

Meeting of Riverside and Tower House PPG

Date: Tuesday 11 th June 2019	Time: 10:30am	Venue: Tower House Surgery, Chudleigh
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PRESENT:

Pamela Tuckett (Chair), Maureen Birrell, Anne Broom, Helen Davidson, Alana Gunbie, Patricia Jewett, Jane Mather, Richard Smith, Ray Street, Dr Tristan Oxenham (GP) Amanda Coleridge (Practice Manager)

APOLOGIES:

John Northcott, Carol Ramsay, Sally Titchener, Rod Wallace

Item:	Subject:	Action:
1.	<p>Pam Tuckett welcomed core Members and our guest speakers to the meeting.</p> <p>The meeting also welcomed Dr Tristan Oxenham as the practice clinical representative for Tower House. (Dr Francesca Vasquez would be the practice clinical representative for Riverside surgery in place of Dr Paul Russell)</p>	
2.	<p>Mike Underwood and Tessa Frost shared their interest in social prescribing and connecting with the local community for the wellbeing of individuals and the community as a whole. This echoes the Frome Model of community connectors and is also recognised in the new Primary Care Network Contract which provides funding for a dedicated Social Prescriber. There is already an excellent voluntary befriending organisation known as Chudleigh Together set up through SEARCH in partnership with Volunteering in Health in Chudleigh and in Bovey we have Bovey Community Care and Riverside Befrienders.</p> <p>If anyone feels inspired to get involved in connecting the local community in Chudleigh, contact Mike Underwood on Michael@mikeandjoy.co.uk or 07760 207 808.</p> <p>For further information: Chudleigh Together Frome model of enhanced primary care Chudleigh Town Council - SEARCH Bovey Community Care</p>	
3.	Agreed and signed the notes of the meeting on 2 nd April 2019	

4.	<p>Matters arising:</p> <ul style="list-style-type: none"> • Lift at Riverside – Awaiting structural report back from the builder. Befrienders and LoF may be able to fund. • Hearing loop – Following research by Ray two portable loops will now be purchased, kindly funded by the LoF. • Makaton – Sally had obtained some literature which had been circulated but had sent her apologies to this meeting. • Young People Questionnaire – Sally had followed this up with the CCG and would be attending Chudleigh and Bovey Tracey Youth Club to try and get some feedback from this population group. • Availability of phlebotomy appointments – The practice had recently acquired a centrifuge used to separate liquids within blood samples enabling the practice to store samples overnight. The practice would soon be able to offer blood test appointments in the afternoon. We are also able to offer patients appointments at weekends if they are willing to travel to Newton Abbot. We are also in the process of a skill mix review and expect to increase the number of phlebotomy appointments available. 	<p>It was noted that patients are unable to access the week end appointments on line and it was suggested some free text be added to the online service advising patients they may contact the surgery to book a weekend appointment – AC to follow up.</p> <p>To publicise week end appointments on Facebook to increase awareness.</p>
5.	<p>Standing item: Report on key themes, issues or suggestions that have been identified by any member of the PPG to help ensure members are engaged.</p> <p>Diabetic Retinal Screening – Following a change of provider from 1st April and subsequent feedback from a patient who was offered a screening appointment at Moretonhampstead Hospital, clinics have now been re-established in the practice</p>	
6.	<p>Standing item: Review any patient feedback about the services delivered by the practice.</p> <ul style="list-style-type: none"> • Friends and Family Test – Excellent comments about the receptionists, nurses and doctors. One 	<p>Patients who feel they are unable to wait for the next</p>

	<p>comment about the length of wait for an appointment.</p> <ul style="list-style-type: none"> • Suggestion Box – A request to improve signage in the foyer at Tower House to prevent patients blocking access to the automated exit panel had been actioned. • NHS Choices – Nothing to report this month 	<p>available routine appointment should accept a same day telephone call and the doctor will agree a management plan which will include a same day face-to-face consultation if clinically appropriate.</p> <p>It is recognised that continuity of care is better for patients and doctors and it may be better to wait to see your usual doctor if your medical condition is not urgent.</p>
7.	<p>Standing item: Feedback from Patient Participation Locality Forum</p> <ul style="list-style-type: none"> • Devon wide PPG are having a forum at Newton Abbot Racecourse 12th June and Sally & Ray had booked places. • Primary Care Networks – see agenda item • Dementia Friendly Walking Group – starting in Ashburton on 16th May. Every second Thursday from 10am at Ashburton Information Centre. Contact Inga Page inge.page@googlemail.com 01364 654471 	
8.	<p>Improved Access Update:</p> <p>Service launched in October 2018 and uptake of appointments slowly increasing. Uptake of appointments in March: GP 96%, Nurses 65%, and Healthcare Assistants 55%. Bank holidays at Christmas and Easter had a low uptake. The service is currently developing the skills of the nurses to increase treatments and procedures available. Satellite sites are being trialled in Dawlish and Teignmouth from June – September. It is recognised that some patients are unwilling to travel to Newton Abbot, especially if have to rely on public transport.</p>	<p>Practice to increase awareness as many patients' still not aware evening and weekend appointments are available.</p>

9.	<p>Primary Care Networks (PCN)</p> <p>The CCG had recently approved our application to join Albany Practice and Kingskerswell & Ipplepen Medical Practice to work under a five year Contract as a PCN.</p> <p>The core characteristics of a PCN are:</p> <ul style="list-style-type: none"> • Practices working together and with other local health and care providers around natural local communities; • Provide care to a patient population of at least 30,000 and not to exceed 50,000; • Provide care in different ways to match different people's needs; • Focus on prevention and personalised care; • Use data and technology to assess population health needs and inequalities to inform service design and decision making; • Make best use of collective resources across practice for greater resilience and more sustainable workload. <p>The PCN contract provides funding for a clinical director to provider leadership and in year 1 funding towards the employment of a pharmacist and a social prescriber. Over the following four years there would be funding for further additional roles.</p> <p>For further information: Frequently asked questions – March 2019 Frequently asked questions May 2019</p>	<p>Information to be distributed in the Patient Newsletter.</p>
10.	<p>A.O.B.</p> <p>Care Home Pilot – The practice had received funding to run a pilot to provide additional proactive support in our Care Homes from July 19 – February 20. A doctor would be visiting each Care Home once a fortnight to provide patient focused reviews.</p> <p>Returned Community Equipment – Whilst several PPG members reported a positive process for returning medical equipment to the provider, another reported their equipment had ended up in the general skip at the local recycling centre.</p>	<p>AC to make enquiries .</p> <p>Post meeting: Contract with Millbrook Healthcare to provide community equipment and should be contacted in the first instance for return of the equipment. Some equipment however it is not viable to collect, clean and put back into</p>

	<p>Bereavement Follow Up – Patient reported they had received a letter from a GP offering support following bereavement and asked about our practice policy. Our doctors make direct contact with a family member, either in person or by telephone.</p> <p>Practice List size – Many patients ask how the practice manages the local development and increase in patient numbers. Since 2011 our list size has grown by 4.8%. Over this same period we have increased the number of doctors’ clinical sessions by 10%. Our increase in demand on our services is the result of our current population living longer with more chronic and complex health needs rather than the increase in local housing alone.</p> <p>Maintenance works in the practice – Suggestion that practice makes patients aware when maintenance work etc being carried out at the practice as recent experience of patient attending during decorating in progress and fumes exacerbated their asthma.</p>	<p>service. The Community Nursing Team suggest this equipment might be offered to a local care home, the Red Cross or other charitable organisation.</p> <p>Millbrookhealthcare – Return of equipment</p> <p>Agreed a notice would be placed on website, Facebook and Newsletter as far as possible.</p>
12.	<p>Dates of next meeting: Thursday 19th September 2019 at 10.30am at Riverside Surgery Bovey Tracey.</p>	

Signed:..... Chair

Date: