

PPG Minutes – 10th October 2019

Charnwood Community Medical Group – Dr Hanlon and Partners Patient Participation Group (PPG)

1) Chairman's welcome

Roger welcomed everyone to the meeting, especially Ian Potter, Director of Primary Care at WLCCG, our guest speaker. Roger expressed our delight at being able to welcome Ian, to talk to us about his very elastic job!

2) Visiting Speaker – Ian Potter

Ian had been requested to talk about:

1. CCG priorities for primary care,
2. The relationship between CCG and PPGs. How and what do you feel the benefits are and
3. To comment on recent Capital project plans since the announcement of funds from HM Government

a. CCG Priorities for Primary Care

- i. Better use of limited resources by greater collaboration between CCGs, East Leicestershire, West Leicestershire and Leicester City.
- ii. Hierarchy of management is developing, System level (CCG), Place level, e.g. Leicester City and Neighbourhoods. The organization is a big job but is happening and will be worth it.
 1. The three CCGs now have a single accountable Officer, Andy Williams
 2. The changes in Governance are an attempt to streamline services into an integrated care system, including community service and the voluntary sector.
 3. The NHS long term (10 yr.) plan has been published and focuses on long term projects, for example, greater preventative care rather than reactive
 4. The 'Investment Evolution' is investing in Primary Care workforce issues and getting GPs at the heart of planning.

iii. Q&As

1. Q - Recruitment of GPs. How do you overcome the reluctance to become a partner?
A – Grab medical students, develop a portfolio of experience and encourage them to become GPs.
Make the position of Partner attractive. The pay won't do it but working conditions will.
2. Q - It's important to recognize that the three CCG are very different. One big CCG might be too big and lose sight of the patient.

A- Point well made. We want to ensure that the Locality can influence the flavour of Primary care.

(Then followed an explanation of Primary Care Networks (see minutes April 11th 2019, Practice News)

3. Q - Will Social care services be linked in?
A – Yes
4. Q - With staffing of PCN's, will they, for example ambulance services, GPs etc. be in competition for the same people? For example, it is expensive to train a Paramedic. If they go off to work for someone else, that is a cost to the organization that trained them.
A - Inevitable. What we have to show is that we are better at looking after our staff and that they can enjoy a good career path.

PCNs are important,

1. New services
2. More coordinated
3. Wider range of services e.g. a physio based locally
4. Greater use of digital.

b. PPG/CCG and the relationship

- i. Ian's view is that PPGs are vital and the good, supportive relationship needs to be sustained and to grow.
- ii. PPGs need to have a voice in the PCNs.
- iii. Q&As
 1. Q – What is the Citizens panel?
A – the idea is to have a group of about 1000 people who can answer questions and provide information, a quick consultation, in addition to the work of PPGs and Network meetings
 2. Q – Some PPGs don't get support from their practices, how can we/you help?
A – Some Practices are incredibly challenged and go into survival mode. They don't have capacity to work with a PPG on top of ensuring that they deliver the Care needs of patients.
 3. Q – Is there a named person who can look after PPGs?
A – Julie Warren, but is a small part of her role.
 4. Q – Is the Citizens panel a way of taking over from the PPGs?
A – No, it is totally different. People have been asked if they are interested in joining. Look out for emails from the CCG
 5. Comment – South Charnwood don't have a locality group. At our (North Charnwood) Locality meeting last week, it was agreed that we should invite South Charnwood to join us.

c. Capital Projects

- i. The Government has announced that £450 million will come to Leicestershire and a lot of work had already been done in the background to formulate plans just in case the area won the jackpot.

- ii. Plans for re-organization of Leicester's three hospitals were announced at the PPG Network meeting earlier in the year,
 - 1. Maternity hospital
 - 2. A separate Children's hospital and
 - 3. A new treatment centre
 - iii. Exciting!!! and new facilities should mean that staff are attracted to the area.
 - iv. Hinckley hospital is to see long needed changes.
 - v. Housing growth in the Leicestershire means that more Primary Care facilities may be needed. Provision is being audited to make sure that new communities are supported.
- d. Many thanks to Ian for giving us his precious time. His comments have given us very interesting insights into Primary Care from the WL CCG view.

3) **Those present.**

Roger Harris (Vice Chairman) Carole Jefferson (secretary), Alison Atkins, Management team, David Meredith, Godfrey Moustache, Helen Davison, Ian Farnfield, John Kershaw, John Todd, Peter Lewis, Ursula Mullin, Paul Hanlon (Charnwood Community Medical Group Business Manager) Mick Gregory (Chair) Ian Potter, Director of Primary Care at WL CCG

4) **Apologies received**

Bhasker Khatri, Chris Sutcliffe, Elizabeth Sharpe, Helen Davison, Shirley Siriwardena

5) **Approval Of Minutes and matters arising**

- a. The minutes were confirmed.
- b. Matters arising – Dave Rowson, our visiting speaker in September had offered to go away and find answers to a couple of questions:
 - i. Item 2 – Q&As
 - 1. The Network meeting agendas will be structured to allow for more networking time.
 - 2. The named person who looks after PPGs is Julie Warren.
julie.warren8@nhs.net

6) **And 8 (No one pointed out to the secretary that project groups appeared twice on the agenda. This is good, because we have a spare 10 minutes!)**

Project Groups 2019/20 – Update

a. Dementia Friendly Practice

- i. Alison and Paul have arranged to meet.
- ii. The process is prescribed by NHS
- iii. The group wants to enhance the process
- iv. The group will meet to agree the PPG role
- v. All four met at the Pinfold Gate surgery yesterday where Dr Samantha Hamer spoke to the meeting. She gave a very interesting presentation.
- vi. At the meeting, useful contact was made with potential guest speakers, people who are very keen to support PPGs. On Saturday October 12th at

Quorn Medical Centre will be a whole day event. This has been set up by Equalities Charnwood.

b. Patient Satisfaction Survey

- i. The Group has met (Roger, Peter, John K and Carole)
 - 1. Established the aims of the project
 - 2. Distribution of survey sheets
 - a. Twitter
 - b. On prescriptions
 - c. Virtual group
 - d. Could leave at Pharmacies but they don't see only our patients
 - e. Leave in reception areas and ask colleagues to promote the survey to patients
 - f. Do it in January.
- ii. Another meeting planned for 22nd October
 - 1. To look at questions
 - 2. Please send any more ideas for questions to Carole or Roger.
 - 3. Paul and Roger will look at the use of Survey Monkey.
 - 4. Draft questionnaire to the PPG group in November
 - 5. Carole will send the locality question to Roger.

c. Bereavement Support Group

- i. Mick and Anne offered to join John T and Ursula. Mick offered to lead the group

7)

Practice News

- a. Little has changed since our last meeting.
- b. Clinical Rotas... Two new GPs, Dr Mitum Chauhan and Dr Natalie Kruzenyk, are close to taking up their full roles.
 - i. They are currently salaried and may be offered partnership when they have settled in.
 - ii. Currently advertising for another GP, and using a locum whom we know well.
 - iii. Appointments are very tight just now as we are one GP down on complement. The CCG is considering closing the list to new patients.
- c. Flu Clinics
 - i. Supplies of the 18 – 64 vaccine have been delayed in manufacture. 350 appointments arranged for Saturday 12th have had to be rearranged but has opened up that time for the 65+ jabs.
 - ii. Pharmacies are pushing hard for us to have our jabs with them and that has resulted in less take up at practices.
- d. Phones – Question – If the phone is ringing and can't be answered, is there a backup?
 - i. The Practice is discussing whether or not it would be possible for the call to be picked up in another surgery. This would mean a Practice wide phone service and cut out the need for various dialling options. The outgoing message will be shorter.

- e. **Security** – Question. Is there a procedure for managing unpleasant/violent patients? The receptionist are the front line and therefore very vulnerable. We have enormous respect for the way that they carry out their work
 - i. There is an Emergency Clinical Incident Protocol, which is employed in such circumstances.

8) **Covered with Item 6**

9) **Meetings attended**

- a. John K attended the WLCCG AGM
- b. He said it was good and better than last year's.
- c. There are major concerns about the budget

10) **Date of next meeting – November 14th 2019.** The next WLCCG Network meeting has been rearranged for 20th November 2019.

11) **No AOB had been declared, therefore...**

The meeting closed at 18.28. Many thanks to everyone for your contributions this evening and thanks to Roger for chairing.

Minutes agreed and signed as correct..... (Chair) Date.....

