

Lion Health: PPG Meeting Minutes: Tuesday 6th February 2018

Attendees: Nigel Haydon, Yvonne Marshall, Lisa Thistleton, Robert Derricott, Les Sheard, Robert Jasper, Robert Taylor, Veronica Astley, Chris Hare, Tracey Williams (*Norton Medical Practice PM*), Nick Jackson (*Lion Health Ops Manager*), Dr V. Hobbs (*Lion Health GP Partner*).

Apologies: Nannette Hedley, Ross Morgan, Veronica Catherall.

	Agenda Item	Summary Of Discussion	Action
1	Apologies / Introductions	Introductions were made, we were also pleased to have Norton's PM Tracey, and two members of their panel (and hopefully now our panel); Yvonne and Chris, present.	N/A
2	Practice Update	<p>Update from Dr V. Hobbs</p> <p>Dr Hobbs discussed recent staffing changes. Including the employment of another ANP (<i>Andy Caddick</i>) to support our Long Term Conditions management programme. Our LTC team have working very well supporting our clinical staff since their appointment in April. LS commented on his positive experience of the service.</p> <p>There was also some discussion regarding the Multispecialty Community Provider (MCP) contract framework.</p> <p>New Process For Lunchtime Appointments</p> <p>RD mentioned some issues two parents he knew experienced at the practice.</p> <p>VH explained the new process, the Facebook post from 04/12/17 read...</p> <p><i>Due to patient feedback, and wanting to improve our patient services, we are changing the way we run the lunchtime surgery.</i></p>	

From Monday 4th December 2017 there will no longer be a 'sit and wait' style clinic operating at lunchtime. Instead, the practice will be releasing a limited number of timed appointments for those who would like same day review. This change will reduce a potentially long wait for patients during this time, and offer them a timed slot.

We thank patients for their patience and understanding and hope that these changes will make this session safer and more efficient more both clinical staff and patients.

LH.

RJ suggested the practice consider advertising future changes through the local press.

The Proposed Merge With Norton Medical Practice

Following the proposed merge we will be looking at a combined patient population of approximately 30,000.

Discussions were had regarding the current shortage of GPs; one of the factors taken into consideration when expanding our ANP team, and for the closure of NMP.

We as a practice are looking at phone systems we can utilise to free up staff time and make the process of booking appointments more positive for our patients.

RD mentioned an issue reported from RHH struggling to contact the practice, due to their using the appointments line.

Transport to LH was discussed, with YM discussing the shortfalls of the locally provided services (buses, ring and ride etc.). There was also comment that Margot James was looking into local facilities. LS referred to our work on the subject around the move to LH from Worcester Street. LS spent a lot of time and effort. RJ mentioned that the ambulance service offers transport services, although this does not apply to General Practice. Hopefully however, the potential merge will re-energise the case for better transport provision.

NJ to advise RHH of appropriate contact information.

NJ to contact Margot James to discuss, as haven't had any previous communication from her.

		<p>CH shared his thoughts on the need for proactivity to make the NMP patient welcome, particularly with the sharing of information regarding (amongst other things) making appointments, getting scripts, and offering reassurance RE: concerns regarding the continuity of GPs. Essentially a welcome pack of sorts.</p> <p>With regards to continuity, obviously with the size of LH and the number of clinical staff this isn't always easy. However, we pride ourselves on our record-keeping, and the positive regularly communication between our clinicians.</p> <p>NJ advised the group (<i>specifically the NMP patients</i>) that unfortunately one of the limitations of merging our practice books into one clinical system, is that NMP patients will need to re-register for online services (<i>for appt. booking, med requests etc.</i>). Once registered with new credentials full functionality will be returned.</p> <p>Feedback wasn't great regarding the communication of the proposed merge. Comments were made that the CCG communications team have not managed the process effectively.</p>	<p>NJ to share info with TW to provide to NMP patient at the appropriate time.</p> <p>TW to share CCG comms letter with NJ.</p>
3	<p><i>What Do We Want To Achieve In 2018?</i></p>	<p><i>Key Area: Prescriptions?</i></p> <p>We previously discussed the new processes for prescription of limited value. There has been no further comment/feedback so I NJ suggested we pick a subject to get our teeth into as a group.</p> <p><i>Group Membership</i></p> <p>Those present expressed a continued concern with the groups' demographic, and the fact that it isn't representative of the full spectrum of the patient population at LH.</p> <p>Using social media was suggested.</p> <p>TW mentioned her connection with OSH, and will pursue.</p>	<p>NJ to share Social Media links in email with minutes, and post RE: the PPG.</p> <p>TW to look at</p>

		LT suggested that we task all of our partners with the task of finding 1 person to join the group. Interesting idea.	contact with OSH. NJ to broach with VH, to discuss with the Partnership.
4	Review of November's Action Points	NJ advised that the waiting room display screens were now functional again. There were still some comments regarding the size of the text, which we will address.	NJ to advise SAs RE: text size on display screens.
5	P.O.P.s	NH briefly discussed the nature of the POPs meetings.	N/A
6	A.O.B.	Hygiene: Hand-gel was mentioned again by VA, VH to follow-up. RJ suggested brass door-handles; this is a change that we cannot accommodate. LS commented on a positive experience his wife had had with our Home-Visiting Nurse Rachel Higley.	To be organised.
7	Date Of Next Meeting	Tuesday 17th April 2018 – 5pm	N/A

