



**MINUTES OF THE NEWBURN SURGERY
PATIENT PARTICIPATION GROUP MEETING
HELD AT NEWBURN SURGERY
ON MONDAY 23 FEBRUARY 2015**

24 February 2015

Those Present:

Mr Alan Phillipson; Mr Ian Bell; Miss Liliana Ghilardhi; Mrs Pat Hopper; Mrs Tatjana Surbek-Chaytor Dr Julian Hargreaves; Dr Lorna Carter; Mr Malcolm Smith (Secretary).

Apologies:

Mr Bryan Rees (Chair)

Agenda Item 1 & 2 – Chair’s Introduction and Minutes of Previous Meeting

1. The Secretary opened the meeting at 1920 and offered the Chair’s apologies, explaining that he is on holiday. He invited comments on the minutes of the previous meeting. The Secretary then highlighted the 2 outstanding actions from the previous meeting: all members to consider whether they had any specific questions for inclusion on the Friends and Family Questionnaire and the practice to conduct a 10% random postal survey of patients. There were no specific questions for the F&F questionnaire, though this is something that can remain under constant review and it is simple to include an issue on which the Patient Group wants more information. The practice has conducted the postal survey and the results are currently being collated prior to analysis. The Secretary will circulate out of committee in due course. There were no other issues or comments on the minutes which were accepted as an accurate record of the last meeting.

2. The Secretary went on to introduce Dr Lorna Carter whom the Group had asked to meet. Dr Carter explained that she joined the practice about a year ago from a partner position in a South Shields practice where she had been for 19 years. However, with the family now much more independent, she had felt it was time to move and Newburn was conveniently close to her home in Ryton. She went on to explain that she works in the practice every morning and also on Tuesday afternoons. Her specific clinical lead responsibilities for the practice include Peripheral Arterial Disease, Hypertension, Mental Health, Dementia, Prescribing and Adult and Child Protection. She also shares the teaching of 3rd year medical students with Dr Adams and, also in partnership with Dr Adams, looks after our patients in Lindisfarne Care Home.

3. The Secretary mentioned that Bryan Rees had suggested the Group discusses Winter Pressures and had asked whether Newburn was seeing the same picture as was being reported by the CCG and in the press. Dr Hargreaves responded that demands on the practice were cyclical and there is no doubt that this time of year is demanding, but did not feel that we were seeing excessive demand compared to previous years. Dr Carter mentioned that whilst

the surgery is busy, we often end the day with a spare appointment or 2. This led to a wider discussion on availability of appointments with all members of the group observing that Newburn's appointment offer is very good and they rarely have problems obtaining appointments, even on the same day. They also noted that reception staff were excellent. The Secretary briefed that in January the practice took part in a CCG project to look objectively at patient access and benchmark ourselves against other practices nationally. Whilst we have still to receive the formal debrief from the Primary Care Foundation staff, the results are very positive and in due course will be shared with the group.

Agenda Item 3 – Patient Online

4. Patient Online is the generic name for NHS England's programme to make more patient information online. It is a rolling programme and group members are likely to see the term regularly in the next couple of years. In consultation with GP leaders, the NHS is now placing annual targets on practices. To date this has been simple for Newburn since we have ourselves embraced the electronic functionality available to us and already offer online appointment booking, repeat prescriptions, messaging, online access to the Summary Care Record and electronic prescribing, all via System Online. Last year we also piloted a project to improve the electronic transfer of patient records.

5. Dr Hargreaves, however, wanted to take this opportunity to explain an enhancement to the Summary Care Record and seek the group's view. The Summary Care Record was a national programme rolled out about 3 years ago to enable clinicians who were treating patients out of their own practice access to basic but important information such as allergies or medication, providing the patient consented at the time. Last year this functionality was improved and allowed us to extend the service further, and with individual patient consent we increased the amount of information available for some of those patients at higher risk of admission to hospital. Dr Hargreaves mentioned that we did raise this issue with both the core and virtual groups last year. The functionality has again been improved and we think it is time to consult patients about rolling it out more widely, initially to those patients with chronic illnesses who are reviewed annually. He sought the group's view. The consensus was that it was sound to seek to roll this out further. It led to a wider discussion on the increasing use of electronic records and both the risks and benefits this could present. The tenor of the group's comments was that patient consent was all important.

6. Dr Hargreaves went on to mention that our clinical system could now make a patient's test results available to them online, providing they had a System Online username and password. He stressed that all test results have to be assessed first by a GP in the surgery before they are made available to patients whether online or via a receptionist. He reassured the group that there would be instances when it was more appropriate for a clinician to discuss test results and that making them available online was an individual GP decision for each test result. But many results could be happily made available and for some patients this would be a welcome facility. The surgery has just enabled this and we are about to start publicizing its availability to those who wish to take advantage.

Agenda Item 4 – Surgery Update

7. The Secretary briefed as follows:

- **New Build.** The competitive procurement issue reported to the last patient group meeting has now been resolved and we are currently in consultation with the architect over detailed drawing to support the Outline Business Case – the next stage of the approvals process.
- **Friends and Family Survey.** The results of the December and January surveys have been published on the Patient Participation page of our website. They were consistent with other surveys we have conducted with some very positive comments.
- **Newcastle West Clinical Commissioning Group (CCG).** The Secretary reminded members that on 1 April Newcastle West CCG ceases to exist and the Newcastle/Gateshead CCG become the statutory body for commissioning health services. In response to a question on the reason behind this, the Secretary said that the existing CCG was seen as being too small and that by grouping up the 2 Newcastle CCGs and Gateshead the overall budget available would be larger and perhaps a bit more flexible. There was also a funding deficit in Gateshead CCG and it was believed that this could be better managed within a larger CCG grouping.

Agenda Item 5 – Any Other Business

8. In the absence of any further business the Secretary thanked members for attending and closed the meeting.

9. **Date of Next Meeting.** The next meeting is planned for **Mon 22 June 2015 at 7:15pm in Newburn Surgery.**

M Smith
M SMITH
Secretary

Annex:

A. Action Grid.

**ANNEX A TO
PPG MINUTES
DATED 24 FEB 15**

NEWBURN SURGERY PATIENT PARTICIPATION GROUP - ACTION GRID

Serial No	Date of Meeting	Action Required	Action Owner	Date Completed
21	10 Nov 14	Conduct a postal patient survey of a random 10% of the patient population	Secretary	20 Feb 15
20	10 Nov 14	Consider suitable questions for inclusion in the Friends and Families Test survey	All	23 Feb 15
19	30 Jun 14	Patient Survey to be discussed at the November Meeting	Chair	10 Nov 14
18	24 Feb 14	Prepare briefing sheet on telephone calls to the surgery	Secretary	23 Jun 14
17	4 Nov 13	Conduct annual patient survey using GPAQ questionnaire and in addition specifically target young mothers attending Tuesday baby clinics	Secretary	17 Feb 14
16	4 Nov 13	Summarise patient group views on CCG commissioning intentions and relay to the CCG	Chair	5 Nov 13
15	1 Jul 13	Report Results of CCG Discussion on Patient Participation in CCG Decision-making	Practice Manager	4 Nov 13
14	25 Feb 13	Investigate improvements to existing video advertising system	Practice Manager	20 Aug 13
13	12 Nov 12	Adjust patient survey questionnaire to seek views on service provision in the new surgery; specifically ask young mothers to complete the questionnaire	Secretary	5 Dec 12
12	12 Nov 12	Agree the format for a practice Social Prescribing workshop with Sarah Richard (Secretary to initiate virtual discussion)	Chair	Jan 13
11	2 Jul 12	When planning permission for the new surgery is agreed, produce surgery article in local magazine	Secretary	Ongoing

Serial No	Date of Meeting	Action Required	Action Owner	Date Completed
10	2 Jul 12	Offer Core Group Place to Virtual Members	Secretary	Sep 12
9	27 Feb 12	Complete Newcastle Bridges Prioritisation Questionnaire and return to the Secretary within a week (only if members wish to do so)	All	Mar 12
8	27 Feb 12	Examine alternative means to communicate up to date surgery information to infrequent surgery users	Secretary	Complete – see Action 11
7	27 Feb 12	Redraft Practice leaflet to include more detail on GP availability and widen this beyond new patients to all visitors to the surgery	Secretary	Apr 12
6	27 Feb 12	Improve surgery notice boards and specifically generate a notice board to advertise Practice services, extended hours and wider GP availability; reduce distracting over-provision of notices	Secretary	Nov 12
5	27 Feb 12	Improve advertising of the availability of GP telephone appointments	Secretary	Apr 12
4	5 Dec 11	Consider date of next meeting and confirm availability to the secretary	All	Dec 11
3	5 Dec 11	Conduct local patient survey and analyze results prior to next meeting	Secretary	Feb 12
2	5 Dec 11	Conduct in-surgery campaign to recruit patients to the virtual patient group	Secretary	Ongoing via New Patient Packs
1	5 Dec 11	Consider ways of recruiting a small number of people in the 16-45 age group to the core Patient Group and propose ideas to the secretary	All	Dec 11