reception team. Three ladies went along to the launch meeting and reported back. Graeme offered assistance from the PPG if required. Kay suggested that the information be spread out to other relevant organisations such as the WI. Andy thought it would be good to distribute information via the flu clinics. Tejal explained that the Reception Staff would be counting out the questionnaire and then counting them back in. Emma will collate the questionnaires, study them and take the information back to the Patients Association. She will also take any appropriate action if required, providing a 1:1 meeting as necessary.</p>

5	<p>Practice update</p> <ul style="list-style-type: none"> <li>• Clinical team</li> <li>• Reception team</li> <li>• Admin team</li> <li>• IT team</li> <li>• Dispensary team</li> </ul>	RP and team Reps	<p><b>Clinical team:</b> Dr Nic Stewart has become the latest Partner. He was a trainee at the practice.  The Same Day Service is still being tweaked and remains work in progress. The biggest tweak is that nurses now have their own lists.  Telephone triage is being extended.  Sian Lowe has finished her GP training and left to join another practice and there are two new GP trainees Rojan KC and Elliot O'Connor. Both are having 30-minute appointments at the moment.  We are still running medical student appointments with the University, which are 30 mins long. The first 20 minutes gathering information and the last 10 with the GP trainer joining the consultation. The appointments will be offered to all patients. Patients can refuse this type of appointment if they so wish.</p> <p><b>Reception team:</b> Jo Bramham has left to run her own business the practice are now recruiting for a full time Care Coordinator plus a Reception Supervisor. .</p> <p><b>Admin &amp; IT teams:</b> Nothing has changed in either team. At the moment the Admin team is busy optimising workflow. This involves scanning and then dealing with letters in the first instance and only passing on those to the GPS as necessary. Becky explained that each GP has up to 40 scanned letters a day to deal with and respond to, as well as test results etc.</p> <p>Debbie explained that the Swan Practice, along with Norden House, Whitchurch and Wing had been asked to provide Christmas out of hours cover by the CCG as requested by NHS England with only 10 days' notice. NHS England insisted that this had to happen so a system was set up with the other practices and they were able to view the GP records of all the patients wanting to be seen. It proved to be very successful according to the feedback that has been received. This is all part of the build up to the Government's plan of having surgeries open from 8 'til 8 seven days a week. Reception cover was also needed and the reception team stepped up to the challenge. This covered almost all of the Christmas and New Year period and will happen again at Easter.</p>
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6	Delivery van sponsorship	MD/EH	This was postponed until the next meeting. Debbie explained that Sandra Drew is very involved with the project and more details will follow.
7	The appointment system and how to navigate this	AB/DM	Two of the Reception team presented on the appointments system, Angie Brown who is a Supervisor at North End and Diana Medden who is a Care Navigator. Both presentations were excellent and easy to follow. Hilary stated that she felt that patients still don't fully understand how the system works and suggested that the presentations be used as a basis for a poster to be displayed in all waiting areas. One member of the PPG asked if it were true that you could only bring one problem to the consultation, as this is what she had been told by a disgruntled patient. Ben explained that this was an issue owing to the appointments being only 12 minutes in length (previously 10 minutes but they had been extended) and that there was no easy way around it but he felt that if time allowed, no one would be stopped from asking about a second problem. He stated that a 'one problem per consultation only' was not a "policy" of the practice and would be managed on a case-by-case basis depending on the situation. Diana stated that there had been a marvelous article on the Which website which explained that patients should make a list to present to the GP on arrival at an appointment and the GP could prioritise the most important item in conjunction with the patient. A further appointment could then be made to discuss the rest.

			<p>*Addendum from Dr Pryse for further reading here:  <a href="https://drjongriffiths.wordpress.com/2018/01/30/10-insider-tips-i-bet-you-dont-know-about-your-gp/">https://drjongriffiths.wordpress.com/2018/01/30/10-insider-tips-i-bet-you-dont-know-about-your-gp/</a></p>
8	Update on premises development and Lace Hill Focus Group	DR / RP	<p>Debbie gave a very detailed update on Lace Hill. The Practice wants to set up a focus group with a broader representative sample of the patients than that in the PPG so everyone suggested other groups that may be approached e.g. Mother and Toddler etc. Debbie explained that it is a fact that the practice has outgrown the available space. With the assistance of the One Public Estate people, the solution suggested is a three storey Health Hub which will house a wide variety of community care and prevent people from having to travel to High Wycombe, Milton Keynes and Aylesbury for certain treatments/consultations. The plans have been drawn up and the Practice is waiting for planning permission. The Partners believe that now is the time to start the focus group and they want members of the PPG to be founding members. One PPG member questioned whether this was too soon, as planning permission had not been granted. Debbie explained that if it were left until it had, it would be too late so the Practice felt that now was the time and in fact feel that perhaps it was already a little late. The District Valuer is to decide on the value that the CCG will need to reimburse the practice for the new centre. In addition the Practice had engaged with the CCG and NHS England and whilst there is only a small percentage of the patient population who want a town centre location, it is a significant amount and something will still operate from a location within the centre, possibly the Library or even the old Red Cross Centre. Steeple Claydon surgery will still operate as before with no plans to close it down. In order to afford to go ahead the 3 practices in the centre, North End, Verney Close and the Masonic will need to be sold. Also, because of the strict rules about dispensing rights and the wish that these are not lost due to the relocation of the practice, a survey of dispensing is being carried out. This is in part so that no patient is disadvantaged because of the relocation. Another travel survey will also be issued with the dispensing survey.</p>
9	AOB	ALL	<p>One member asked how long it took between an appointment and the Practice sending a referral letter as she had gone to a consultant's appointment three weeks after a referral and the letter had not been received. Debbie and Becky said that it was virtually instant and could not really understand how this had happened; it was certainly not the norm. The meeting closed at approximately 10 pm. The date of the next meeting is Weds 18 April.</p>

