



**MINUTES OF THE NEWBURN SURGERY  
PATIENT PARTICIPATION GROUP MEETING  
HELD AT NEWBURN SURGERY  
ON MONDAY 22 FEBRUARY 2016**

23 February 2016

Those Present:

Mr Bryan Rees; Mr Ian Bell; Miss Liliana Ghilardhi; Dr Julian Hargreaves; Mr Malcolm Smith (Secretary).

Apologies:

Mr David Gardner; Mrs Pat Hopper; Mrs Tatjana Surbek-Chaytor

**Agenda Item 1 – Chair’s Introduction**

1. The Chair opened the meeting at 1915. The Secretary mentioned the apologies he had received and in particular that Mrs Surbek-Chaytor was moving out of the area and had tendered her resignation. It was agreed that numbers attending the meeting were getting low and that another approach should be made to the wider virtual group to see if anyone is interested in joining the core group. **ACTION: Secretary**

**Agenda Item 2 – Minutes of Previous Meeting**

2. The Chair invited the Secretary to comment on outstanding actions. He responded that there were 2 outstanding actions: to look at the GP Patient Survey for the surgery, which was an agenda item, and he also reminded members that they had asked for feedback on electronic prescribing. This has been added as a question on the monthly Friends and Family survey and the responses in January were very supportive but more feedback is needed before the group can build up a picture. He suggested the question be reviewed at the next meeting. The Chair asked Dr Hargreaves whether or not the surgery had seen an increase in flu cases over the winter and Dr Hargreaves responded that it had not but the winter had been fairly mild. The Chair asked if anyone had any comments on the minutes. There were none and the minutes were accepted as a true record.

**Agenda Item 3 – Review GP Patient Survey Website and Focus on Newburn Surgery Biannual Survey Results**

3. The Secretary projected the GP Survey Website at <https://gp-patient.co.uk/>. Using the practice postcode of NE15 8LX he selected Newburn Surgery. He explained that this was a random postal survey conducted by Ipsos Mori. The surgery has no influence over this survey and, like anyone else, picks up the results from the website. Ipsos Mori survey about 5% of patients every 6 months and their response rate is quite good at just over 40%. He demonstrated the information available on the website, including a useful facility to compare

practices. He then took the group through the detail of the survey questions. On almost all questions the surgery was showing above both the Newcastle/Gateshead and national averages and there were no areas of concern. The Chair commented that the information was very detailed and, together with Friends and Family feedback would be enough to meet the Group's remit to examine the surgery's performance.

#### **Agenda Item 4 – Online Services Update**

4. Dr Hargreaves briefed that the surgery has enabled patient access to full medical records via its online system (SystemOnline), as briefed at the last meeting. Take up remains relatively low at only just under 70 patients. Dr Hargreaves also reiterated our push to increase the information available on the Summary Care Record which has been extended to all patients with long term conditions. Take up stands at around 70%. There was then a discussion over availability of information to other practitioners. The secretary pointed out that the Department of Health direction of travel was wider sharing of patient records (with consent), though Dr Hargreaves said that this was technically complicated. He then mentioned that he was looking at generating a surgery Facebook page which he thought might be more attractive than the surgery website to younger patients. The Chair thought this a good idea and suggested the group may be able to help.

#### **Agenda Item 5 – Surgery Update**

6. **CQC Inspection – 6 Oct 16.** The Secretary reminded members that he had discussed the inspection team leader's informal debrief at the last meeting but that the group had not formally looked at the inspection report. This had been circulated to core and virtual group members shortly after receipt and posted on the surgery website. He went on to say that the formal report was consistent with the Team Leader's debrief and was very positive with all areas assessed as good except for care of Long Term Conditions which was assessed as outstanding. The Chair noted that the views of the patient group were reflected in the report and mentioned that the inspection team had spent 45 minutes with Mr Bell and himself.

7. **New Build.** The Secretary briefed that the formal report from the District Valuer, which confirmed he was content that the project represented value for money, was received and the Outline Business Case was forwarded to NHS England in early December. Very frustratingly, the next formal premises meeting is not until 22 March thus a 3 month delay whilst we await a decision.

8. **New Telephone System.** The surgery has recently upgraded its telephone system and taken the opportunity to install 2 new phone lines. These will be used for outgoing calls to reduce the number of times the surgery's main number is unavailable to patients as clinical and administrative staff make outgoing calls. Unfortunately the surgery layout, and staffing levels, means that adding lines to the main number would only increase patient frustration as they would be placed on hold pending availability of a receptionist. Nevertheless, the new lines should make it slightly easier to ring into the surgery.

9. **Date of Next Meeting.** The date of the next meeting will be promulgated separately.

*M Smith*  
**M SMITH**  
**Secretary**

*Approved by the Chair*

Annex:

A. Action Grid.

**ANNEX A TO  
PPG MINUTES  
DATED 23 FEB 16**

**NEWBURN SURGERY PATIENT PARTICIPATION GROUP - ACTION GRID**

<b>Serial No</b>	<b>Date of Meeting</b>	<b>Action Required</b>	<b>Action Owner</b>	<b>Date Completed</b>
24	22 Feb 16	Approach Virtual Patient Group for any volunteers to join the Core Group	Secretary	
23	26 Oct 15	Download and disseminate GP Patient Survey Results for the Feb 16 Meeting	Secretary	22 Feb 16
22	22 Jun 15	Seek patient feedback on Electronic Prescribing via the Friends and Family survey at the next convenient opportunity	Secretary	1 Jan 16
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

Serial No	Date of Meeting	Action Required	Action Owner	Date Completed
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
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	<b>Ongoing via New Patient Packs</b>
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