

**Present:** George Hill, Elspeth Swan, Kath Johnson, Mary Stamper, Sue Gallagher, Malachi Prior, Gwen Lattimer, Paula Pape, Pam Bainbridge, Hilary Mostyn, Rod Mostyn, Sheena Norman

**Apologies** Sue Clark, Mary Little, Freda Feasby

### **West Cumbria Carers**

Bernadette Cresswell, on behalf of WCC, outlined their work and services.

- Visit GP surgeries to identify carers by linking to professional referrals, and by talking to people in waiting rooms and letting them know what's available.
- Carry out carers' assessments, and advise on benefits and Adult Social Care support. They are funded by the Allerdale Clinical Commissioning Group to do this, although their services do not cover the far north west of Allerdale ( inc Bowness, Port Carlisle), the area to be covered by Carlisle Carers. This was questioned by Sue who said people in the area may not know this, and find themselves being referred to a different organisation. She will raise this with the CCG. **ACTION Sue**
- WCC link with Alzheimer's UK
- They have a Cumbria Carers Emergency card which is useful when a carer is incapacitated and support is still needed for the person cared for. 3 days emergency cover is available for such situations. The group were unaware of this.

The group questioned the length of time between referral and action by other agencies, citing inconsistencies in the system: there were positive and negative experiences. There was discussion on how best to promote these services. Website, District Nurses, Posters, Surgery newsletter. Parish Magazines were also thought to be a possibility. **ACTION Mary**

WCC also attended the flu sessions last year. Bernadette left leaflets about the organisation. She was thanked for her presentation and remained for the rest of the meeting.

**Minutes of February meeting**      Received and Read

### **Matters Arising**

#### **Young People**

Kath reported on her visit with Sheena and Sue to the Health and Social Care 6<sup>th</sup> form group at Caldew School. We had been able to pass on information about teenage pregnancy and the services and advice available. They had raised

issues of actually being able to attend appointments alone given the transport difficulties and the problem of having permission to leave the school premises. A student had commented on how she had felt "judged" by her GP. There was confusion over whether there was actually a school nurse available and if so, on which days? It seemed that they were not always able to exert their rights. A Young People's conference is being held on July 9<sup>th</sup> and Sue hoped that some of these students and their tutor Jo Tate would be able to attend. Sue added some information about a North east initiative to empower young people with long term conditions to speak with confidence to GPs and Specialists without being accompanied by a parent, with an eye to their future independent self-management. Malachi was uncertain about School Nurse presence at his school. It was thought that students from Nelson can attend a drop in lunch time clinic at Wigton surgery, but we need more information. Sue will raise this with Dr Turnbull via the CCG group

**ACTION Sue**

### **Flu sessions**

There was some discussion about access to Kirkbride school and non-availability of toilets. Should we use Kirkbride village hall, according to the original plan? It was agreed to continue this service with three sessions again, dates to be decided at next meeting.

**Accessible parking space.** There was some discussion about whether another space could be provided, or could patients park in the parking in front of the building? The pressure on parking at the surgery, and indeed in the village on both sides of the road, remains an issue.

**Patient Participations Groups** are now a requirement of all practices since April 2015. We were pleased to have our group already established. Since October 2006! Elspeth outlined what this means. This raises patient profile, and GPs have to refer to and consult with PPGs, who are a critical friend. We discussed how we can inform people about what we do. There is a requirement that a PPG must be representative of its population and we know that recruiting working people, young people, and those with family commitments is sometimes difficult. We shall promote both these matters through the next newsletter. The group will probably meet more frequently. Sue shared some information from CCG work. There are 16 practices in Allerdale. Two of these have a named chair who is a lay member and can be contacted. The others are contacted via the Practice Managers. We are one of only a few who already publish minutes of meetings, including the names of members. Members of some groups are reluctant to have their contact details published. This may be because they feel they may be approached by people who want to complain. Members of our

group did not share this view and were happy that their details are published. We are aware of the appropriate actions to advise if anyone wants to make a complaint. Kath expressed reservations about the group's becoming like a committee. Malachi asked if there were opportunities for the PPGs to network and share ideas. The CCG are going to set up some workshop style networking sessions for all PPGs, so that there can be an exchange of ideas and best practice, and mutual support.

### **Booked Appointments and Open Access Surgery**

Whilst acknowledging that one of the strengths of Kirkbride surgery is the open surgery Monday to Friday, Elspeth shared some thoughts about pressure on the surgery particularly on Mondays, and what they might do to redress the imbalance between booked appointments and open access. There is much pressure on the Reception staff as they deal with people arriving to check in or seek appointments, telephone calls and prescription collection, among other things. From August 1<sup>st</sup> the timings will be adjusted, so that there will be booked appointments from 8.30, and the open surgery will operate from 9am to 10am. There will still be "urgent" slots. Hilary wondered about a second telephone line, but this would not be possible because there is only one receptionist on duty. They hope that patients will use the open access only when necessary, and that those with a more flexible week would try to arrange appointments at less crowded times. The question of what is "urgent" is always a matter for discussion. The staff will seek feedback through the Friends and Family question, and this will be further discussed at our next meeting.

### **Allerdale locality performance statistics**

Elsbeth had copied some of the information against which surgeries are measured and compared, including admission to A and E (below average) and good prescribing costs but we have a higher than average rate of referrals to ophthalmology.

### **NEWSLETTER**

We shall draw up items for this, to include the new information on PPGs and their function, and feedback on the changes in surgeries as outlined above.

**Next meeting: WEDNESDAY 9th September 2015 7.30pm at the Surgery**