

**MINUTES OF THE ELMWOOD MEDICAL CENTRE
PATIENT PARTICIPATION GROUP (PPG) MEETING**

27 January, 2017

PRESENT:

Ian Bowns (Chair), Jane Barrett (Secretary), Helen Bentley, Don Hodgkinson, Dorothy Martin, Samantha Minshull, Andy Brennan, Tim Hodgkinson, Janet Stockton, Hilary Gresham, David Pritchard, Jean Brown, John Hollands, Margaret Charlton.

1.WELCOME AND APOLOGIES

Apologies were received from Brian Cowlshaw. Ian welcomed everyone to the meeting, in particular Ian Mason, who is Chair of the PPG Network (see next item), and Andy Brennan, who has recently taken up post as practice manager. All members then introduced themselves.

2.HIGH PEAK PPG NETWORK – IAN MASON

Ian explained that Elmwood is one of eight PPGs in the High Peak Network; each PPG can send 2 reps to Network meetings.

Network meetings are held 4 times pa on Tuesdays at Buxton Fire Station – evenings in the summer and afternoons in the winter. The network aims to promote good communication between PPGs and the CCG. The main business is cascading information from the CCG and its committees and working groups to the PPGs and sharing information and good practice between PPGs.

As Chair Ian represents High Peak on various N Derbyshire CCG committees, for example the Finance Committee and the Lay Reference Group. The latter feeds into other committees, e.g. the Primary Care Development and Patient Experience Groups.

The CCG contains 36 GP practices, organised in clusters. It has an annual budget of £400m. This year however there is a £20m deficit, partly due to recent changes in accounting practices. This may mean revisiting the assessment of “clinical value” and higher thresholds for various treatments. Financial pressures are also leading to greater cooperation between practices which has many benefits. It was noted that these pressures are evident throughout the whole NHS.

The last Network meeting was addressed by Steve Allison, the new Chief Executive of the CCG. He spoke in particular about the System Transformation Programme (STP) and the 21st Century Programme, which are complementary, though the STP covers the whole county while the 21st Century proposals relate only to North Derbyshire. The consultation results of the latter will be published next week: Ian said the Cavendish had been a major issue.

The STP sets out a vision for a more joined up approach to health and social care, the steps that should be taken to get there and how everyone involved needs to work together to improve what we deliver. It will also look at ways to make savings; for example it proposes that the 4 CCGs in Derbyshire merge to “reduce bureaucracy and costs”.

Ian also commented that North Derbyshire tend to think in terms of Chesterfield being the only hospital, where Stepping Hill is more relevant to High Peak.

3.ELECTION OF ELMWOOD REPS TO THE NETWORK

Margaret Charlton and Jane Barrett agreed to attend the meetings, with Jean Brown and Sam Minshull as reserves.

4. MINUTES OF THE MEETING OF 7 OCTOBER 2016

Item 8: should read “the two nurse practitioners, Emma and Jill”. As amended they were agreed as a correct record.

5. MATTERS ARISING

Item 5.1 CONSULTATION ON BETTER CARE CLOSER TO HOME

It was noted that the results of the consultation were due to be published next week.

The Chair also reported that the draft Sustainability Transformation Programme was published in November 2016. It can be accessed using this link:

<http://www.southernderbyshireccg.nhs.uk/publications/joinedupcarederbyshire/>

He said it was long and detailed and the core proposals were to bring care closer to people in the community; it proposes to remove 500 hospital beds from all of Derbyshire (out of how many?). It was agreed to table a discussion at the next meeting, provided it is within the deadline.

Margaret said there was more information at the last network meeting, including ways to promote cross-border working, e.g. 2 hub groups in Buxton and New Mills have merged.

NB Update from S Derbyshire CCG who are managing the process: this is not a formal consultation, so no deadlines. The documents are available for information and they will be organising public meetings in April.

Dr Hodgkinson commented that it can be difficult for GPs to keep abreast of developments owing to the pressure of clinical work and also because many groups operated on a level higher than GPs. It is necessary to look at new ways of working while also wanting to protect the service against cuts.

Local councils are involved in the planning though it was noted in some areas the services currently work much more closely together.

From the CCG website:

What is the Derbyshire STP?

Derbyshire’s STP is called ‘Joined Up Care Derbyshire’. It brings together eleven partner organisations and sets out ambitions and priorities for the future of the county’s health and care.

All the organisations that provide health and care aim to work and plan much better together, focusing on new ways of working to:

- *help keep people healthy;*
- *give people the best quality care; and*
- *run services well and make the most of available budgets.*

Change is needed. People’s lifestyles are very different now to what they were when the NHS was set up in the 1940s or even as recently as ten years ago. Our services need to adapt to keep up with the people they serve.

It was agreed that everyone should look at the documents and this should be a standing item on PPG agendas.

Item 8: Andy Brennan reported that the patient survey results were very positive, with improvements in all areas and were above the national average in almost all, the exceptions including access to a named GP and the telephone service. A working group is looking at these issues.

6.DR HODGKINSON – UPDATE ON PRACTICE MATTERS

1. 7-day service – the government has directed CCGs to provide GP services in the evenings and in the future at weekends too. Elmwood currently offers appointments early Wednesday morning and on Tuesday evenings. They are looking at collaborative arrangements with other practices. GPs can opt out: then the CCG would have to provide an alternative. Most local GPs do not want to take part in a full 7-day service. In the pilots the results vary – Saturdays are quite popular but Sundays less so. The current out of hours acute service (the DHU) is funded separately by the CCG.
2. Collaboration between practices – local collaboration is progressing well under the “Productive General Practice” agenda.
3. “GP Forward View” – Andy Brennan reported that consultants are being funded to help practices improve management, with a focus on administration and work flows, etc.
4. There is a possibility of bidding for diagnostic equipment and community pharmacist to be based in the practice.
5. NHS England is reviewing treatments currently available on the NHS that could be withdrawn or reduced – e.g. cosmetic surgery or a higher threshold for joint replacements. It was suggested that some items currently available on prescription, such as a wide range of gluten-free products, could be re-evaluated. It was also noted that better information to patients awaiting surgery – e.g. the risks and benefits – leads to 20% of patients deferring.

7.PROMOTING THE PRACTICE

Dr Hodgkinson said the practice is looking at ways to improve the service and reception, including the waiting area. If anyone has comments on the new telephone service, please inform the practice. The system of asking people about why they want to see a GP and where appropriate referring them to another professional or service has helped alleviate pressure on GP time.

8.ANY OTHER BUSINESS

There is a new parking consultation which could mean charges for parking on Burlington. Members may wish to check this out and respond.

NB: the proposals are on display in Buxton Library and comments can be emailed to: netmanadmin@derbyshire.gov.uk; it closes on 10 Feb 17.

9.DATE OF NEXT MEETING

FRIDAY 28 APRIL, 1.30, AT METHODIST CHURCH HALL