



Minutes of the Patient Participation Group Meeting held on Wednesday, 9th September, 2015

Agenda Item 1: Registration and badges

Prior to the meeting, badges were handed out to those present.

Present: David Lloyd (Chair), Steve Bates, Michael Whitehand, Clive Robinson, Nigel Vaughan, Maureen Gladwin (Treasurer), Toni Rampello, Mark Pitman, Dorothy Lloyd, John Neale, Christine Cartwright, Vera Roper, Gordon Lovell, Jane Hanlon (Practice Manager), Dr Lucy Marchand (GP) and Angela Lovell (PPG Secretary).

It was Vera's first time attending our PPG meetings. She was welcomed by David.

Agenda Item 2: Apologies

Apologies were received from Jan Lloyd, Fay Read, Judith Westell, Anne Nash and Sheila Dale.

Agenda Item 3: Adoption of the minutes

The August minutes were circulated prior to the meeting and were accepted as an accurate record of the meeting.

Agenda Item 4: Matters arising

(a) Red House Rovers

- ❖ The next walk, which will be in the Bletchley/Fenny Stratford area, is scheduled for Tuesday, 22nd September meeting at the surgery at 2 pm.
- ❖ The following walk is in Emerson Valley on Tuesday, 6th October meeting at the Clock Tower Pub in Emerson Valley at 2 pm.

(b) Patient Congress Meeting

Steve informed us that:-

- ❖ He attended the August Patient Congress and System Resilience meetings. Please see Addendum for his report on both meetings.
- ❖ He informed us that Healthwatch will be having a promotional event on 3rd November.

(c) Horticulture

Angela reported that:-

- ❖ At present we are just keeping the raised flowerbeds tidy.
- ❖ Gordon plans to cut the shrubs at the front of the building. Angela will clear up.
- ❖ We are planning to purchase some winter pansies shortly.

(d) News of future speakers

Jan was unable to attend the meeting but we were reminded of the next 2 speakers.

- ❖ October PPG meeting - Alistair Borland, MBE from Blood Bikers
- ❖ November PPG meeting – Gill Robinson, Manager of Milton Keynes Community Cardiac Group

(e) To consider the proposals for the PPG to provide items of clinical equipment for the Surgery. Maureen and Mark to report.

There was considerable discussion on this subject:-

- ❖ After consultation with Maureen, PPG Treasurer, Mark and PPG members it was decided that there was sufficient money in our PPG funds to purchase a Spirometer which will cost £1,462.80 and will be used for patients with breathing problems. The surgery already has an older version but the new machine will scan the graph results direct into patients' notes. This will be ordered by Jane and paid for from PPG funds.
- ❖ After the raffles at the flu clinics and book sale, consideration will be given to whether there is sufficient money in the PPG's account to purchase an additional 24 hour blood pressure monitor machine costing approximately £1,075. The surgery already has one but another would be very beneficial to patients reducing the time they have to wait to use the equipment.

Agenda Item 4: Visits: Update on the trip to the Fire Station (Mark) and the visit to Willen Hospice on Thursday, 24th September at 1.45 pm (Michael)

- ❖ Mark asked for a show of hands from those wishing to join a visit to the fire station on Wednesday, 14th October at 6.30 pm. Eight PPG members were interested and Mark will book the visit.
- ❖ On Michael's behalf, Jane will contact those wishing to visit Willen Hospice with the final arrangements.

Agenda Item 5: Newsletter: to receive and approve all the items for the newsletter agreed at our last meeting. To note and approve progress.

Newsletter update.

- ❖ Toni, our newsletter Editor, informed us that the articles are almost in, edited and will shortly be sent to the printers.
- ❖ Nigel informed us that City Print will need 3 days for printing the newsletters.
- ❖ John asked if we can include an article on '111' if space.

Agenda Item 7: Sound reinforcement for those hard of hearing. Graham to report.

- ❖ Graham was unable to attend the meeting therefore there is no feedback on this subject from him.
- ❖ Various suggestions were put forward but none thought to be very satisfactory.
- ❖ Sheila had suggested that we contact Pauline Jarvis to ask for some suggestions and Jane will do this.
- ❖ David was also going to contact Graham regarding this subject.

Agenda Item 8: Guide to using on-line services: Steve and Jan to report any progress with this project.

Steve reported that:-

- ❖ The project has made progress but the written instructions have yet to be finalized. Steve's notes have been passed to Nigel's granddaughter who prepared the excellent first draft. Some changes are required.
- ❖ It was agreed that a different title should be used. Rather than 'Silver Surfers' the title could be 'Patients guide to using on-line services' as it won't be only older patients who will be using the instructions.
- ❖ Steve and Jan are ready to go to the surgery to show patients how to use the on-line service for ordering prescriptions and making appointments. Jane will first ask all patients requesting help in this way if they are agreeable to pass on their contact information to Steve.
- ❖ Jane informed us that she has two tablets/ipads that can be used for this purpose.

Agenda Item 9: News from the Surgery

Dr Marchand informed us that:-

- ❖ Dr Alabi has moved on.
- ❖ Dr Iwuagwu has commenced a locum position at the surgery.
- ❖ Dr Fagan is very concerned about a possible drive and threat to put some of the enhanced services out to tender, eg flu vaccine and contraception services by early March 2016. The PPG agreed that they would help in any way they can to support the Practice in avoiding this happening.

Agenda Item 10: Any Other Business

Michael drew our attention to the Milton Keynes University Hospital's Annual Public Meeting to be held at Stantonbury Theatre on 22nd September commencing at 6.30 pm. Anyone wishing to attend should contact Carol Duffy on 01908 996235.

Jane informed us that Flu clinics will be held on Saturday, 26th September and possibly Saturday, 3rd October.

- ❖ It was agreed that as in previous years the PPG will be selling raffle tickets to raise funds for the PPG.

- ❖ Jane suggested that we have a hamper as first prize for both raffles mentioning that these could be made up with donated food items. It was agreed this was an excellent suggestion. Donation for raffle prizes will be appreciated.
- ❖ Volunteers were requested to run both raffles. Offers of help on 26th September are Toni, Christine (either am or pm) and John (either am or pm). Volunteers for 3rd October – Gordon, Maureen (am), John (N) and Angela. It was suggested that Fay and Judith might also be able to assist.
- ❖ John (N) asked if the raffle tickets can be purchased from Tesco's as they tear off easily.

Agenda Item 11. Dates of next meetings

- (a) Core Group meeting - Tuesday, 6th October, 2015
- (b) PPG meeting - Monday 12th October 2015

(28.9.2015 ail)

ADDENDUM

Patients Congress Notes from August meeting.

1. Walnut Tree surgery is planning to extend upwards to allow them to offer an increased range of services.
2. Newport Pagnell Medical Centre is well on the way to opening the Willen Surgery which was closed down . People who wish to register as potential patients can register their wishes via the Newport Pagnell Medical Centre website.
3. Nothing new to report from the Healthcare Review.
4. The £1.86m awarded from the Prime Minister's Challenge Fund has arrived. This will be used to extend GP availability, providing appointments from 0800 to 2000 hrs Monday to Friday, plus access at weekends.
5. Healthwatch will be holding their annual event in Middleton Hall on 3rd November. Patients Congress will have a presence there with the main aim of attracting more people to take an active part with PPGs.
6. There will be an International Day of the Older Person in Campbell Park on 1st October and an Older Person's Forum on 27th October from 1400 to 1700 at Margaret Powell House.
7. During a presentation on Diabetes Care in the MKCCG area it was revealed that during the 2013/14 financial year £5.2m was spent in this area on treating Diabetes, which is a growing problem. £3.7m of that was on prescribing costs alone, equating to £315 per patient compared with the national average of £281 per patient.

System Resilience Group notes from August meeting.

- a. A&E performance has fallen to 93.83% of patients seen within 4 hours. The national target is 95% and we had been on target the previous month.
- b. There has been an increase of dental cases at the UCS.
- c. Delayed discharge of patients is one of the national NHS focus areas. This is where a patient has been given all the medical attention required and is ready to go home, but does not/cannot go home for a variety of social care reasons. They thus occupy a bed which cannot then be allocated to a waiting patient. This can cause a blockage at A&E with patients waiting on trolleys until a bed becomes available. This can then affect the delivery of patients by ambulance as A&E capacity is exceeded. You then get ambulances stacking at the hospital waiting to hand-over patients, so they then cannot go to other urgent cases elsewhere. The other dimension to this is that with blocked beds, some operations have to be postponed or cancelled, with associated problems and distress caused.

The latest statistics for MK University Hospital show that the two nearest hospitals, Bedford, and Luton and Dunstable have a 2% rate of bed blocking (2% of available beds), while our rate is 9% which is high. Delayed discharge of patients is the subject of local CCG Project at the moment and it is recognised that they have a lot of work to do.

The way in which data relating to Delayed Discharge of Patients is presented at the System Resilience Group (SRG) meetings changed earlier this year. It changed so that all hospitals presented the data in the same format. However, I believed that the original format was a clearer indication of the situation and it allowed for costs between hospitals to be compared. I had asked for the data to be made available in the original format and it will be in future. This is as a result of me attending a meeting last Friday where we discussed all the data required to allow the SRG to make informed decisions and plans.

On 8th October I shall be attending a workshop where the work of the Delayed Discharge of Patients project will be reviewed and discussed.

d. There will shortly be a promotion for the use of the non-emergency line 111. This is based on recent data which shows that callers to 111 are getting good advice about where to go to get the treatment they require. It is acknowledged that there were some teething problems previously but the system is now to be believed to be working correctly.

Steve Bates