Pangbourne Medical Practice – Patient Participation Group Minutes of the PPG meeting held on 7 February 2019

Present: Barry Ashdown, Joan Bott, Lee Carter, Sue Darroch, Sarah Dixon (PPG Chair), Caroline Geraldes), Doreen Hawkins (PPG Deputy), Kim Hiscutt, Jean Hyland, Dr Chris Keast, Rosie Barker, Atul Mohindra, Linda Price

Apologies: JH

Approval of previous minutes: Agreed, except that JB's name was incorrectly listed as Jean.

Matters arising from previous minutes:

The Art Café has been booked for 23 November 2019. We will plan later in the year.

The money raised in Kevin Hawkins memory has been added to the special fund held by the surgery. DH said that Kevin was keen that the money should be used towards a piece of equipment not available on the NHS. Dr K said that the Surgery is looking into the possibility of getting a Doppler machine for measuring arterial pulses; currently, patients have to travel to Oxford. The cost will be £2500, however, so more fund raising would be required.

The disabled access ramp to the Surgery is due to be repaired in the near future.

Patient Voice Group:

Patient Voice Group (PVG) is made up of representatives from local surgeries and from the Clinical Commissioning Group (CCG) and meets once a month. We attend the North and West Reading group. It is an opportunity to feedback on NHS services, to learn from other PPGs, to find out about local organisations providing services to patients, to learn about health initiatives, and so on.

Sarah D was unable to attend the December meeting, but the main items discussed were the management of respiratory conditions and the importance of identifying military veterans. PPGs were asked to share information about managing COPD and Asthma over Winter and to check that Action Plan leaflets are displayed in the waiting area. Dr K assured us that this was all in place. We were also asked to share information on identifying veterans, and reminded that veterans are not always in the older demographic.

The next Patient Voice meeting is 12 February. Sarah D and DH will attend. The one after is 12 March – Sarah D will attend, and if anyone else wants to come please let her know – there is no limit on numbers. The meetings are held at 57-59 Bath Road at 6pm and last for an hour and a half.

There is to be a PPG Chairs Engagement Event on 20 Feb, organised by Berkshire West Integrated Care System (ICS). It is an opportunity to explore how ICS can engage with PPGs to improve patient care at a neighbourhood level, as well as developing the role of GP alliances in integrating primary care services. Sarah D and Sue D will attend.

Practice News

New LED lighting is being installed in the Surgery building, and first reports are very positive.

A GP registrar Dr Nazrin El Mustapha is with us for 6 months. She is a very experienced surgeon and gynaecologist who is moving into general practice.

We heard that there have been some issues with the cleaning of the Surgery and a new cleaning company has been engaged.

The Cervical Screening Week was a great success, and a number of long-term non-responders came to the pop-up clinic: a very good result.

The Surgery is planning a similar event in April for Breast Screening. We were reminded that the cutoff age for routine breast screening is 70, but that does not preclude older patients from requesting a screen. The PPG offered to help with publicising the event.

The new phone system is proving popular. The PPG members expressed their satisfaction with it. The list of options is much simpler, it is easier and less stressful to use, and calls are recordable.

The CQC report marked everything as Good. Dr K is very pleased, and the next inspection is likely to be in 5 years' time. The inspection team were particularly impressed with the CRP machine.

Enhanced Access

The core hours of Pangbourne Surgery are 8am - 6.30pm, Monday to Friday. Under the Extended Hours Scheme early morning appointments (from 7am) have been offered for some time.

The Enhanced Access Scheme is a separate initiative that allows patients access to GPs until 8pm Monday to Friday; Saturday and Sunday mornings; and Bank Holidays. It is not mandatory for surgeries to join, but there are incentives, and Pangbourne has decided to join, along with the majority of surgeries in the area. The requirements are so great, however, that surgeries need to join with neighbouring surgeries to cover the whole period. Pangbourne has joined with Theale, Mortimer and Burdwood (in Thatcham).

The evenings are allocated thus: Monday is a rota with Mortimer and Theale (so every third Monday); Tuesday is Mortimer; Wednesday is Pangbourne; Thursday is Theale; Friday is Birdwood. On the allocated evening the surgery provides 1 face-to-face GP appointment and 5 telephone appointments. Saturday mornings are a rota with Mortimer and Theale; it is appointment only and other services are not available. Sunday mornings are Burdwood. It should be noted that the scheme is meant to provide routine appointments – Westcall should be contacted in the event of an emergency.

The committee had a long and wide-ranging discussion about the whole concept of the Enhanced Access Scheme, its relevance to us as a community, and the way it is being implemented. We felt that it was a good scheme in theory, but maybe is not so necessary with a large semi-rural practice such as Pangbourne. The early morning appointments have always been popular, and have relatively few no-shows, but of course this is not part of the Enhanced Access scheme. We wondered if it might be more relevant to inner-city surgeries which might have different demographics — but which are also physically closer to each other. It was pointed out that all three partner surgeries are really difficult to get to by public transport. Committee members felt that they did not usually have difficulties getting GP appointments at times that suited them.

Dr K told us that many surgeries do a high number of telephone consultations, sometimes up to 40%. In many instances a telephone consultation is completely appropriate, they are popular with patients, and they are a great saving in time. Pangbourne of course offer telephone consultations, but they have not been logged in the past: they are now, however.

The PPG Committee expressed support and appreciation for the service provided by the Surgery.

Any Other Business

DH has prepared a draft paper setting out our PPG Terms of Reference. It was agreed that this would be circulated to the members before the next meeting, so that it could be discussed.

One of the suggestions in this paper is that members of the committee should attend 3 meetings a year (out of a total of 6). It was noted that a number of people on the list of committee members do not attend the meetings and it may be that they would like to step down. It was agreed that we would keep an attendance list for each meeting.

We welcomed back Jane Hodgson after her sick leave.

We welcomed Dr Atul Mohindra, who has come along to check us out; we all hope he will decide to join us permanently.

Sue D expressed concern about the number of no-shows she observed when she went for a scan recently. A spirited discussion ensued, as we are all aware that these no-shows cost the NHS money. Sarah D agreed to raise it at the next Patient Voice meeting.

LC has signed up to be a blood donor, but her appointments have been cancelled twice. She signed up a year ago and has yet to give blood. She expressed her disappointment. Dr K said he would investigate.

Date of next meeting

Thursday 4 April 2019, 6.15 pm at Pangbourne Surgery.