

Wye Surgery
Tuesday 19th March 2019
Minutes of Patient Participation Group AGM

Present	Chair - Penny Haynes Vice Chair – Judith Timms Secretary – Eileen Burton Practice Manager – Jo Shepherd Assistant Practice Manager – Helen Goodman Terry Donovan John Fletcher Pat Fletcher Enid Gould John Makey Robin Pelham-Reid	Action
Apologies	Paul Callaghan, Lucy Carvill, Margaret Rose, Dr Miles, Dave Martin	

- 1. Welcome**
Penny thanked everyone for their attendance.

- 2. Minutes of AGM 13th May 2018**
We agreed at the last AGM that we would discuss and agree the AGM minutes at the next regular meeting.

Minutes of 22nd January meeting:

Car Service; Robin submitted amendments which should be noted. As far as long waiting times on trips organised by the Ashford Volunteer Centre (AVC) there is no specific time as to when a double trip comes into play. What normally happens is that it is discussed before the trip is undertaken. Normally people know within half an hour or so how long their appointment will be.

Matters Arising

Patient Access Appointment Booking: You can't book an appointment via Patient Access and this option cannot be removed as the software is national and not specific for Wye Surgery.

Car Service/Minibus: The Parish Council is going ahead with the plan to get a minibus and the service will be provisionally called Wye Flyers. It will be available to parishioners and the practice. RPR got the impression that it was for trips rather than individuals wanting it for appointments etc.

Flu vaccines: Wye Surgery is lagging behind in the number of flu vaccines given. There have not been any flu cases reported. The surgery won't be offering vaccines after 31st March.

Ask my GP: RPR reported that he had used the service and felt his enquiry was misdirected. He also queried why the letter was printed

out and sent to him, rather than emailed. This will be dealt with outside the meeting. Enid reported that she found the service excellent.

Clinics: Patients not attending will be removed from the list and will have to go back to square one.

3.

Chair's Report

(PH submitted her report electronically for inclusion in these minutes.)

Each year the Patient Participation Group holds an Annual General meeting where we review the year's activities and elect new Officers. The Chair can only serve for three years, so, having served my apprenticeship as Vice Chair and the past three years as Chair, it's time to pass the baton on. I'm writing this before the AGM has taken place, so I am not yet able to tell you who the new Chair will be. My last job as Chair is to report on what we have done during the year and our future plans.

Our Action Plan for 2018 – 2019 has three main objectives :-to work closely with the practice reflecting the patient experience, to develop the PPG in the community by encouraging and supporting people to take responsibility for their health and to represent Wye surgery PPG at health forums.

In order to fulfil these objectives we have had meetings every two months where we exchange information with the Practice on new initiatives such as the Ask My GP email service, Electronic prescriptions, the Flu clinics (and the difficulties when vaccines aren't delivered to the surgery on time). Social Prescribing is a current topic and we have worked with the surgery and Our Place Wye to initiate Tai Chi for Health classes twice a week, Wednesday 11.15 a.m. in Luckley House and Friday 11 a.m. in Wye village hall. Sessions are £6 and open to everyone.

Our main event this year was the Health Information Day in the village hall. Over twenty organisations came to provide information on their services and we were grateful to Dr Fox, Mr Chantler, Headteacher Lady Joanna Primary School, Steve Bingham from the Ambulance service and Anna Paige from the Fire Safety Team, all of whom gave presentations and talks.

We have had very positive feedback about this event, with requests to hold it annually – watch this space !

We aim to involve patients by inviting everyone to be a part of the PPG, either by attending meetings (all are welcome) or by joining the Virtual Group which sends out monthly information by email. Patients can email their views which we then present at the bi monthly meetings. Also this year I was asked to give a talk to the W.I on the work of the PPG and I was very pleased to have the opportunity. It appeared that there was a lot they didn't know – how the system worked and how to access services. There is a difference to what we

think we communicate and what people receive. Perhaps we could take a stall at Farmer's Market. Or put something in 'Ashford & the Villages'. Parish Mag is also a good source of information.

The organisational structure of local patient discussion forums is changing so we are grateful to John Fletcher who serves as the Public Governor for Ashford at the Kent Community Health Foundation Trust.

4. Virtual Group Report

Nothing to report

5. Practice Report

Ask my GP has now got over 2000 patients signed up - at the last meeting there were 71.

However, it isn't helping the increasing demand on the practice. Although the surgery now has more GP hours than ever, it still can't keep up with the demand. The care navigators spend time trying to get to the root of the problem and ensure patients are directed to the correct person or service.

Since Monday, there are more receptionists allocated to try and improve the call answer rate. This may mean that the appointments will go quicker, but this will be monitored. They are looking at the website to see if they can make it clearer and help to navigate people to the right information and services.

BMA suggest that the surgery should offer 72 appointments per 1000 population per week. This equates to over 600 per week and the actual number taking place is over 900 core service GP appointments. There is a lot of work going on to see why appointment numbers are so high. Perhaps they are not dealing with all the problems a patient has in one appointment, necessitating additional appointments. GPs are getting really stressed as it is relentless. The inexperienced GPs have a higher call back rate than the partners, who can deal with about 80% of their patients in one call/appointment.

They are trying to make hospital consultants issue sick notes for an appropriate time (for the recovery/recuperation), rather than make the patient come back to the surgery for additional sick notes.

There are more and more houses being built without the infrastructure in place, meaning more pressure on existing resources in the surgery.

Surgery Boundary: Jo is looking at reducing the boundary slightly, but eg. the Hinxhill development will have an affect.

Staff announcement: Rachel Heathfield is returning from maternity leave.

KIMS Ortheopedic Clinic being held here once a month. The spinal clinic has not been arranged yet.

Improved Access (provision of weekend and evening appointments) - uptake has increased significantly for Wye but not for Ashford.

Electronic Prescription Service - Gabapentin & Pregabalin are

becoming controlled drugs and will only be issued on the Electronic Prescription Service (EPS).

Rheumatology Clinic - now being held in Wye. Should be every month but there were a few teething problems.

Jo Shepherd will be stepping down as Practice Manager from end of May and Helen will take over. Jo may still have some role in the surgery.

Everyone expressed sadness, but understanding and thanked her for her contributions over many years and wished her well.

6. Election of Chairman, Vice Chairman, Secretary and Representative for the Ashford Representative Group

Judith Timms as Chair

John Fletcher as Vice

Eileen Burton as Secretary

Marlo Johnson as Representative for Ashford PPG

All the above offices were nominated, seconded and appointed.

7. Dr Navin Kumta, Ashford CCG - Roles & Responsibilities of the Ashford and East Kent CCGs

Changing role of the CCG structure

The Practice - there is a new 5 year contract for GPs which is coming out by 29th March. Under a new five-year GP contract, agreed by the British Medical Association (BMA) and NHS England and announced on 31 January 2019, GP practices will be incentivised through a primary care network “directed enhanced services” contract, to form Primary Care Networks covering 30,000–50,000 patients.

Plans for these networks were laid out in the ‘NHS Long-Term Plan’, published on 7 January 2019, which said primary care would receive a £4.5bn investment to fund “expanded community multidisciplinary teams aligned with new PCNs”, including pharmacists, paramedics, physical therapists, social prescriber. According to guidance on the contract published by the BMA, it is expected that a typical PCN will have five clinical pharmacists by 2024 — the equivalent of one per practice. The PCN will receive 70% of the funding for these multidisciplinary teams, with the network making up the remaining 30%. The funding can be paid to the practice, the federation or community trust. The practice will receive £1.50 per patient, just for the practice signing up to the scheme.

For social prescribing 100% of the fund will go to the network.

The practice has to tell the CCG which network they will join, by 15th May. This contract is a formal agreement about how they will work together.

Jill Hills is the Social Prescriber for Wye and she is a district nurse. There is no funding to pay for the patients to go to Tai Chi or singing groups etc. There is no funding behind social prescribing. It will rely on volunteer services coming together to provide services. The Healthcare Navigator will inform patients what is available and where to find it.

The Manchester Model is where they have put Social and Health together, but we are nowhere close to a 'pooled' budget. There is a 'better care' fund which provides for things like befriending schemes.

The objective is to shift funds from the hospital trust to the community, as 17 primary care networks. They will only achieve this by reducing hospital admissions and making hospital stays shorter, which will then free up beds and money for other things. The key thing is to integrate health and social care.

Improved Access & Extended Hours - by 2021 the two will be merged together.

In East Kent the targets are to reduce numbers in A & E, reduce waiting times for surgery and Cancer treatments.

The challenge is how we coordinate services to better serve the patient and deliver targets. We must have strong Primary Care Networks to achieve this.

Now there is 1 plan and we are looking at what we can deliver together.

There is much clearer direction for practices to aspire to and work to the achievements. Targets are clearer.

8. PPG Awareness Week

Provisionally booking a day in Oct half-term.

PPG awareness Week is 10-15 June, but we will have our event in October. Need more time at the stands so we will probably book the whole day. Helen offered to put up posters on Awareness Week in the surgery.

HG

9. Volunteer Car Service - Status Update

RPR is still the only person in Wye on the Ashford Volunteer List. We need a coordinator to organise it all. Penny has 4 volunteers. RPR and Penny to discuss

PH &
RPR

**10. Date of next regular meeting
Tuesday 4th June at 18:00**

Penny thanked all who had contributed to the meeting and for all the support she had received during her time as chair. Judith expressed thanks, on behalf of everyone, for all Penny's efforts as vice and chair.

