**CAVERSHAM GROUP PRACTICE**

Caversham Patient Participation Group (PPG) meeting was held on 11th April 2017 from 2-4pm

**MINUTES**

**Present**

Representing Caversham Group Practice Dr Stephen Amiel (SA), Dr Jane Myat (JM), Sheetal Shah (SS), Fay Saunders (FS)

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.

1. **Welcome & Introductions:** RA opened the meeting by thanking those present for attending
2. **The Listening Space Garden Project**: JM informed PPG about developing the garden space attached to the practice to be used for patient groups, staff use and possible community events over weekends.

Debbie Bourne & Steve from Butterflies and Bees have been working on this with JM and the Practice. JM has done a paper on this which will be circulated with minutes of the meeting.

The Kings Fund report ‘Gardens and Health’ [www.kingsfund.org.uk/publications/gardens-and-health](http://www.kingsfund.org.uk/publications/gardens-and-health) outlines the case for the importance of gardening in fostering wellbeing . Initial fundraising and work being done with gardeners from ‘Of Butterflies and Bees’ and Transition Kentish town to develop the infrastructure and put in initial planting to make space useable for garden based activities and groups.

We hope to pilot a couple of small groups one of which will be run by a patient volunteer on Thursday afternoons (and professional gardener). PPG to work in collaboration with the practice to develop the project further.

Opening event date would be Saturday 17th June 2017. This could be tied in with NHS 70th birthday celebration with theme of health and well-being, celebration of NHS and support to general practice. RA will contact JL about celebrations of NHS on 17th June.

PPG fully supports the garden project and would be willing to be involved in the project. This could also be used as an opportunitiy to recruit more members to the PPG

Any members willing to help with the Listening space project should get in touch with Sheetal Shah or Fay Saunders at the practice

1. **Times of future meetings**: There was a discussion on times of future meetings and it was agreed to alternate the meetings in afternoons and evenings. PPG would like to see some reception staff attend the next meeting. The frequency of meetings was discussed. Due to less number of attendees in this meeting and mixed views this would be discsse at the next PPG meeting.
2. **Visit to Old People’s Project**: MF fedback on Camden Connect looking after elderly people who were lonely and how practice can offer services. We have a care navigator as well as social worker based in the Practice who offer their services to elderly patients. There was mention of intergenerational network where old people can connect to new people
3. **Local Incentive Scheme – sharing of some services across practices** – Camden has 10 local incentive schemes put together call universal offer where practices have to either offer all or none. These services also have to be offered at a neighbourhood level. This is part of Camden Local Care Strategy. There are 4 neighbourhoods in Camden. In NW5 neighbourhood there is Caversham, Jame Wigg, Queens Crescent, Prince of Wales and Praliment Hill.

The services under Planned Care are Long Term Conditions like Diabetes, COPD, Hypertension Epilepsy, CKD, Frailty and Serious Mental Illness (SMI)

Caversham patients will have access to all the services at practice and patients will not have to go to other practices for any local services like diabetic review, COPD review etc

NW5 neighbourhood has joint employed a Serious Mental Illness (SMI) nurse who would be seeing patients with serious mental illness for above practice via outreach, in practice or home visits.

In line with GP Practice Five Year Forward View NW5 neighbourhood will soon be employing 1 senior pharmacist and 2 clinical pharmacists jointly. The role of pharmacists would be seeing patients for clinical medicines review, reconciling medicines following hospital discharge and work with patients and community pharmacists to ensure patients receive the medicines they need post discharge.

The PPG welcomes this but pointed out that these routine ineractions sometimes give a cle to more serious underlying problems. SA said the practice was keenly aware of this and the doctor’s ability to join up all the dots must not be lost.

1. **Future of North Camden Alliance of PPGs**: North Camden Alliance was briefly introduced to get PPGs together. With Camden Public & Patient Engagement Group (CPPEG) in Camden The NorthAlliance has been made redudant. CPPEG organises patient forums which are more effective than North Alliance.
2. **Prescription Policy – How, by whom and on what criteria are decisions made?** – MF spoke about a nexample where he was recommended a drug by hospital consultant which he was not given by his GP but at his chemist he saw another patient getting the same drug by GP. SA mentioned this based on several factors like cost, medicines management policies, formulary and also sometimes hopsitals do recommend drugs which are no lisenced so GPs are unable to prescribe. Hospitals also recommend medications which they do not stock adding more responsibilities on GP.
3. **The PPG: Where Next?** – RA has done a paper and will circulate it with minutes of these meetings. He had come ffedback from one of the other PPG members on communication with practice which PPG members would want to know more about. SS will contact the patient

The aim is for PPG to be critical friends of the Practice and more feedback on practice related services would be welcomed by the Practice. The agenda should be based on practice related issues as well as NHS privatisation

1. **Any Other Business:**
* A patient gave some feedback on behalf of Day Lewis pharmacy on Batholemoew Road where prescription requests are not being taken on phone and how patients could get the pharmacy to do this on their behalf as electronic prescribing is not working. SA explained to the patient how over thep hone medicatino requests could lead to adminstrative as well as prescribing errors. SS also mentioned about electronic prescribing was working for other practices and asked for Day Lewis pharmacy to get in touch with her to discuss this further

**Date of Next Meeting:** 4th July 2017