# MINUTES OF THE NEWBURN SURGERY PATIENT PARTICIPATION GROUP MEETING HELD AT NEWBURN SURGERY ON MONDAY 3 JULY 2017

4 July 2017

#### **Those Present:**

Mr Bryan Rees; Mrs Pat Hopper; Mr Ian Bell; Dr Julian Hargreaves; Mr Malcolm Smith (Secretary).

### **Apologies:**

Mr Alan Phillipson; Miss Liliana Ghilardhi

#### Agenda Item 1 - Chair's Introduction

1. The Chair opened at 1920 and thanked members for attending. He highlighted that apologies had been received from Mr Phillipson and Miss Ghilardhi.

#### 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 – Medical Interoperability Gateway (MiG)

- The Chair reminded members that they had discussed this issue at the previous 3. meeting and agreed to give it some thought. He had asked the surgery for copies of relevant documentation which he had distilled this into a short brief and which had been circulated in advance of the meeting. He outlined the difficulty faced by the Practice which was their legal responsibilities as Data Controllers of patient information versus the clinical benefits of making that information available to clinicians (although much of it is already available under the nationally-advertised Summary Care Record). The practice has 2 reservations: that the CCG plans for informing patients of what is a significant new data sharing requirement, and their right to opt out, are not particularly effective and that participating in this project requires the practice to "share out" patient information globally rather than individually and with patient consent. The Information Commissioner has expressed concern over the way in which System One (the clinical system used by many surgeries including Newburn) shares information and has directed the clinical system supplier to rectify this. The surgery view is that activating the MiG (being marketed as the Great Northern Care Record) would not be sensible until these issues are resolved.
- 4. After some discussion the Patient Group agreed a position that it would like to see primary care data shared with secondary care under the MiG/Great Northern Care Record but recognised that the surgery needed to be satisfied it could meet its obligations under the Data Protection Act and that patients need to be consulted and offered the opportunity to opt out if they wish.

#### **Agenda Item 4 – Teenager Page on the Newburn Surgery Website**

5. The Chair introduced the item and reminded members that they had been asked to look at the new Teenager page on the website. The page was favourably received but members were obviously conscious that they did not represent the target demographic. The Chair asked how many teenagers were on the surgery list (**post meeting note: 376 in the bracket 13-19 representing 6.8% of the list with a further 375 patients in the age bracket 20-25).** Discussion moved on to how we might seek the views of teenagers and it was agreed that the surgery would approach the Virtual Patient Group. They would also seek the views of some work experience potential medical students in the surgery over the Summer.

**ACTION: Secretary** 

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

- **Replacement Surgery Project.** The Secretary briefed that there had been little real movement since the last meeting. The developer and District Valuer continue to engage over building costs.
- Referral Management. The Secretary reminded members that this had come up in a previous meeting. He explained that the Clinical Commissioning Group was keen to resist NHS England pressure to introduce third party referral management and had asked practices to conduct peer reviews in an effort to reduce unnecessary referrals into hospitals. The surgery has signed up to this "light touch" scheme. Dr Hargreaves mentioned that the existing "Individual Funding Request" scheme, where procedures considered of low clinical value were subject to committee approval in advance of referral, had been expanded and it was becoming increasingly difficult to get NHS funding for cosmetic procedures.
- **GP Registrar.** The Secretary mentioned that our first GP Registrar was coming to the end of her 6 month training period in the surgery. Dr Sarah Kinsman joins the surgery on 2 August for her initial period of training
- 6. **Date of Next Meeting.** The date of the next meeting was agreed as 1915 on Monday 16 October 2017.
- 7. The Chair thanked members for attending and closed the meeting at 1950.

M Smith
M SMITH
Secretary

Approved by the Chair

Annex:

A. Action Grid.

## ANNEX A TO PPG MINUTES DATED 4 JUL 17

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

Serial No	Date of Meeting	Action Required	Action Owner	Date Completed
27	3 Jul 17	Seek Virtual Patient Group views on the teenager web page	Secretary	
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	21 Feb 17
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

Serial No	Date of Meeting	Action Required	Action Owner	Date Completed
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
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

Serial No	Date of Meeting	Action Required	Action Owner	Date Completed
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