

## SWAN PRACTICE PPG

Minutes of the meeting held on  
Wednesday 21<sup>st</sup> November 7.00pm

The Centre, Verney Close, Buckingham (Old Red Cross Centre)

1	<p>Welcome &amp; Introductions</p> <ul style="list-style-type: none"><li>• GJ welcomed everyone to the meeting</li></ul> <p>Present</p> <ul style="list-style-type: none"><li>• Julia Jeacock, Morva Bonthorne, Debbie Ratu, Marge Smith, Joe Smith, Sophie Rudolf, Margaret Place, Shelley Wagstaff, Gail Daffurn, Sandra Drew, Steve Long, Ivo Haest, Els Otten, Diane Mason, Emma Hughes, Angie Brown, Jennifer Laws, Katie Fricker, Graeme Johnston, Alison Banks, Christine Strain-Clark, Brian Wagstaff, Sarah North, Tony Carroll.</li></ul>
2	<p>New Members &amp; Apologies</p> <ul style="list-style-type: none"><li>• Ivo Haest was welcomed as a new member, Ivo has a professional back ground in health and has an interest in social prescribing and population health. The group introduced themselves to Ivo.</li><li>• Apologies were received from Pam Pitchforth, Elvira Smith, Margaret Dean, Lynn Mazillus, Julie Anderson and Barbara Smith</li><li>• Graeme intimated that Barbara Smith had volunteered to take over as Secretary to the group. In Barbara's unavoidable absence, Debbie Ratu took these minutes.</li></ul>
3	<p>Minutes of the previous meeting</p> <ul style="list-style-type: none"><li>• Research overview – DR ran through the current studies in progress and also introduced Sleepio – a new online CBT option for any person with sleeping difficulties. Information and sign up is via <a href="http://www.sleepio.com/nhs">www.sleepio.com/nhs</a></li><li>• GJ asked for more clarification on Satinder Bhandal the new consultant pharmacist, EH explained Satinder will be seeing patients with very complex medication i.e. those on more than 10 different medications, to make best use of her skills. These are being booked in by one of the dispensary admin ladies.</li><li>• AB mentioned that Beth Kruse is working 3 days a week and not 2 as stated in the minutes.</li></ul>

4	<p>Practice Updates</p> <ul style="list-style-type: none"> <li>• Clinical <ul style="list-style-type: none"> <li>○ There is a new phlebotomist in post - Caroline</li> <li>○ 2 more paramedics working as Minor Illness Practitioners (MIPS) and carrying out home visits – Helen and Max - they will be asked to next meeting</li> <li>○ Expanded team in Same Day Service (SDS)</li> <li>○ MP asked about the home visiting service and how this worked. BW explained that the MIPS went to all on the day acute requests unless a GP felt that they should go. GPs do all continuity of care, complex and end of life visits. MIPS are all supervised by the GPs on duty in the SDS</li> <li>○ SL asked about sharing the learning – BW said there were some groups in place to do this now and they had offered to share and be part of this nationally</li> <li>○ AB added that the paramedics were all developed Minor Illness Practitioners now and the patients were booked via care navigation – and this team working supports the development of all clinicians, working to their strengths</li> <li>○ SW added that there were lots of planned training sessions for all clinicians and often the paramedics within the SDS were dealing with extreme emergencies which has complemented the skill mix.</li> </ul> </li> <li>• Reception <ul style="list-style-type: none"> <li>○ 2 more supervisors now in place to support a growing team, recruitment ongoing for one more member</li> </ul> </li> <li>• Admin, IT &amp; Dispensary <ul style="list-style-type: none"> <li>○ No staff changes which is great and allows for period of consolidation</li> </ul> </li> <li>• General observations <ul style="list-style-type: none"> <li>○ Patient Access change seems to have settled down now</li> <li>○ Dispensing and repeat requests also settling down regarding the CCG initiative to restrict repeat ordering by the chemists to save waste. It was felt that some of the chemists communicated the change better than others</li> <li>○ TC asked about EPS2 and EH said it will hopefully be in place by the end of the year</li> </ul> </li> </ul>
5	<p>Flu Campaign</p> <ul style="list-style-type: none"> <li>• SW gave out some stats on take up and the results are good, there is until the end of March 19 to have all flu jabs administered</li> <li>• SW encouraged all to remind their friends and family to get their jab from the practice</li> <li>• GJ asked about how the practice is informed about jabs received elsewhere and SW said that the other providers informed the practice via letter and this was then coded onto notes</li> <li>• SW added that The Swan workforce are also vaccinated and we have the best rates of take up in the CCG.</li> </ul>

6	<p>CCG Operational Plan</p> <ul style="list-style-type: none"> <li>• GJ shared the plan with the group to gain some feedback</li> <li>• Comments were: <ul style="list-style-type: none"> <li>○ People thought it outlined what was happening now</li> <li>○ Could it be better with some targets for the future</li> <li>○ There was very little financial information and detail around the recovery plan</li> <li>○ There was no mention of 3<sup>rd</sup> sector, charities and volunteers</li> <li>○ It was a little too vague</li> </ul> </li> <li>• SN asked about how the practice was going to deal with population growth. DR gave an overview of the current premises issues and future plan which is still in progress. There is a separate focus group for this chaired by Steve Long if people are interested in joining.</li> </ul>
7	<p>Same Day Service Update</p> <ul style="list-style-type: none"> <li>• We are now live with direct booking via NHS 111 over the telephone and via Ask NHS via the app. This means patients can be directly booked by these providers should they be triaged as to needing to see a GP.</li> <li>• The practice is planning for the winter months and ensuring there is maximum clinical capacity where it will be needed</li> <li>• The next stage will be to work more on the continuity of care and capacity in the Any Day Service.</li> <li>• As with any changes there are a lot of factors to align and one change can impact somewhere else in the service and so there needs to be a lot of planning, but we are aware that availability of booking appointments which are not urgent but also can't wait for 3 weeks needs some focus.</li> <li>• MB and AB clarified the purpose of triage and that this can be right for lots of conditions and can also plan for tests to be done prior to an appointment, and if in doubt or needing advice to call and ask for this via the care navigators, or indeed to use Ask NHS.</li> </ul>
8	<p>Any Other Business</p> <ul style="list-style-type: none"> <li>• TC mentioned that hospital letters via Whistle are taking up to 16 days to be delivered which can mean changes to times and dates are not noted – GJ said he would feed this back and DR will raise at locality commissioning meeting. (Done)</li> <li>• MP added that she had received very complicated text messages and ways of confirming an appointment – as above GJ and DR will report this in (Done)</li> <li>• MB gave an overview of the recent training visit carried out to check and satisfy that the GP trainers are doing a good job. By summer we will have 4 GP trainees and the visiting team gave us a lot of really good feedback and it was all very positive.</li> <li>• DR mentioned the State of the Nation: an annual afternoon where the whole practice team get together with some patient volunteers. Due to venue restrictions we can only invite 6 people to help us, as we are now over 100 members of staff. All interest people to please get in touch with Morva via email <a href="mailto:morva.bonthorne@nhs.net">morva.bonthorne@nhs.net</a></li> <li>• DR gave out some information to ask the group to think about voluntary services and in particular befriending. IH said as he is a befriender he would be happy to talk about this next time and we would also invite Keith Hofgartner the manager of the befriending team to the next meeting</li> <li>• AB followed up the desire from the group regarding practical ways to help the practice, and asked if a core group of people would like to help design some patient led communication on access and how to guides. GJ asked if anyone was interested in this then to contact him.</li> </ul>

9	<p data-bbox="293 165 560 197">Date of next meeting</p> <p data-bbox="293 199 1246 235">The next meeting will be 22<sup>nd</sup> January 2019 @7pm in The Centre Verney Close.</p> <p data-bbox="293 271 596 302">Following this dates are:</p> <p data-bbox="293 338 448 369">20<sup>th</sup> Mar 19</p> <p data-bbox="293 371 448 403">14<sup>th</sup> May 19</p>
---	---