

**UPTON SURGERY
PATIENT PARTICIPATION GROUP
Monday 16th January 2017
MINUTES**

Present: **Patient Representative Members:** Chair: Chris Milne (ChM), Janet Bastick (JB), Jenny McGowran (JM), Rebecca Maund (RM), Jo Daniell (JD), Dawn Patterson (DP), David Smallwood (DS), Lizzy Hughes (LH) and Liam Gleeson (LG), Ruth Wain (RW),
Surgery representatives: Dr J P Barrell (JPB), Dr C Evans (CE), Ben Kent and Lysa Ball (LB) note taker

1	Apologies: Jo Cousins	
	<p>Resignation: ChM confirmed that due to other commitments it is with regret that Jo Cousins wishes to resign from the PPG group. Jo has enjoyed her time with the group and has learnt a lot and thanked everyone for the experience.</p> <p>Managerial Changes: Ben Kent confirmed that he would be attending the PPG meetings on behalf of Philippa White. Ben is taking on some of the in house managerial tasks to support Philippa White, including meeting leadership. Introductions took place around the table.</p> <p>Dr David Jennings: ChM on behalf of the group gave their condolences regarding the sad loss of Dr David Jennings. A memorial service will be held on Saturday 4th February 2017, 2pm at Upton Church.</p>	
2	Minutes of previous meeting 17th October 2016: These have been agreed and will be published on the website	LB
3	<p>Matters Arising:</p> <p>British Geriatrics Society – BGS Principles and Standards publication emailed to the PPG which showed a picture of Jo Dodd our Nurse Lead for Older People/Complex Care which was taken during their visit to the surgery in August 2016.</p> <p>Kempsey Pharmacy – BK reported no further update, this item has now been taken off the agenda.</p> <p>Mental Health Student Support – Information regarding two new services Kooth and Chat Health were emailed to the group prior to the meeting (please see Appendix 1) LH and LG were given a hard copy at the meeting to take back to the Head of Hanley Castle High School. LH confirmed that they were aware of Chat Health. CE confirmed that a presentation was taking place to the surgery tomorrow by the Kooth service and we would forward any presentations/information from this that we felt would be relevant for the school.</p> <p>Terms of Reference – Please see item 9 of the Agenda.</p> <p>Children’s Services – CE gave the group an update. This is still an evolving picture. Upton First School has kept the Riverboats centre and they will develop services targeted at the local community including increasing early education as well as continued health provision. CE confirmed that the health visitor clinics were still running from the centre and we had been approached by the school for our input which we will be happy to do. RM confirmed she has been appointed on to the Governing Body for the Riverboats centre. Funding for this was discussed and as yet RM was not sure and would update the group at the next meeting. JM informed RM that there was an article in the Malvern Gazette (13.1.17) which may be of interest to the school regarding funding sources.</p> <p>WiFi: BK gave a brief update and confirmed it was hoped that this would be available by March 2017. Agreed to publish in the Patient Newsletter</p>	<p>ChM/LB</p> <p>LH/LG</p> <p>CE/LB</p> <p>RM</p> <p>BK/LB</p>

	<p>once available.</p> <p>Self-Care Forum: Please see item 4 of the Agenda</p> <p>Poster/Information feedback: Please see Appendix 2</p> <p>CQC Report: PPG confirmed how much they appreciated what the surgery does and felt we should have been awarded “outstanding” for everything. RW stated that feedback was important and that there was no inclination in the actual report on how we could have achieved an “outstanding”. BK felt that it had been a shame that we had only two inspectors on the day rather than three as this made the visit rather rushed. It was agreed that for the future, there should be focus on specific projects to enhance each area for our next visit. BK thanked those who attended on the day and for everyone’s support.</p>	
4	<p>Self-Care Update and Action Plan: A joint venture was undertaken with Upton Surgery, Abbottswood Medical Centre and Pershore Medical Practice on 18th November 2016. The aim was to plan a year of initiatives to reach our shared 30,000 patient population. A draft calendar has been produced and will be discussed at a meeting in March with the PPG champions who attended the event in November. LB confirmed that PW had also entered this into The 2016 Self Care Week Award. We will let everyone know how we get on. JM and DS asked for information that they could distribute to the local Parish Council and WI. It was agreed that copies of the Stay Well Leaflet would be made available to them.</p>	LB
5	<p>STP Programme: The full 83 page document is available at www.yourconversationhw.nhs.uk. A brief summary and relevant priorities was printed for each member of the group. BK told the group that he felt that this was only “draft 1”. ChM encouraged everyone to visit the website and complete the questionnaire. RW felt that the surgery was already providing pro-active care and self-care. The group felt these were two areas to focus on. It was confirmed that the surgery would consider working with other partnerships in the future. A discussion took place regarding elective services and it was felt that some of our patients would prefer to go to Cheltenham/Gloucester rather than travel all the way to Redditch.</p>	ALL
6	<p>Future of Acute Hospital Services in Worcestershire: The formal consultation started on Friday, January 6th 2017 and all the consultation material is available online at www.worcsfuturehospitals.co.uk. The consultation will run until midnight on Thursday, March 30th 2017. There will be a number of public meetings and drop in events being held during the consultation. JB is hoping to attend the event on Thursday 19th January 2007 Worcestershire Royal Hospital (main entrance foyer 10am-4pm). Details of all events can be found on the website listed above. As a result of this item JB confirmed that Upton Community Care (UCC) drivers are having to leave home at 6am for those patients who have admissions at Redditch and on occasion when they have arrived the patients appointment has been cancelled. JPB/CE/BK thanked UCC for the great job they were doing. JPB confirmed that none of our patients had been affected by the recent events at Worcestershire Royal Hospital.</p>	ALL
7	<p>Did Not Attend: A further audit was undertaken in November and the results emailed to the group prior to the meeting. This showed that 44 hours of GP time was lost due to DNA’s. ChM confirmed this was also on the agenda for the SWPPG network meetings. Agreed to make our DNA poster more simplistic. BK/LB will carry out an audit for the last 12 months for frequent DNA’s patients and report at next meeting. ChM circulated to the group prior the meeting an NHS England publication “reducing DNA’s</p>	LB BK/LB

	in general practice". DS suggested that we use their idea of using a poster to display the % of attenders rather than non-attenders.	
8	Stroke Rehabilitation Service Proposals: Worcestershire Health and Car Trust are proposing changes to this service, more information can be found at http://www.hacw.nhs.uk/our-services/stroke-rehabilitation-service-proposals/ . The deadline for completing the survey was 13.1.17. General thoughts were better outcome with specialised area.	
9	PPG Elections/Terms of Office/Resignations/Annual Election of Chair: To confirm that members will serve 3 year term with a total of 9 years. ChM/JM/JD agreed another 3 year term. Recruitment drive needed to balance group in terms of representatives. Members of the group confirmed what a pleasure it was having two young members (Lizzie and Liam) as part of the group. JM nominated ChM as Chair for another 12 months, seconded by JB/JD.	
10	Blood Results Protocol: BK updated the group on how we would like to give patient blood test results. We are currently developing a system whereby patients phone in and are given their results there and then by trained staff which will free up clinician time. JPB confirmed that more than half of the blood results given are normal. Final details still to be decided such as dedicated times/slips of paper being given at time of blood test with instructions for results. BK to update at next meeting. Post meeting comment- following feedback from the PPG meeting the process of providing results to patients has been modified. Patients may phone at any time to get 'normal' results after 7 days. If results require any follow up the GP will task reception to contact the patient to arrange follow up, earlier than 7 days, via telephone initially and if unsuccessful via letter. Urgent follow up will continue to be done by the clinician.	BK
11	SWPPG Network Meetings: The next meeting is on Tuesday 17 th January 2017 and DP will attend.	Agenda Item
12	Upton Surgery Update and Friends and Family Test report July 2016 – September 2016 – This was emailed with the Agenda, please see Appendix 3. PPG wondered if the FFT results regarding waiting times was a seasonal issue?	
13	Compliments/Complaints/Suggestions – BK confirmed three complaints were not surgery related but we dealt with them. Two referred to GP trainees both resolved and learning outcomes identified. BP appointments not being available for forward booking misunderstanding by receptionist. Dispensing 1km rule, Government rules. Medication error had a Significant Event written up and discussed at joint meeting. BK confirmed the surgery had had a variety of compliments and nothing from the suggestion box. Donations have been received by the surgery and these have been forwarded to UMST. DAW book sales have been donated to UMST.	
14	AOB: New team Leader for Dispensary: Georgina Gwynne has taken on this role and BK feels she has settled in very well with the team. New Defibrillator: There is a new defibrillator insitu at the Hill Centre. There is free defibrillator training being held at 7pm on Thursday 9 th February 2017 and places can be booked Minor Injuries: DP informed the group that a friend had cut her thumb quite badly and at 1.15pm drove to the surgery to be told nobody was available at that time to see her and to come back at 3pm. BK will take to management meeting regarding staff training on minor injuries presenting at surgery and will include this topic in our next newsletter.	BK

	Use of pharmacies: RW wanted to highlight the promotion of using pharmacies but some childcare agencies will not give Calpol unless in a prescription bottle and RW wanted to purchase an over-the-counter medication but due to age was declined this request. BK confirmed that self-care promotion would help to soften these issues.	
	Date and Time of Next Meeting – Monday 3 April 2017 at 6.30pm	

APPENDIX 1

CHAT HEALTH

Chat Health, provided by Worcestershire Health & Care NHS Trust is a text service for 11-19 year olds.

Chat Health offers a confidential service and give advice on all issues that Young People may have concerns about. This includes advice on issues regarding emotional health, healthy eating, sexual health, eating disorders, self-harm, friendship or family issues and any worries that young people may have.

It is run by the Specialist Community School Health Nurses and covers the whole of Worcestershire from 09.00 – 16.00 Monday – Friday.

Download poster:

<http://education.worcestershire.nhs.uk/EasySiteWeb/GatewayLink.aspx?allid=120508>

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KOOTH SERVICE

Kooth.com is a free, safe, confidential and non-stigmatised way for young people to receive counselling, advice and support online. A newly commissioned service by Worcestershire Health and Care NHS Trust Kooth delivers 1000's of counselling sessions each year in Local Authorities across the UK. Available until 10pm each night, 365 days per year, it provides a much needed out of hours service for advice and help. As 50% of referrals to CAMHS are deemed inappropriate to their criteria, Kooth gives GPs an alternative way of ensuring patients can access free support when they need it, in a medium young people know and use. Our therapy team are qualified counsellors and psychotherapists, clinically supervised in house and independently to deliver evidence-based interventions. They deliver CBT, solution focused and humanistic approaches such as narrative and other relational therapies. The counsellors have clear pathways into others services too, ensuring the young person gains information needed and are signposted to the most appropriate provisions.

APPENDIX 2

Poster/Information feedback

Two groups from the PPG carried out a poster/information review within the surgery. (JD/DP and DS/LH)

JD/DP summary: This was carried out late October 2016 and it was felt that a lot of posters weakened the message and that dedicated boards for specific health subject eg elderly health, Children etc were a good idea. They felt that the notice board next to the stained glass windows in the waiting room was too dark and that a lighter colour would be better. Whilst carrying out their survey they confirmed that they had asked a few patients in the waiting room for their opinions and generally they were quite happy with the posters on display. The posters that were displayed on the consulting room doors was not liked by JD/DP but on their visit in November noticed that these had been removed. There were duplication of posters and the majority of posters are the same size and colour and perhaps generally they should be larger. Important information should be displayed in larger/bolder type to highlight this more and the use of the A4 frame noticeboard was a good way of displaying important information. The positioning of the pharmacy noticeboard was good as people would notice this while they waited in the queue to be seen. JD/DP did feel that the Doctors and Staff should make the decisions regarding what is displayed.

DS/LH summary: Duplication of posters was not necessary and commented on the two identical posters in the main entrance relating to “registered assisted dog (RDA)” and “guide dogs (GD)”. JPB confirmed they were two different organisations and that the RDS helped disabled people with practical tasks and offered emotional support and independence whereas GD was specifically for blind patients. The breast feeding poster displayed on the entrance door was not necessary but members of the group disagreed with this. Some posters were covered up by other items; this will be looked at by LB. DS felt that the plaques on display in the waiting room (Caring for Carers Award 2011 and Management in Practice Awards 2008 Design and Facilities) were not relevant now and it only showed a decline in the surgery standards as they out of date. JPB disagreed with this and felt proud that the surgery displayed these, other members agreed with JPB. A poster relating to “cycling lessons” was felt not to be appropriate but since survey has been removed as the event had been held. Reading of some posters was difficult and in particular the posters on the wall behind Reception and the ones under the display screen could only be seen if you were sat in the first row of seats. DS felt it would be a good morning well spent counting the patients who actually read the posters. DS also felt that it was confusing having different opening times for the building users. On a positive note it was felt that we should celebrate the success of the surgery with our patient satisfaction scores, CQC report and Statement of purpose but all in one large display.

General Discussion

JPB - felt that the posters on the consulting room doors were useful especially the antibiotics one's but did agree that any display within the surgery should be tidy. He felt that repetition of posters (eg flu jabs) was

needed to promote and encourage patient take up of this important vaccine, with repetition patients will see wherever they are and in this case was good.

ChM – suggested that more screens should be use to advertise things to attract people whilst sitting down. Could the posters be put on to envisage, BK confirmed that the full slide rotation took approximately 1 hour but it was reasonably quick and easy to add/delete

RW – felt that people needed the posters as there were so many different services available to them and that anything that got noticed was a benefit rather than a dis-benefit. Felt that overload of information was good.

LH – agreed that it was important to celebrate our success and mentioned that we did not display “No Smoking Signs” within the building?

LG – felt that positioning of posters was important and important information should be in prominent places.

ChM – key points:

- Big/legible to have an impact
- Some duplications
- Signage not to be covered up
- Key messages on doors

Agreed that if any member of the PPG saw a poster that was out of date they could remove it and that any issues relating to posters should be reported to Lysa Ball lysa.ball@nhs.net

APPENDIX 3

PRACTICE UPDATE – JANUARY 2017

SAD PASSING AWAY

Dr David Jennings very sadly died in December 2016. A long standing GP Partner, between 1960 to his retirement from general practice in 1997. Our thoughts and condolences are sent to his family.

CQC

As part of the surgery's commitment to good clinical governance we are routinely inspected once every five years by the Care Quality Commission (CQC) whose role it is to check that the services we provide are safe and effective. We were inspected in early September and the final report was published in late November. We were pleased to be awarded a 'Good' overall rating, with an 'Outstanding' rating for care of the elderly and for well-led.

Details of the report can be found on the CQC website at:

www.cqc.org.uk/location/1-569542702

A copy of the full report can also be downloaded from our website.

Many thanks to the Patient Group members who supported us on the day.

STAFF CHANGES

Christina Simms our HCA will be going on Maternity leave in February.

Bev Thomas is our new HCA and she started with us on 1st December 2016.

Dr Thomas Wallbridge moved on to a new placement in December, he will be missed by all his colleagues.

Dr Siddarth Viswanath a registrar doctor placement GP will be joining us from 1st February 2017 and will stay for 18 months at the surgery.

A New locum physiotherapist starts w/c 9th Jan. His name is Xenofon Konstantakis and he will be working at Upton for the NHS on Thursdays 9am-5pm. Maxine Campbell-Baldwin has commenced maternity leave.

MANAGERIAL CHANGES

In this time of rapid change for general practice Ben Kent will be taking on some of the in house managerial tasks to support Philippa White, including meeting leadership. Philippa and Ben will work closely on communication and decision making with the GP Partners.

SELF CARE EVENT

To mark Self Care Week 2016 (14 – 20 November 2016), We joined with Abottswood Medical Centre and Pershore Medical Practice patient representatives and voluntary sector partners to raise awareness about the national campaign *Understanding Self Care for Life*.

The call for patient champions to support this initiative went out earlier in the year and 7 volunteers, with an interest in self-care, attended Upton Surgery

on Friday November 18th 2016 for presentations and workshops that were organised by the three Practice Managers. The aim was to plan a year of initiatives to reach their shared 30,000 patient populations. The first initiative for the *Understanding Self Care for Life* is underway and all three practices are distributing a leaflet, produced by the Practice Staff, building on the national 'Stay Well' initiative but localised for the three practice areas via the dispensing bags reaching a target of 18000 patients.

WINTER PRESSURES

A huge surge in demand for on the day urgent appointments started week commencing 7th November. Weekly totals of extras were 395, 365, followed by a lull the following week with 282 seen but then picking up to 368, 386, 431, 472. In the 3 day week after Christmas we saw 314 on the day urgent requests. For the first time we have been allocated a small amount of winter pressure funding from the NHS, we have extra clinics from Dr Mott and Dr Dawes and Pippa Knight as link nurse for the frail elderly. Part of the requirements from NHS England is patient notification and poster display even though we have more demand here to deal with than the money pays for and your clinicians continue to offer the model where we do not say we are full. Most practices have abandoned this and have set maximum numbers or have a sit and wait A and E type of approach. Next year based on this demand we will have to review allowing any routine booking for the prime 2 weeks. We wanted to wait until the week before Christmas to put the Christmas week schedules on but with no forward appointments to book to until mid January we had to put it on a week earlier so any thoughts on how we manage this situation would be welcome.

CONCERT AND FUNDRAISING FOR UMST CHARITY.

We are very grateful to Dr David Webster who has donated the profits from his latest book about the life of a country GP and also to Dr Sue Everitt who played cello in a choral evening concert at Upton Church which was much enjoyed with donations for the fund.

WARWICK UNIVERSITY MEDICAL STUDENTS

We will be welcoming Medical Students again from Warwick university from the end of January with 3 rotations during 2017. The students will attend in pairs for periods:

Tuesday 24th January – Tuesday 7th March 2017

Tuesday 3rd April – Tuesday 16th May 2017

Tuesday 20th June – Tuesday 1st August 2017

We are very grateful to those who participate and help to train the next generation of doctors. To help with their training sessions we will be welcoming back Dr Linda Arthur for a session on a Tuesday.

TRAINING AND CONFERENCE USE (1.10.16 – 31.12.16)

Access 2 Education – Chaperone Training	24 Delegates
Fairways Pension Update	20 Delegates
First Steps Diabetes x 3	15 Delegates at each
SWCCG locality meeting x 2	33 Delegates at each
Berrow Court AGM	30 Delegates
Access 2 Education - Ear Care for Practice Nurses	18 Delegates
Event Mobility	13 Delegates
Access 2 Education - Travel Helath	31 Delegates
Access 2 Education - Minor Illness	16 Delegates
Self Care Forum	20 Delegates
Access 2 Education – Contraception/LARC/STI's	20 Delegates
Access 2 Education - Introduction to Immunisation	18 Delegates
Access 2 Education - Childhood Immunisation	33 Delegates
Tissue Viability Working Group	20 Delegates
Access 2 Education - Minor Illness	12 Delegates
Pharmacy Meeting	24 Delegates

**Friends and Family Report
October/November/December 2016**

How likely are you to recommend our GP Practice to friends and family if they needed similar care or treatment?					
Extremely Likely	Likely	Neither Likely nor unlikely	Unlikely	Extremely unlikely	Don't know
Total 68	Total 6	Total 2	Total 1	Total	

<p>What are we doing well?</p> <ul style="list-style-type: none"> • Glad so much is in one place • Personable • Efficient appointment service, high standards of attention to patients needs by staff and doctors • Your caring manner and determination to diagnose and treat • Everything • Good consultations, listening well • Everything • All ok • Extremely kind and helpful doctors and other staff • Excellent service, thank you • Availability of appointments is great • Appointment are always available when required. Dr Evans is excellent • I'm always very pleased with all Upton Surgery does for me • Everything is good to me • Most efficient in every way, polite reception, sympathetic medics • Everything • Always have references to all my past history • Always very happy with everything, everything is always very good, always very helpful • Listens well, action to requests for health MOT • Very helpful, very approachable, feel very safe in doctors hands • Great service • Being friendly • Everything no complaints • Always an appointment available at short notice, caring staff and excellent doctors • Excellent doctor and great service • Great friendly, helpful practice, with easy to talk to doctors/staff • Friendly, warm, helpful • Prompt, polite, things explained very clearly • Very well, the district nurses too are exceptional • Good availability and attentive doctors, good time options • Good time keeping • Quick appointments, fine service • Polite courteous staff, excellent treatment and services – thank you • Great friendly reception staff, lovely nurses and doctors to 					
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- I really appreciate that I can always get an appointment for my children aged 4,8 and 11, excellent all round
- Fast appointments
- Accessibility, telephone advice/consultation feedback
- Very pleased with care
- I really feel that there is little room for improvement, it's great, friendly and professional
- Wonderful surgery with caring knowledge and approachable doctors and nurses
- Always friendly and helpful
- You are being very helpful and kind
- First visit – very impressed, extremely helpful
- Gentle treatment, caring and prompt
- Providing contacts and advice
- Everything
- Very good care, prompt action to any problems
- Very well done Dr Wetmore who my wife saw today very good
- Have time for you
- All ok
- Always able to get an appointment, pleasant and helpful doctors
- Doctors availability, pleasant staff and atmosphere
- Helpful
- Easy to get an appointment with doctor, all doctors have been very caring over many years
- Exceptional care of my late father and support to family
- Provide very good care to cancer patient
- Holiday vaccination consultation, cheerful, helpful, good information
- All aspects of medical care
- We have fantastic doctors and a very efficient surgery, everyone is very helpful and caring

How can we improve?

- Not enough appointments with the particular doctor you want
- All ok
- Keep up all your amazing work
- Time on appointments would help
- I cannot see
- Can't
- Waiting less time for an appointment!!!
- Faster Service at Reception
- Could you offer a health MOT yearly for over 75 years olds?
- Don't make us wait as long
- Quicker appointment when own GP
- More clarity on website bookings to the various definitions of appointment types
- Keep doing the same
- Online log on keeps changing takes some finding and interlinking not good

- Pay more attention to the patient, listen more, investigate more, pretend you care more
- Sometimes difficult to access non urgent appointments out of core work hours
- Quite a long waiting time but some is expected
- Protect ear irrigation from being privatised
- Nope
- You can't, you're amazing anyway
- Problems with my phone I may need technical help
- Waiting times
- All good always
- Keep appointments on time
- You can't!!
- Appointment waiting times
- Maybe better timekeeping
- Nothing at present, very well run surgery
- Cannot think