



**MINUTES OF THE NEWBURN SURGERY
PATIENT PARTICIPATION GROUP MEETING
HELD AT NEWBURN SURGERY
ON MONDAY 20 FEBRUARY 2017**

22 February 2017

Those Present:

Mr Bryan Rees; Miss Liliana Ghilardhi; Mr Alan Phillipson; Mrs Pat Hopper; Mr Ian Bell; Dr Julian Hargreaves; Mr Malcolm Smith (Secretary).

Apologies:

None

Agenda Item 1 – Chair’s Introduction

1. The Chair opened at 1915 and thanked members for attending their 17th meeting. He noted that the only action on the grid was the Ways to Wellness briefing. He also thanked members for attending the meeting in January to discuss the Sustainability and Transformation Programme and said that he had forwarded the group’s comments. Healthwatch had advised that once the comments had been considered, a formal consultation on the STP would be launched, with 12 weeks for comments. It is likely that the Group would have to return to this subject later in the year

Agenda Item 2 – Minutes of Previous Meeting

2. Members were asked if they had any comments on the minutes. There were none and the minutes were accepted as a true record.

Agenda Item 3 – Ways to Wellness Update

3. The Chair thanked Claire Harrison, the surgery’s Ways to Wellness link worker, for attending the meeting and invited her to give her update. Claire explained the Ways to Wellness methodology which is about changing lifestyles to try to improve the health of those within the age bracket of 40-74 suffering from certain long term conditions. She highlighted that just over 200 Newburn patients (out of a cohort of around 600) had been currently been offered Ways to Wellness support and that eventually all patients would be approached. Of those 200, 104 patients agreed to a referral to the service and 67 are currently actively engaged in Ways to Wellness programmes. Claire felt that of the 5 surgeries in the programme dealt with by Healthworks, Newburn’s had shown the most progress. She presented some interesting statistics and a copy of her report is attached, together with an example Case Study. In discussion, members touched upon the funding model for this programme and the fact that it is, unusually, funded for 7 years. Because of this, Claire explained that there was a great deal of interest from the CCG and very detailed scrutiny of its

performance. In response to a question, Claire said she felt it was a successful programme and that at the end of the 7 year period she hoped it would be extended more widely, both across the whole of Newcastle (it is currently limited to Newcastle West practices) and that the age and long term conditions criteria would be relaxed to allow more people to benefit. The Chair thanked Claire for her presentation and for taking the time to attend the meeting.

Agenda Item 4 – Surgery Update

4. The Secretary referred to the minutes of the previous meeting:

- **Replacement Surgery Project.** Following the very downbeat brief at the last meeting, and formal cancellation of the project, the Secretary explained that the developer had contacted the surgery to say that he had taken advice and reconsidered his position over the Heads of Terms for a draft lease on the building. The surgery subsequently entered into a further round of negotiation and both sides reached a satisfactory arrangement over the Heads of Terms. NHS England agreed to resurrect the project. Unfortunately, the proposal that Newcastle Hospitals might take space in the building to provide outreach services has not been pursued by the hospital management and the developer reverted to his plan to use the third floor of the building for domestic accommodation. This of course required redrafting of the plans for the building which did impact slightly on the surgery footprint and both the Heads of Terms and revised plans have had to be resubmitted to the District Valuer for value for money scrutiny on behalf of the taxpayer. The DV workload is currently high and we are awaiting an answer. In response to a question from the Chair, the Secretary reminded members that the surgery has not yet had Outline Business Case approval for the new build so the project remains fragile, though still alive.
- **GP Training Practice.** Our first GP Registrar joined the practice on 1 February for 6 months' training under the supervision of Dr Gupta.
- **Medical Interoperability Gateway – The Great Northern Care Record.** The Secretary mentioned that the surgery's concerns over this had still not been resolved and were now becoming complicated by a new proposal that complete medical records be made available to clinicians under a new project to extend access to GPs in walk-in centres. We are the only surgery in the area that has yet to sign up to the Great Northern Care Record which does, of course, increase the pressure on us. Dr Hargreaves took the opportunity to seek the members' thoughts on how they view access to their medical record and there was a substantial, though inconclusive, discussion. The Chair felt that members should give this some thought and it should be an agenda item for the next meeting and it was agreed that briefing material on the issue would be provided to the Chair and the item tabled for discussion at the next meeting. The Secretary advised that it was an issue that might need resolution before the next meeting.

ACTION Secretary

5. **Date of Next Meeting.** The date of the next meeting was agreed as 1915 on Monday 26 June 2017.

6. The Chair thanked members for attending and closed the meeting.

M Smith
M SMITH
Secretary

Approved by the Chair

Annex:

A. Action Grid.

Appendix:

1. Ways to Wellness Briefing Sheet
2. Ways to Wellness Case Study Example

**ANNEX A TO
PPG MINUTES
DATED 22 FEB 17**

NEWBURN SURGERY PATIENT PARTICIPATION GROUP - ACTION GRID

Serial No	Date of Meeting	Action Required	Action Owner	Date Completed
26	20 Feb 17	Provide MiG Briefing Material to the Chair and Table the MiG as an Agenda Item for Discussion at the Next Meeting	Secretary	
25	31 Oct 16	Provide an Update on the Ways to Wellness Project	Secretary	20 Feb 17
24	22 Feb 16	Approach Virtual Patient Group for any volunteers to join the Core Group	Secretary	22 Mar 16
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

Serial No	Date of Meeting	Action Required	Action Owner	Date Completed
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
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

