MINUTES OF THE LUPSET HEALTH CENTRE PATIENT PARTICIPATION GROUP HELD ON 9th OCTOBER 2019, AT 13:45

**Present:** DS (chair and secretary), MC, SI, MM, GH, JB, BS.

**Apologies:**  SR, RB, SW

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| **Item** | **Description** | **Action** |
| 1. | DS thanked everyone for attending and opened the meeting by introducing the guest speakers Robin from the Yorkshire Air Ambulance and Glenn from NHS Digital. He suggested that they both present their topics first, before moving on to the agenda items and this was agreed.  He then asked MC to say a few words about the passing of LH.  He also said that both YE and ML had resigned from the group. It was agreed that he should write to both members to thank them for their support over the years. | **DS** |
| 2.  2.1  2.1.1  2.1.2  2.1.3 | **Minutes and Matters Arising**  The PPG agreed that the previous minutes were accurate. The following were matters arising:  DS said that the survey had been sent with the newsletters but no responses had yet been received. GH said that she would be willing to come in to the surgery and hand out some of the newsletters and the survey.  SI said that she had spoken to TL about the preventable sight loss kits. TL understood that the PPG would perform this task, which was neither DS’ nor SI’s understanding.  DS stated that the NHS Digital representative would be able to talk about the NHS app and on line consultations later in the meeting. | **DS to chase up and liaise with GH.**  **DS to raise at next PPG.** |
| 3.  3.1  3.1.1  3.1.2  3.1.3  3.1.4  3.1.5 | **Update on ongoing Work Strands.**  NHS Digitisation  NHS app/ SystmOnline. GA briefed on the NHS app. He explained how to register and use the app for booking appts, requesting medication, organ donation and record viewing. The brief prompted a number of discussions around the fact that the app now allows patients to see clinics to book into, and that there must be a standardised and easy to understand naming protocol. It was briefed that there would be no national advertising of the app, but instead practice or regional advertising. GA displayed metrics for the practice which were very limited, but understandable given the lack of advertising. A number of PPG members stated that they already used the SystmOnline, which they would keep. DS suggested that this is patient choice and GA agreed that the app may appeal to a different cohort of patients.  DS concluded the brief by saying that GA and his colleagues could attend the practice to promote the use of the app and survey patients about its use. DS suggested that the PPG members may be able to assist in this project.  On line consultation. DS said that further to his last brief the practice had now decided to use the NHS procured “GP engage consult” software. He briefly outlined its use and suggested that he would have more information in the coming weeks once the software provider had visited the practice.  MJOG. DS stated that MJOG was a software application which allowed two way SMS text messages to patients. Unlike the old system patients using MJOG could reply to an appointment confirmation or reminder to cancel the appointment directly in the clinical system.  This then led to discussions about using SMS text messaging services to remind patients about their appointments even if they have not consented. DS explained that many NHS departments, including GPs now do this. The members agreed that a text message would be acceptable if it only confirmed or reminded a patient about an appointment. SI suggested an “opt out” approach and this was deemed a very good solution.  Productive General Practice. DS updated the group on the progress made so far:   * The increase of GP telephone appointments per clinic that was briefed last meeting appears to have freed up some face to face appointments. DS ran an audit over 35 consecutive working days to map the last routine GP appointment given to a patient. The graph (with auditable evidence) shows that the average time of the last appointment was 10.59. The members thought this was very good and will hopefully continue. * The new Document Management Team members have been identified but the Team have not yet started work. This should be done as a matter of priority now. * DS stated that DNAs had improved significantly but would continue to be monitored. | **DS** |
| 4.  4.1  4.2 | **New Work Strands / Patient Driven Initiatives**  Yorkshire Air Ambulance. Robin from the Yorkshire Air Ambulance gave an excellent brief on the work that the YAA does and how the PPG could support through spreading the word to others for talks and fund raising. DS suggested that this may be something that the PPG looks at again in the future.  Carers’ Open Day. DS briefed on the work he is doing within the practice to raise the profile of carers and ways to identify and register more carers for our patients and how to support these carers better. He suggested that once completed a “Carers Open Day” could be held in the practice with carers, PPG members and hopefully a member of staff from Carers Wakefield attending to raise the profile of caring for relatives and friends. This was welcomed as a good idea and several members said that they would help if possible. SI said that she knows the main Carers Wakefield contact for the Health Centre and she would be in touch to see what support they may be able to give. | **SI to contact LB from Carers Wakefield** |
| 5.  5.1 | **Patient suggestions / comments and complaints.**  GH said that the feedback from the Patient Network Group suggested that Lupset had the highest marks, but the lowest response rate. DS said that this would change now MJOG is sending requests for feedback after appointments.  DS displayed the figures for 3 weeks in September since MJOG was introduced. Of the 96 responses 80 had awarded 5 stars and 9 4 stars. Only 3 awarded 1star. All agreed to monitor trends moving forward. |  |
| 6.  6.1  6.2 | **News from the Practice / Network / CCG / DH.**  End of Life Quality Improvement. DS said that the practice had changed the way they respond to an expected death when providing end of life care. In the past a letter has been written, but now the practice sends a bespoke condolence card to the family of the deceased where the NOK is known and has been recently in touch. The card also includes a leaflet outlining the support services available and their contact details. This was viewed as a very positive improvement and there was further discussion about whether this should be opened up to all deaths. They PPG had some reservations about addressing the card to the correct family members if the NOK is not specifically known and has been recently verified, as they thought there was room for causing unnecessary distress in some cases.  Flu vaccinations. DS briefed that the over 65s flu clinics had started and were progressing well, but there was a delay to the under 65s which meant the clinics would not start until 12 October and would not be concluded until the end of November. He reassured the members that this was in line with other NHS departments and that whilst this was later than was expected, patients would still be covered for the main flu season. |  |
| 7.  7.1 | **Staff updates**  DS briefed that the final one of our 3 apprentices had just finished her 14 month course. Unfortunately there were no current positions available in the practice so she is now looking for a job elsewhere with our ongoing support. |  |
| 8. | **Charity update and proposals**  DS briefed that RB had suggested the next charity donation should be made to the Wakefield District Sight Aid. This was agreed as a very worthy local charity and that £250 should be donated. | **DS** |
| 9. | **Pharmacy updates**  No updates available. |  |
| 10. | **News from the Patient Network Group (GH).**  GH briefed the following from the recent meeting:   * The Primary Care Network is progressing well. Although GH did say that some of the members on the patient group were concerned that there was a lack of overall patient involvement, with no Primary Care Network Patient Group as there was in other Networks. * 7 “Live Well” staff are being recruited to provide the Social Prescribing staff to work in Networks. * Work has started on the Waterton Road Hub and progress is to be confirmed at a later date. * There is to be a Carers Wakefield protocol to ensure a common approach across the community. * The first Wakefield GP practice has become “Veterans Accredited”. DS commented that Lupset has started work towards accreditation and is confident this will be granted shortly. * Apex software was briefed and GH had told the meeting that Lupset was already using this and it had briefed to the PPG at the last meeting. * There was some discussion about the way appointments were run at Pinderfields Hospital. * Middlestown Medical Centre is holding a Sepsis open day on 14 Nov. | **DS to raise this at the next Network meeting.** |
| 11.  11.1 | **AOB**  SI briefed on the following initiatives from St George’s:   * Over 65s complimentary therapy day. * Carers’ digital awareness workshop – 1 – 3pm 30th Oct. * Art exhibition 31 Oct from 5 – 7pm (with wine and nibbles) * “Grumpy Girls” coffee morning to start. |  |
| 12  13.1 | **Date and Time of next Meeting**  The next meeting is scheduled to be held on Thursday 5th December 2019 at 13.45. JB has given apologies. |  |

Proposed PPG meetings for 2019, all at 1.30 for 1.45 start:

Thursday 5th December 19 (Proposed meetings for 2020 to be agreed)