

St James Medical Practice
Patient Participation Group
Minutes of AGM
Wednesday 19th September 2018

1. Present: Theresa Banks (TB), Paula Bell (PB), Enid Bright (EB), Jane Chase (JC), Dr Irina Davis, Kathy Foley (KF), Jasmine Fulcher (JF), Ian Gutteridge (IG), Stella Gutteridge (SG), Penny Hipkin (PH), Marion Tyrrell (MT), Roy Tyrrell (RT), Margaret Worledge (MW)

2. Apologies: Pat Simpson, Anne Lemmon, Rachel Seakins, Derek and Joyce Hunter, Colin Johnston

3. Minutes of the 2017 AGM :

These were accepted as a true record (prop..JF, sec. PB). At this point, IG asked whether anyone wished to be minute taker. No-one offered so TB will continue in this role for the year, in the absence of DH, but she may not be able to attend all meetings due to other evening commitments so IG asked for members to consider offering to do the job occasionally. TB will not act as Secretary so she will send minutes to IG for distribution. All apologies and other administrative emails should be sent directly to IG.

4. Minutes of July Meeting (held on 1st August):

IG reviewed these and clarified a few points. These were accepted as a true record (prop. SG, sec. JC)

5. Matters Arising:

The chairman announced that Colin Johnston has become a virtual member as he is unable to attend meetings due to family commitments.

TB questioned the accuracy of the Health Monitor as IG had reported receiving some very inaccurate and very unhealthy results when he had used it on a visit to the surgery. It had recorded a grossly inaccurate height, abnormal BMI and blood pressure, which is a concern as these results are automatically uploaded to a patient's records.

However, this had not resulted in IG receiving a call from the surgery. ST was to have checked this out after the Committee meeting. KF said the equipment was provided by the CCG and she will check out whether it is now working properly. SG suggested the error might have been the result of a laser beam not recording the patient's height correctly but this would not account for an inaccurate BP. KF said it would be shut down if found to be inaccurate.

6. Election of Officers:

IG has not received any further nominations so the existing Chairman and Secretary will carry on in their roles. IG reminded members that the constitution had been changed in 2017 to allow this. Derek would have continued as secretary but, at present, is unable to do so. Penny, Paula, Enid and Theresa all agreed to continue on the Committee.

8. Treasurer's Report:

1/8 – 19/9/18: £31.60 was banked from book sales

Total of Reserve and Current Accounts at 19/9/18: £861.82

KF has audited and signed off the 2017 - 2018 annual accounts.

SG reviewed items. £284 was raised from Summer/Winter events and the annual book sales amounted to just over £351. There was a short discussion of the best way to use the money. SG said that the Committee felt the money should be used to provide extra, not every day, items. It might be best to wait until at least £1000 had been raised and then put up a poster announcing this. We will require a further £140 to achieve this but there are also general (insurance) expenses and NAPP subscription costs of £250 to be considered. SG has designed labels to put on materials provided by the PPG, to raise patient awareness of its work.

IG congratulated SG and KF for their efforts and for being able to audit accounts in time for the AGM.

9. Practice Update:

KF reported that the **Extended Access GP Hub** will not happen in this area so the practice will continue a 1 in 3 late night system with Southgates and the Terrington St John practices. No blood tests can be taken in the evening, however. IG asked why West Norfolk are unable to effect the Hub service and Dr Davis thought it might be because the practices are too spread out geographically. Smaller, more isolated, practices do not have to worry about budgets as they are able to dispense and, therefore, have no incentive to get involved in the Hub system.

The CQC inspection rated SJMP as 'Good in all areas' with a few small recommendations for improvement. There needs to be a tightening up on prescriptions and cervical screening rates were lower than the national average despite the practice doing everything in its power to encourage uptake. This may be due to demographics – it is possible the patient dynamics may not reflect the national profile. However, from now on, the practice will make further contact with those who have ignored the three invitations to screening. The practice was praised, particularly, for good teamwork, high staff morale, and for resolution of complaints. KF reported that there had been a massive amount of work done in preparation for the inspection.

An Atrial Fibrillation Pilot is taking place for 6 months. A device (Kardia Mobile ECG Recording) is linked to a mobile or tablet app which will record heart rate and indicate whether a patient has AF when the patient places their fingers on the device. Once AF is detected, the patient can be fast-tracked to a specialist.

TB asked whether any abnormal results will be double-checked initially to ensure that the device is working correctly and was assured this would be the case. IG wondered whether this could be extended so that patients could run their own checks after buying the devices for their own use.

This scheme is part of a need to develop a proactive, not reactive, NHS. Initially, two practices are participating but the scheme may be rolled out to others after the pilot. ST

has visited Litcham Health Service and was impressed by the methods used there to monitor patients.

The practice will need tablets for this to be used in surgeries and the PPG may be able to help with this. Any tablets bought could also be used for patient surveys. ST may get a free tablet from the franking machine company used by the practice.

Flu jabs are now available and two different vaccines are being used for over 65s and under 65s.

ST mentioned an app, in Committee last week, which works with Mjog and KF reported on this to members. PH said that she had problems with this app and had uninstalled it.

ST had passed on a request from Dr Sherwood asking whether PPG members would get involved in 'mystery shopper' exercise as there have been some problems recently with the telephone answering service and he required more definite data. KF thought it would be a good idea but 'shoppers' would need a question template. There was no discussion of how or when this might take place but IG said the PPG would support this and asked for volunteers. TB, PH, EB and JF all offered to participate.

KF is to discuss the proposition internally and liaise with IG to take the initiative further.

10. Queen Elizabeth Hospital – Governors Update:

PH reported on the recent CQC inspection which rated the QEH as 'Overall Inadequate'. The NHS improvement team will be working with the hospital from now on. PH said staff were generally upbeat because Care had been rated as Good but there were a number of serious shortcomings which had led to the overall rating.

PH gave a summary of the main findings. Emergency Care, Medical Care and Maternity Services were rated inadequate although positive features were identified in all three services. Surgery and End of Life Care were rated as 'requires improvement' and, again, key problems and good points were identified. The biggest problems for the hospital, impacting on the quality of all these services, were a serious shortage of qualified staff and hospital debt. PH discussed the composition of the Board and explained the role of the governors.

KF commented that the hospital Board have direct responsibility for the finances and the debt and that the politics between Primary and Secondary care interferes with patient care. PH responded that the hospital cannot run on the amounts of money allocated to it. TB pointed out that Primary Care is also running services which take money away from the hospitals.

The full report is available to view at www.gehkl.nhs.uk

11. 200 Club:

TB reported that she is in the process of setting up a Lloyds Bank Treasury Account for the 200 club and is awaiting documents from the bank. Two additional signatories are required and SG and ST have offered to do this. TB hopes to have the 200 Club running by Christmas.

12. AOB:

JF asked about the new build. KF said there is nothing particular happening at the moment. The architect and the surveyor are liaising with the Borough Council about who will be responsible for the building during construction.

KF thanked IG and SG for their hard work and for continuing with their PPG roles.

IG reported that the breathe easy group have a meeting at the Gaywood Church Rooms on 24th September. He also advised members that our GDPR procedure and guidelines had been signed off at the Committee meeting.

The meeting closed at 8.50pm

14. Date of Next Meeting: Dates have had to be changed as some committee members are away.

Committee Meeting	7 th November 2018
PPG meeting	28 th November 2018