

MINUTES
Patient's Consultative Group Meeting
Thursday 31st July 2014
St Johns Hall Selsdon

Present

Dr Jasper, Tracy Keogh Practice Manager

Members: Choi Kim, Sue Gifford, Binman Ghosh, Noel Urwin, Kate Dawson, Martin Fidler, Linda Oram, Brian Corbett

Apologies for absence

Dr Cockell, Ann Curtis, Brian Matthews

Minutes of last meeting agreed– 24th April 2014

Purley Hospital

Purley Hospital has now been downgraded from an Urgent Care Centre to a Minor Injury Unit. The Rt Hon Sir Richard Ottaway MP and Chris Philip Parliamentary Candidate have written letters to the CCG and are in full support of the Urgent Care Centre being open again from 8am – 8pm 7 days a week and not 2pm – 8pm as a Minor Injury Unit. They are asking for patients support to fill in an online petition www.surveymonkey.com/s/purleyhospital

Summary Care Data

Summary care data is an agreement between the surgery and the hospital only, agreeing to share a summary care record means any hospital can see your allergies and medication only if you were seen as an emergency patients in a & e or anywhere in the UK.

Care Data

Your date of birth, full postcode, NHS Number and gender rather than your name will be used to link your records in a secure system, managed by the HSCIC. Once this information has been linked, a new record will be created. This new record will not contain information that identifies you. The type of information shared, and how it is shared, is controlled by law and strict confidentiality rules.

Sharing information about the care you have received helps us to understand the health needs of everyone and the quality of the treatment and care provided and reduce inequalities in the care provided. The new system will also provide information that will enable the public to hold the NHS to account and ensure that any unacceptable standards of care are identified as quickly as possible. Information will help to:

- find more effective ways of preventing, treating and managing illnesses
- make sure that any changes or improvements to services reflect the needs of the local patients

- understand who is most at risk of particular diseases and conditions, so those who can plan care can provide preventative services
- improve your understanding of the outcomes of care, giving you greater confidence in health and social care services
- identify who could be at risk of a condition or would benefit from a particular treatment
- make sure that the NHS organisations receive the correct payments for the services they provide
- improve the public's understanding of the outcomes of care, giving them confidence in health and care services
- guide decisions about how to manage NHS resources so that they can best support the treatment and management of illness for all patients

Development of PPG

PPG now has a specification from NHS England as to what is expected from the patient group. We now have to reflect practice demographics and we are missing younger group members and racial sections. We also have to come up with 3 ideas to improve practice, which there has to be an attempt to implement.

Suggestions - ELECTRONIC COMMUNICATION and DNA's

New ideas should be reasonable and potentially do-able.

The surgery is also working on preventing unnecessary admissions, we are looking at the top 2% of patients to go on registered list as being at risk of being admitted. They then have a management plan so that they can be prevented from going into hospital. Dr Jasper is sceptical. CCG has created rapid response team who can manage some home care. Not been effective yet. Perhaps would be better at A & E triage?

CCG OPEN MEETING

"Noel Urwin reported on two Open Meetings he had attended in Croydon, run by Croydon Care Commissioning Group. The first covered the CCG's forward plans for the next two years, and considered the priorities they were promoting. The second, involving Croydon Social Services also, focussed on services for the elderly and invited suggestions where social and health services might meet future pressures to meet rising demand for this population in a more integrated way.

These meetings are run in a very participative way, and plenty of ideas emerge. The CCG and Social Services will address these, and although both Agencies are facing 'no-growth' financial situations it is surprising the scope that exists for constructive new models of care. It may well mean, of course, that some existing services have also to be reviewed to see how quality of services can be maintained within a reduced budget.

We do touch on these complex matters in our PPG meetings. I find it helpful to attend these borough- wide open meetings as well, since they provide a wider perspective. Some PPGs are clearly getting themselves organised to send a number of their members to the same meetings. With a bit of initiative, the next time Tracy sends out notice of CCG meetings - the next is on 17th September - and will address priorities for mental health services in Croydon, perhaps we can get our act together as well.

Quarterly Patient and Public Forum

How can we improve mental health services in Croydon?

Wednesday 17 September 2014, 6pm – 8pm

The Community Room, Ground Floor, Bernard Weatherill House,
8 Mint Walk, Croydon CR0 1EA.

email getinvolved@croydonccg.nhs.uk

Practice Development

Dr Galaiya is expecting her first child in October and we expect her maternity leave to start in October 2014, we have found another male Gp Dr Rahman who will be covering here on Mondays, Wednesdays and Fridays all day

Campaign for DNA - In July there were 78 missed appointments of GP time and 49 missed nurses appointments that patients had booked but failed to turn up to the appointments. We have decided to tackle this with letters to patients and to encourage them with signing up to appointments on line and SMS text reminders. We have put posters up in the surgery to inform patients of the high volume of DNA's within the surgery and we are hopeful that this will have an impact on future appointments.

Electronic Prescription Service - EPS patients are still experiencing problems with the chemists, unfortunately the team implementing it has now disbanded but I have and along with other practices feedback patients dissatisfaction

Any other business

It was suggested that something be done about the doors at Farley Road which can be tricky for parents with buggies or for the less able. Automatic doors have been investigated previously and the cost of £2500 per single door and £5000 for the main front door was deemed too expensive. It was suggested that hinges that swing both ways might be a cost effective solution, the practice will look into this – I have looked into this and there is no simple or cost effective way of changing the doors apart from altering the whole of the front of the conservatory.

Date of next meeting

30th October 2014 St Johns Hall Selsdon @ 6.30pm