**Caversham Group Practice**

**Minutes of Patient Group Meeting held on Tuesday 6th October 2015, 18.30 – 19:30**

**Present**

Representing Caversham Group Practice: Dr Stephen Amiel (SA), Dr Alex Warner (AW), Sheetal Shah (SS), Fay Saunders (FS)

Chairperson: Roderick Allison (RA)

For confidentiality purposes, names of patient attendees are omitted from the version of these minutes uploaded to public websites. Copies of minutes are distributed to the PPG mailing list.

RA opened the meeting by thanking those present for attending and introduced himself. No apologies received from JW hence RA will write to JW asking if she is in a position to continue otherwise look at appointing another joint chair.

Dr Alex Warner introduced himself as one of the partners and Federation lead for Caversahm Group Practice. He also does some sessions at Clinical Commissioning Group (CCG) on mental health

**Federation**

Camden practices came together to discuss working together and sharing resources and capacity with a view to improving access of appointments and delivery of different services and formed Haverstock Health (HH). Some examples of services currently practices are working with HH are Over 75s acute home visiting service and Improving Access – 8-8pm.

The aim of Camden GPs is to offer these services to patients under the umbrella of HH. Federations are offering these type of services across other boroughs nationally.

JL mentioned about 17 practices are at risk of closure in Camden, GPs have to work 8-8pm 7 days a week and wanted to know how Camden GPs are working towards dealing with these pressures as he attended a Health scrutiny Committee meeting but neither LMC nor HH was present at the meeting.

AW mentioned Camden GPs are mindful of above and careful of risks. As a result GPs came together and set up HH as NHS England’s requirement is to offer services at a population level of 50,000 patients.

As per new criteria even hospital trusts can have registered lists of patients known as Accountable Care Organisations (ACOs) so primary care and secondary care are offered under one roof

The extra services/locally commissioned services account for about 20% of the income in Camden. This leaves small practices in a threat. As a result Camden GPs along with LMC are working on ‘notion of subsidiarity’ which means patients are seen by their own GP under the umbrella of HH for continuity of care.

Queries on how South Camden Centre was selected as hub were raised as it is too far for patients to travel. AM & SS explained to patients that it was only a pilot for Saturday 9-5pm booked appointments. The aim of the pilot was to test principles and how we could do better by working together; trying to preserve existence of smaller practices and bigger practices to support them wherever possible.

General discussion around how patients found this information useful. JL had two suggestions:

* Camden wide patient meeting for wider patient engagement and also have a consultation process
* Paper to set up facts and pressures faced by general practice

SA will write to LMC proposing a meeting.

AOB

* Few patients raised concerns on current press reports about reducing referrals by giving incentives to GPs. SA & AW confirmed there is no such incentive in Camden. SA also reassured patients that practice’s 1st duty of care is for individual patients including referrals and prescribing. Patients should not feel GPs are not referring to save money.
* SS requested patients to give feedback on hospital, community and any other services they use so practice can incorporate it in their feedback to CCG
* FL requested practice to be members of National Association of Patient Participation (N.A.P.P). SS to sign up and pass details to FL
* RA asked patients if anyone would be interested in doing quarterly PPG newsletter. Patients to give this further thought and reply to RA
* A glossary of terms is to be produced during future PPG meeting.

Conclusion

RA concluded the meeting by thanking Dr Warner and Dr Amiel and noting the Group’s support for the line being taken by the Practice on Federation and summarized concerns raised by patients in the meeting

* Safeguards in place so that HH is not taken over by private organisations
* Patients are not passed from ‘pillar to post’ for different services
* Need for Camden-wide patient engagement and consultation
* Continuity of Care

Date of next meeting: Tbc