

<p style="text-align: center;">Minutes and Action Points of Patients' Group Committee Meeting Thursday 23rd January 2014 at 19:00</p> <p>Attendees: Ian Bradford, Peter Boulton (Chair), Jerry Bullock (Secretary), Teresa Kaur, Karen Pearce (Practice Manager), Dr Saund, Sheila Shaw, Ian Simpson and Anila Sisodia.</p> <p>Apologies for absence: Martin Dudley and John Onsworth</p>	Action
<p>Minutes</p> <p>AGREED that the minutes of the meeting of the Committee held on 20th November 2013 be approved as a correct record.</p>	
<p>Patient Survey 2013 - Action Plan - Monitoring</p> <p>The Action Plan had been submitted to the Group's AGM in April and the intention was that the Committee would review progress with implementation at its regular meetings. A copy of the updated Action Plan was submitted.</p> <p>All actions had been completed although some adjustments were still being made to the automatic entrance doors at Hathern surgery.</p>	
<p>Walking for Health</p> <p>The health walks programme arranged with Charnwood Borough Council had started on 20th November. Walks were held each Wednesday morning (10.30) starting from Gorse Covert Community Centre. The number of participants had been growing steadily and averaged about a dozen each week from approaching 20 different participants. The Committee continued to be represented each week.</p> <p>To try to build on the initiative, discussions had been held with the Council's representatives on how matters might be carried forward. It had been confirmed that the Council's representatives were very happy with how the walks were going and the support received from the Patients' Group and had confirmed that, if numbers stayed the same, the Council would continue to deliver the walks until some of those attending could be trained as Walk Leaders. It had also confirmed that support would still be provided where</p>	

<p>necessary after that stage had been reached.</p> <p>Places on a Walk Leader course have been offered to the Committee and several of the regular attenders on the Wednesday morning walks had indicated an interest in attending.</p> <p>The walking group was looking to increase numbers and had the ambition to start regular walks from the Hathern surgery. However, the ways in which potential candidates for the walk programme might be "referred" to it from the surgeries were issues which might require further examination.</p> <p>AGREED</p> <ol style="list-style-type: none"> 1. that an electronic copy of the walking group photograph be supplied to Karen for use on the surgery screens; 2. that revised notices, which are not time-limited, be supplied to Karen for display in the surgeries; 3. that publicity for the Walking for Health initiative be incorporated into the arrangements for the AGM (see item 9.) 4. that alternative dates for Walk Leaders' courses be obtained from Charnwood Borough Council (CBC) for members of the Committee who wish to participate but are unable to attend in February 2014; 5. that discussions be undertaken with Jo Grant of CBC about opportunities for a seated exercise course along the lines of one run at the Shree Ram Krishna Centre, in view of the potential benefits for patients for whom the Health Walks programme may not be suitable. 	<p>JB/JO/KP</p> <p>JB/KP</p> <p>JB</p> <p>JB</p> <p>JB</p>
<p>Patients' Groups' Network meeting - 20th January 2014</p> <p>A meeting of the Patients' Groups' Network had been held on Monday, 20th January which had been attended by Peter and Jerry and Peter gave a brief report back, including on three questions which had been tabled on the Committee's behalf, namely:</p> <ol style="list-style-type: none"> 1. At the next PPG Network meeting, can the training needs of PPG members and the ways in which the CCG might be able to assist in meeting those needs be a topic for discussion? 	

2. As there will probably be only one more PPG Network meeting before Patient Participation Awareness Week in early June - and that meeting possibly not much before the "Awareness Week" - what can be done to make preparations sufficiently early to ensure that the CCG's input this year can be as effective as possible in supporting the activities of individual PPGs and in helping to ensure that the public are aware of the existence of PPGs across most parts of the CCG's area?

3. In view of the fact that when the Chair of our Group, within the last few months, asked the CCG for contact details for some neighbouring PPGs and was told that he would have to ask the individual Practices as it would contravene Data Protection legislation for the CCG to share that information, what can be done to produce and maintain a contact list for all PPGs in West Leicestershire in which we can all agree to share our contact information with each other and even the outside world?

All three questions had received positive responses, with agreement to the Awareness Week and Training being incorporated into the next PPG Network meeting and with preparation of the "Contacts List" having started at the 20th January meeting, by taking the opportunity to get the necessary consents at the meeting.

Potential Changes to Primary Care Services, Hathern

Dr Saund outlined the current situation in which the matter had been escalated to the CCG and NHS England in the absence of meaningful information for the Practice or patients. The matter was complicated by the fact that both West Leicestershire and Rushcliffe CCGs were involved and by the fact that the two CCGs were in different regions of NHS England.

Although those communication channels had been opened, a meeting of the parties had yet to be arranged. The consultation period had been extended by 30 days and any closure of the facility in Hathern could take effect in July. The CCG had advised that the Practice did not have to accept the transfer of any patients until that time and patients of the other practice were being encouraged to stay with them for the time being. It had also been identified that about 180 of the patients who could be displaced would be eligible to transfer to Loughborough-based surgeries.

It was confirmed that the message to patients of the East Leake Practice was that the Practice remained responsible for their treatment and that any matters should be raised with that Practice rather than Dishley Grange.

In response to questions it was indicated that pressure on appointments and clinicians was, at times, exceeding capacity and the Practice was looking at alternative ways of doing certain things to deal with that. Further information would be brought before the Committee as there were matters to report.

AGREED that discussions be held with representatives of the East Leake Practice's PPG about the developing situation.

PB/JB

Social Car Scheme

At the 20th November meeting of the Committee, Practice representatives had asked whether members of the Committee would be willing to act as volunteer drivers for patients who had difficulties in getting to the surgeries. Although some willingness to participate was expressed, there was uncertainty over issues such as insurance and there was no information about any schemes already operating locally. Therefore, consideration of the matter was deferred for further information to be obtained.

Information, including areas covered and costs were submitted regarding local schemes including:

Loughborough Community Care Dial-a-Ride 01509 267147

Shepshed Special Community Bus/Social Car Scheme - 01509 650531

Rushcliffe Voluntary Transport Scheme - 01159 699060

Information was also submitted regarding the setting up of an independent scheme but in view of the availability of existing schemes locally and the issues that would be involved in establishing a separate scheme, it was suggested that no further action be taken on that option.

AGREED

1. that the existing schemes be accepted as providing the

<p>best opportunities for patients requiring transport to the surgeries and no further action be taken on the suggestion for the Committee to consider establishing a scheme;</p> <p>2. that Jerry and Karen liaise over the details of the existing schemes so that relevant information can be made available to surgery receptions and included on the Patients' Group notice board;</p> <p>3. that further enquiries be made regarding the options available to patients requiring transport to hospital appointments.</p>	<p>JB/KP</p> <p>JB</p>
<p>Patient Participation Awareness Week</p> <p>Patient Participation Awareness Week this year would run from 2nd to 7th June (Monday to Saturday). The 2013 Week had not been too successful in that national publicity was almost non-existent and locally the efforts of the West Leicestershire CCG had been somewhat disappointing.</p> <p>In 2013, members of the Committee took the opportunity to talk to shoppers and others in the Gorse Covert precinct and to people in Hathern in and around the surgery. It was striking that many of the people at Gorse Covert were not patients at Dishley Grange and that not many people were out and about in Hathern on a Saturday morning.</p> <p>The purpose of this item, therefore, was for the Committee to give some initial thought about whether it would participate in the Awareness Week this year and, if so, in what ways.</p> <p>Reference was made to the opportunities to work with other Patients' Groups locally to make the best use of the resources and opportunities that would be available in addition to local community centres and groups.</p> <p>AGREED</p> <p>1. that further consideration be given by the Committee to working in partnership with other Loughborough PPGs on this initiative and to the opportunities to spread the word about the Patients' Group through Gorse Covert Community Centre, community groups in Hathern and Loughborough and potentially through local fetes and markets in and around the Awareness Week (2-7 June).</p>	<p>PB/JB/All</p>

<p>2. that in the first instance, contact be made with the Storer Road Practice PPG to explore the possibilities.</p>	<p>PB</p>
<p>Patients' Group AGM - 24 April 2014</p> <p>The Group's AGM would be held on 24th April and it was appropriate to consider arrangements for that meeting as it was the patients' opportunity to have a say on anything to do with the Group. A timetable for actions leading up to the AGM and a draft agenda for the meeting were submitted.</p> <p>In particular, it was suggested that the Committee might wish to review the Constitution to see whether any amendments should be proposed to the AGM and decide whether there was a topic on which a presentation by an "outside speaker" might be appropriate.</p> <p>So far as the Constitution was concerned, there might be a case for incorporating the requirement for Committee members to sign the Code of Conduct which was agreed by the Committee in June 2013. A copy of the Constitution was submitted with suggested amendments shown in red to cater for the suggested alteration.</p> <p>At the last AGM, representatives from West Leicestershire Clinical Commissioning Group had attended and had given a very well-received presentation about the CCG, recent changes in the NHS and other issues relevant to the Patients' Group. It was suggested that the CCG again be asked to provide speakers at the AGM, possibly to cover similar ground but taking account of developments over the last 12 months or to cover a different topic, for example the Practice Appraisal process undertaken by the CCG, which had been flagged-up in the Committee's Work Programme some months ago. Based on the approach in 2013, this would include a "question-time" related to the presentation topic(s).</p> <p>It was also suggested that there could be a "Question time" on other issues to do with the Patients' Group. That could be available to all who were eligible for membership of the Patients' Group. Although there was no expectation of being over-run with questions, it was suggested that patients be given the opportunity to give notice of questions in advance, with those questions being dealt with first. Thereafter, questions asked "on the night" could be put, subject to time being available.</p>	

<p>In terms of publicity for the event, views were expressed that this could include on repeat prescriptions, in the Practice Newsletter, leaflets and posters, especially to community centres and groups, including disability and faith groups, and at the local pharmacy.</p> <p>AGREED</p> <ol style="list-style-type: none"> 1. that an informal meeting of Committee members be held to consider proposals for the AGM in more detail with a view to it being an event which will be of interest to patients as well as enabling the transaction of AGM business; 2. that, in relation to 1. above, Committee members consider topics and speakers which reflect the types of issue that patients are likely to raise, for example: <ul style="list-style-type: none"> • If I can't get an appointment, what can I do? • What's happening at my Practice? • How can we improve the patient experience at the doctors and in hospital? • What is the "Choose Better" campaign about? 3. that discussions be held with CCG representatives about the potential for their involvement in the event in relation to the selected topic(s); 4. that the suggested change to the Constitution, to incorporate reference to the Code of Conduct, be supported; 5. that consideration of any procedures in relation to the Code of Conduct be considered by the Committee at a future date to be programmed. 	<p>JB</p> <p>All</p> <p>JB/PB</p> <p>JB</p> <p>JB</p>
<p>West Leicestershire CCG - Board Meeting - 10 December 2013 - Chair's Report</p> <p>Peter referred to the report on this meeting which he had attended and which was circulated with the agenda and spoke about the usefulness of all Committee members attending one of the board meetings at some stage to observe proceedings.</p> <p>AGREED that the dates of future CCG Board meetings be circulated to Committee members so that they can consider whether they wish to attend as observers.</p>	<p>JB/All</p>

<p>Big Healthcare Conversation - 3 December 2013</p> <p>This event had been attended by Jerry and it had been hoped that information arising from it would have been available for the meeting. However, it was still unavailable.</p> <p>AGREED that consideration of the matter be deferred until further information has been received from West Leicestershire CCG.</p>	<p>JB</p>
<p>NHS Information Sharing - "Better information means better care"</p> <p>A report was submitted regarding an NHS initiative on this topic for the Committee's information.</p>	
<p>News from the Practice</p> <p>The annual Practice Appraisal conducted by the CCG was to be held on 24th January 2014 and Peter would attend on behalf of the Patients' Group.</p> <p>Dr Wolstenholme had decided to reduce her hours and would not be taking appointments beyond the end of February although she would continue to be involved with the Practice in terms of minor surgery. The Practice was currently considering the options for covering that shortfall as well as in terms of new housing development and to potential transfers from other practices.</p> <p>The Practice was seeking to recruit a Nurse Practitioner to help with the workload, generally as demand for services at times was challenging. That also meant it was necessary to review reception cover. With further changes anticipated through the year, the Practice was currently looking at the position over the next 3 to 6 months rather than beyond. With changes to GP contracts with effect from 1 April 2014, it was expected to be more difficult to sustain the traditional GP relationship and there would be a need to look at other ways of delivering some services.</p> <p>The results from the Patient survey were being analysed and a draft report and action plan would be submitted to the next meeting of the Committee. The Practice appreciated the support given by Committee members in attending the surgery to encourage patients to complete the survey forms and in inputting data from the completed forms.</p>	

<p>Reference was made to the need in future years to ensure that, in assisting patients to complete the forms, confidentiality could be maintained.</p>	
<p>GP Contract Changes</p> <p>National Association for Patient Participation e-Bulletin 11/13 drew attention to changes to GP contracts (the General Medical Services (GMS) Contract) from April 2014 including:</p> <ul style="list-style-type: none"> • Named GP for over 75s; • GPs to get more responsibility for out of hours (oversight not provision); • Reduced emergency admissions to replace quality and productivity indicator in QOF (Quality and Outcomes Framework); • £290m of QOF pay to be diverted to core GP contract; • Out of area registrations for all practices from October 2014; • Friends and family test mandatory; • Practices must offer access to patient records and other online services from April 2014; • Patient participation changes; • GP seniority pay scheme to be phased out. <p>Further details are in a summary of the proposals on the Primary Care Commissioning website, a copy of which was submitted.</p> <p>The view was expressed that some of the matters not only had implications for the Practice but would also be of concern to the Committee. Therefore, the opportunity to review progress through the coming year should be taken and provision for that should be made in the Work Programme.</p> <p>AGREED that the report be noted and the Work Programme be amended accordingly.</p>	<p>JB</p>
<p>Patients' Group Notice Boards in Surgeries</p> <p>As had been discussed at previous meetings, notice boards had been made available by the Practice for use by the Patients' Group. Members of the Committee were asked to consider putting themselves forward for the role of "monitor" - one for each surgery.</p> <p>The main role was to check the board at regular intervals to see that it was neat and tidy, that any out of date material</p>	

<p>was removed and to alert the Chair, Secretary or Practice Manager if new material was required for display.</p> <p>AGREED</p> <ol style="list-style-type: none"> 1. that Terri's offer to keep an eye on the notice board at the Maxwell Drive surgery be gratefully accepted and Jerry contact Gary to see whether he would be willing to do likewise; 2. that a volunteer to look after the notice board at Hathern be sought. 3. that the Practice be asked to review the current arrangements for publicity for and making of early morning and Saturday appointments. 	<p>TK/JB</p> <p>JB</p> <p>KP</p>
<p>Work Programme</p> <p>The updated work programme was submitted and reviewed.</p> <p>AGREED that the Work Programme be noted and updated to accord with other decisions at this meeting, subject to the items intended for consideration in March being reviewed in an attempt to ensure that the agenda for that meeting is not too heavy.</p>	<p>JB/PB/KP</p>