

**MINUTES OF THE NEWBURN SURGERY
PATIENT PARTICIPATION GROUP MEETING
HELD AT NEWBURN SURGERY
ON MONDAY 16 OCTOBER 2017**

31 October 2017

Those Present:

Mr Bryan Rees; Mrs Pat Hopper; Mr Ian Bell; Miss Liliana Ghilardi; Dr Julian Hargreaves;
Mrs Ruth Shrimpton-Dean; Mr Malcolm Smith (Secretary).

Apologies:

Agenda Item 1 – Chair’s Introduction

1. The Chair opened the meeting at 1915 and thanked members for attending. He welcomed Ruth Shrimpton-Dean to her first meeting and introduced the other members of the group. He briefed members on the sad death of Alan Phillipson who had been a member of the group since its inception and had made a very valuable contribution to the surgery.

Agenda Item 2 – Minutes of Previous Meeting

2. Members were asked if they had any comments on the minutes and then accepted them as a true record of the last meeting. Dr Hargreaves referred to the item on the Medical Interoperability Gateway and mentioned that he had just attended a national meeting on our patient record system (System One). It had been briefed that TPP (the company which provides the clinical system) had responded to concerns from the Information Commissioner about data sharing and was working on a new sharing model. This would allow more control of how and with whom patient information is shared and is obviously intended to resolve the Information Commissioner’s concerns. He also mentioned that NHS England’s view is that, in order to inform patients of their right to opt out of data sharing, it is sufficient to conduct a public information campaign backed up by Fair Processing Notices placed on surgery noticeboards and the surgery website. The Practice Manager referred to Action 27 to seek the views of the virtual patient group on the Teenager page on the website. This had been done in September but there had been no response at all. Members were surprised and Mrs Shrimpton-Dean thought Facebook would be a better way of approaching young patients. Dr Hargreaves responded that we did have a Facebook account, which came as a surprise to most members, and there was a discussion over the relative merits of the website and Facebook. Dr Hargreaves agreed to look at putting teenager information on the surgery Facebook page and advertise the existence of the Facebook account more widely.

ACTION: Dr Hargreaves

Agenda Item 3 – Seasonal Flu Vaccination Update

3. The Chair asked in advance for an update on the surgery’s seasonal flu campaign. The Practice Manager highlighted that there are several aspects to the annual flu campaign: vaccination of over65s; vaccination of those with a clinical condition where flu could result in

complications; vaccination of carers; vaccination of pregnant ladies and vaccination of healthy children in the 2-8 age range. This year patients with a BMI of 40 or greater have been added to the “at risk” category and the healthy child programme has now been given to schools to deliver for the 4-8 age range with surgeries giving the vaccine to 2-3 year olds. The surgery is still in the early stages of the campaign with the vaccines arriving in the 3rd week of September. There were 1900 flu vaccination invitation letters sent out, though there was an error by the surgery’s mailing company and the letters for over 65s went out without time slots. Due to problems with the NHS-supplied Fluenz vaccine for children, we were unable to invite the health child cohort to the mass flu clinic on 30 September. Some 116 vaccinations were given to patients on an opportunity basis prior to the mass flu clinic. At the clinic we vaccinated 649 patients which was lower than last year but of course healthy children were excluded from this clinic and only received their invitation letters once we had an assured supply of the Fluenz vaccine. At close of play on Friday 13 October, 1060 patients had been vaccinated or just under 50% of the target audience. Our approach to include the remainder is:

- Offer in surgery vaccination clinics
- Offer vaccination on an opportunity basis to those presenting routinely at the surgery
- Conduct a further mailshot in a few weeks as vaccinations start to tail off
- Make telephone calls to higher risk patients reminding them to attend for a flu vaccination

Achievement targets set by the NHS vary between 40 and 75% depending on the cohort. The practice normally meets its targets. A complicating factor over the last 2-3 years has been the availability of flu vaccines through local pharmacies. This is a good development, offering greater convenience to the patient, but does make planning the flu season a bit more difficult since the surgery has to buy the flu vaccine well in advance. Whilst pharmacies are supposed to tell us when they have given one of our patients a flu vaccination, we often call patients in for a vaccination only to discover they have had it through a pharmacy.

Agenda Item 4 – Winter Pressures

5. The Chair asked what advice the NHS was giving to practices on Winter Pressures this year. The Practice Manager said that winter pressures was a well-known issue around the whole of the health service but, whilst there was information on the NHS England web site saying that practices had received winter pressures communication, the practice hasn’t actually received anything. Flu planning is, of course, a key feature of the NHS’s winter pressures agenda and that is well-embedded in General Practice through the annual NHS Flu Plan. There is also reference on the NHS website to the development of Urgent Treatment Centres as part of the winter pressures work and Newcastle and Gateshead CCG are progressing this, with GPs now in A&E and selected Walk In Centres thus providing extra capacity. Eventually surgeries will be able to book patients directly into these centres but that is some way off. Finally, to overcome a disincentive to GPs taking on extra Out of Hours work, NHS England has agreed to pay the additional indemnity costs for GPs who do this.

Agenda Item 5 – Surgery Update

- **Replacement Surgery Project.** The Practice Manager briefed that there had been no further movement since the last meeting and he feels the project is now in the amber

category. The partners are looking at alternative options but there are no easy solutions.

- **Practice Nurse.** One of the practice nurses is sick and the surgery has brought in a locum practice nurse to cover.
- **Newcastle GP Services Ltd.** The surgery has recently joined NGPS. This is a federation of Newcastle GP practices. NHS England, Clinical Commissioning Groups and the BMA have been encouraging practices to “federate” in order to explore delivery of services “at scale”. Whilst these concepts are under development, the surgery feels it is the right time to join this Newcastle-wide federation.
- **Frailty.** A recent change to the GP contract requires us to assess and record patients with mild, moderate and severe frailty. This has involved a change to our birthday review questionnaires (for those with long term conditions) and patients will start to see an additional screening question, Healthcare assistants and practice nurses will assess mild and moderate frailty as part of their routine reviews. GPs will assess severe frailty, usually in the housebound or patients in care homes.
- **Primary Care Navigator.** The Practice Manager briefed that the surgery has shared use of a Primary Care Navigator. The role of PCNs is to take some of the non-clinical issues that sometimes find their way into GP surgeries (often related to benefits issues) and either assist the individual with what is a social problem or arrange for them to be seen by someone who can deal with the problem.

6. **Date of Next Meeting.** The date of the next meeting was agreed as 1915 on Monday 12 February 2018.

7. The Chair thanked members for attending and closed the meeting at 2005.

M Smith
M SMITH
Secretary

Approved by the Chair

Annex:

A. Action Grid.

**ANNEX A TO
PPG MINUTES
DATED 31 OCT 17**

NEWBURN SURGERY PATIENT PARTICIPATION GROUP - ACTION GRID

Serial No	Date of Meeting	Action Required	Action Owner	Date Completed
29	16 Oct 17	Explore a teenager section for the Newburn Surgery Facebook page.	Dr Hargreaves	
28	16 Oct 17	Promulgate the existence of the Newburn Surgery Facebook page.	Dr Hargreaves	
27	3 Jul 17	Seek Virtual Patient Group views on the teenager web page	Secretary	25 Sep 17
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

Serial No	Date of Meeting	Action Required	Action Owner	Date Completed
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
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

Serial No	Date of Meeting	Action Required	Action Owner	Date Completed
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