



## Notes of the Meeting – Thursday 25<sup>th</sup> April 2019

### 9.15 am – Pattern Hall

**Present:** Sandra Francis (SF) – Chair; Mike Chipman (MC); John Biles (JB); Terry Thornicroft (TT); Alan Orme (AO); Chris Harlow (CH); Chrissie Knight (CK); Shirley Polmounter (SP); Shirley Williams (SW); Ros Atkinson (RA); Margaret Phillips (MP); Lyn Whittington (LW); Amanda Jones (AJ); June Godfrey (JG).

**In attendance:** Anita Howard (AH) – SAHC – Note-taker.

**Apologies:** Dr A James

**1: Welcome:** SF opened the meeting and noted apologies from Dr James who is on call for Haematology today. Starting with update from managing partner as BS needs to attend another meeting after this.

**2: Update From Managing Partner:** BS apologised for not attending the last meeting as she had another meeting to attend. The new GP contract started in April and the way we deliver QOF (quality outcomes framework) changed dramatically. We did really well last year, with virtually every patient on long term medication or with long term conditions reviewed. Going forward the emphasis is on Hypertension so we will need a lot more patients to come in – we do now have 2 BP machines at Wheal Northey to enable patients to get their own BP checked. Patient prescribing safety is also a focus.

From the 1<sup>st</sup> of July practices will be moving to networks. These networks will be a group of practices with between 30 and 50 K patients. We will be applying to be a network of 1. This is about collaboration with other services, and building MDT teams in view of the shortage of Doctors nationally. There is a need to appoint a Clinical Director, and the partners decided that this should be Dr Stewart Smith. The networks will have responsibility for services such as extended hours. There will be additional resource in the first year for networks to employ a Pharmacist and Social Prescriber. It is additional, so will not fund what we have already got, so we will be getting a 3<sup>rd</sup> Pharmacist and extra social Prescriber. In year 2 there will be more money for ECPs (paramedics), Physios and Assistant Practitioners (advanced nurses). BS does not know how many networks there will be in Cornwall, but locally there will be us, the Newquay practices, 3 Harbours (Lostwithiel,

Fowey and Middleway), as well as The Clays, Brannel, Probus, Roseland and Mevagissey practices all joining to make one network. BS went on to say that the network model has largely been built on what we have done at SAHC – other practices in Cornwall are keen to visit to see what we are doing!

Within the practice the 2 mental health practitioners are working well and looking after acute on the day mental health issues which aids the GP workload. The plan is for them to do reviews of ongoing mental health patients as well. The new MSK physios are also working very well, and any patients with MSK problems will get advice from them in the first instance. Dr Fiona Hickey has returned from maternity leave and is now based at Park.

Haematology is now up and running on Wednesday and Thursday each week in the refurbished Crinnis Suite (formerly HFT Suite). This is a 4 chair unit offering blood transfusions and drug infusions to Headland Patients from RCHT. This ties in with the chemotherapy mobile unit being on site every Wednesday and helps local people get local treatment. A date will be arranged for the PPG to visit the Unit.

We now have Mr Coker, Consultant Ophthalmologist holding glaucoma clinics 2 days per week. The macular clinics, currently one day per week, will be holding additional Saturday sessions from May.

The telephone average waiting times are under 5 minutes, except on Mondays. On Maundy Thursday we had the equivalent of a week of phone calls in just one day.

There are plans for a reception re-design at Wheal Northey with additional desks and new carpet, which should be carried out shortly.

The partners have asked that the PPG fundraising focus could be for an Ultrasound machine. This would initially be for joint injections, then move on to other things as staff are trained. The cost for this would be around £20K and the partners would pay the balance at the end of the year, after any fundraising. The bladder scanner that the PPG raised funds for previously is used every day.

BS would like the help of the PPG to carry out a survey re weekend opening. BS & SF will organise some dates for this and let members know.

BS feels we are meeting the needs of the majority of our patients overall.

SP felt that we need some publicity about all the positive things happening. We still have a negative reputation locally – the local press do not appear to like good news stories! BS mentioned that we do need to get better at PR. Doctors have been speaking to patients who put negative/untrue comments on social media. CK mentioned the possibility of a poster campaign, ie brewery, Eden for some positive PR. SP also asked who chooses whether the glaucoma patients can attend WN? BS responded that this is an RCHT decision, but that patients can request to attend WN. SP also mentioned that she is setting up a memory café and wondered if we could suggest patients who may benefit from this; BS said that we can make the GPs aware that it is available, but we are unable to suggest patients.

AO asked about space at the practice for all the extra services. BS replied that we are just about managing, we are using rooms smarter, looking at the Doctors having a 3 session day, and working

on moving clinic days around etc. We have tried to put more clinics at Foxhole, but some patients are reluctant to go there. It is all being looked at.

JB asked if there was any improvement in abuse to the reception team, and BS responded that there is not. JB expressed that he feels this is disgusting. AO asked if they have a format/script to use in these instances, which they do have – he feels if staff are firm with these patients rather than trying to placate them, they would calm down. BS mentioned that we are training staff to deal with conflict. CH asked about recordings so that the interaction could be reviewed and the patient contacted by someone higher up with regard to their behaviour. Some general discussion followed about this.

BS left the meeting. SF will look at dates for Haematology visit as well as survey.

**3: Guest Speaker:** SF welcomed Andrea Melliush from the AHSN (Academic Health & Science Network) to the meeting, following up from her visit in November.

Andrea mentioned that there are now 13 case studies on the AHSN portal, including one on the PPG – Andrea encouraged members to log on and have a look at the St Austell pages as the portal has grown.

Andrea demonstrated a mobile cardiac monitor using a mobile phone app, the results of which can be emailed to the practice. Six of these have been given to the Hub but unfortunately there are no mobile phones available to use them with. CK felt that these would be incredible for patients with intermittent arrhythmia that is not always recorded on 24 hour tapes.

Andrea sang the praises of the PPG group and feels it is one of the best she has visited. She would like to film the group, and individual members, to show the rest of the country how a PPG should be run. Everyone present was happy to be filmed and Andrea will arrange a date with SF to return for this.

Discussion then moved on to how we could engage younger people. SF mentioned that we do have Plymouth University coming along to the next meeting. AO feels that perhaps sending a short video to schools and colleges would tempt people in? SP wondered if we could ask the college to send 2 students to attend – SF responded that Ben Mitchell from the CCG has been to the college and he is going back with SF to try to encourage students. AJ also thought that getting students on board would be a great idea.

Andrea suggested that the PPG could visit the AHSN offices in Exeter. SP asked for examples of what they do, and Andrea responded that they deal with national programmes, innovation, developing ideas. Andrea is funded by NHSE to work in the AHSN. TT wondered if she could video the office environment for those who would not want to take the trip and Andrea agreed to do this.

SF thanked Andrea for visiting again, and welcomed her to stay for the rest of the meeting.

**4: Notes of the Last Meeting:** Everyone had received the notes of the last meeting. SP mentioned that in AOB it was noted that issues raised at the last meeting should be a formal agenda item this time, but that it was not on the agenda. SP went on to say that she had received more than one adverse comment about a receptionist at Park and forgot to raise this with BS earlier. AH will mention this to BS and contact SP.

**5: Treasurers Report:** No change from the last meeting, balance remains £3306.22.

**6: Chair Update:** SF updated the members regarding the extra meeting that has been arranged for the 16<sup>th</sup> of May. Two people from Plymouth University will be coming along to talk about setting up crowd funding to get more funds. They also want to discuss digital matters such as helping people get online, introducing Tech Thursdays into the practice, also possible tech champions and linking local PPGs. SF feels that this is an exciting opportunity. This led onto discussions about the older generation who do not use computers.

**7: Any Other Business:**

- SP asked Andrea about the rise of online pharmacies and the demise of the high street ones. Andrea has filmed pharmacists recently for the online portal and feels that things are being done about this.

Date of Next Meeting: Thursday 16<sup>th</sup> May 2pm (Pattern Hall)