

LEYBURN MEDICAL PRACTICE

PATIENT PARTICIPATION GROUP COMMITTEE

Minutes of Meeting held on 27 March 2019 at 7:30pm

Ground rules

- This meeting is not a forum for individual complaints and single issues.
- We advocate open and honest communication and challenge between individuals.
- We will be flexible, listen, ask for help and support each other.
- We will demonstrate a commitment to delivering results, as a group.
- All views are valid and will be listened to, but must be put through the Chair.
- The Committee will respect one another and behave accordingly - anyone who behaves rudely or tries to bully other members will be ejected from the meeting.
- No phones or other disruptions.
- We will start and finish on time and stick to the agenda.

Present: Nigel Watson (Chairman) (NW), June Stancombe (JS), Geoffrey Linehan (GL), David Bolam (DB), Sue Medley (SM), Eileen Clarkson (EC), Pat Lee (PL) and Tom Scriven (TS)

In Attendance: Stephen Brown (Practice Managing Partner) (SB)

1 Welcome and Apologies

NW welcomed everyone to the meeting.

2 Declarations of Interest

There were no declarations of interest.

3 Minutes of The Last Meeting, AGM and Matters Arising

The minutes of the last meeting were agreed as correct after noting that GL was in attendance at the meeting and that SM is only able to deal with Facebook on the PPG section of the website and that the practice website has to be updated by Louise.

4 Correspondence Received/Meetings Attended

GL and EC attended a meeting about the current situation at the Friarage. They noted that the hospital had been forced to react to the lack of anaesthetists. They need another eight anaesthetists and 4 critical care doctors. The operating theatres at Friarage need updating/replacement but would cost £20 million which is not available. To assist with transport issues an additional two ambulances will be funded. The downgrading of A&E although cited as temporary, this was due to lack of time to make them permanent as certain legal issues have to be dealt with first. The official consultation will take place after the local elections. There is a plan to

increase low risk elective surgery at the Friarage but it was noted that all colorectal surgery has already ceased as has abdominal hysterectomies. Clinical care following surgery at James Cook will take place at the Friarage. There are wards at the Friarage which are currently mothballed but more staff would be needed to reopen these wards. Resulting parking and transport issues were also noted.

Minor Injuries

SB said that Amanda Bloor had been forced into a decision about funding to avoid being put into special measures and that cutting the minor injuries service was the option selected to save funding. A special arrangement has been made for Central Dales and Reeth because they are more than 20 miles from the nearest urgent care centre of Northallerton but they have only been given funding on a retainer basis not a cost per patient. It is hoped that the planned intermediate care centre at Catterick will meet the need for minor injuries but that is still in the planning system. GL will be attending the scrutiny meeting on Friday of RDC. SB noted that information put on the practice Facebook page this week has already had 3000 hits (Leyburn) and 2000 (Harewood) and that the comments left made it clear that the patients understood that the ending of the minor injuries service was due to the CCG and not the practice.

No other correspondence had been received or meetings attended.

5 Integrated Care Systems

SB reported that there is a move underway to create a North Yorkshire ICS but it is unclear how this would work legally. The current situation of HRW being incorporated into North East and Cumbria is being made difficult due to many links and services with North Yorkshire. The original map will need some sort of legislation and will need to be dealt with quickly this year. The CCG will become a strategic commissioner. There is not sufficient funding for the current situation to continue. Primary Care Networks will be the building blocks of the ICS and will go live on 1 July 2019. All practices in Richmondshire will be part of a PCN and have been given until 15 May to sign up to this. Any new funding will go to the PCN's rather than the individual practices. Every PCN has to have a Clinical Director with funding for this position to cover one day a week, the Clinical Director has already been appointed – Richard James, who is a GP at Scorton. There is a long-term plan for consolidation of GP practices to cover between 30 – 50,000 patients. The Clinical Director will be an accountable person, accountable to both the CCG and practices. SB said that the situation is evolving rapidly with a transitional year of 2019/20. There is no anticipation of change to services currently provided however there will be funding for social prescribers, pharmacists, physiotherapists, physician associates and mental health staff. It was noted that only 70% funding is being made available for these services with the remaining 30% funding having to be found by practices. However, an additional pot of funding will be made available after five years which will be the equivalent of the 30% not funded currently. In response to a question

about the difference between the current Advanced Nurse Practitioners and the proposed physician associates, SB said that ANP's are able to prescribe from a limited amount of medication and physician associates are not able to prescribe. More information about these roles is available on the BMA website.

6 Raising Awareness

a Committee Membership

All members confirmed they were willing to stand for another year. NW had spoken to two potential new members who are willing to stand when vacancies arise. It was felt that a maximum of ten members should serve on the committee. It was noted that TS will be standing down in October when he goes to medical school.

b Rota

NW agreed to recirculate the rota. It was noted that the 'flu posters can be removed at the end of the month.

c Future speakers/member presentations

GL will ask Pete Summerfield to speak at a future meeting.

d Date of Open Evening and AGM

Publicity Apr-Jun

a Posters

GL has produced the poster and SM has sized it down for placing in Leyburn Life.

b Articles

TS and NW have already prepared an article for Leyburn Life next month and will produce another one for the May issue.

c Website

NW will liaise with Harriet about publicity for the website.

e Facebook Page on PPG website

SM reported a good reaction to date and will put up a poster about the AGM nearer the date.

- f Drop-in Sessions – choice of dates (times?)

NW will circulate a rota for staffing the planned sessions of Monday 17 June, Thursday 27 June, Thursday 5 September and Monday 9 September. Members were asked to let NW know any dates that they are not able to attend.

7 Monitoring Practice Performance

- a Pressure on GPs and their team and
- b Business Plan/discussion of local census and health data

SB reported that the 5-year plan has been completed in draft form. It is with the GP's and will then be discussed with staff before being shared with the PPG. Analysis of activity at Leyburn showed 48,000 appointments during the last year and 53,000 at Harewood. The Leyburn list size has grown by 200. The number of appointments per patient has increased by 20% during the last five years in Leyburn and at Harewood by 12%. There was a feeling that this increase may be partly due to the amount of chronic disease management and also may be that Qof may also drive the need for more appointments. It was noted that the Qof tick box system is being retired and the BP target is being changed to two measures for under and over 80's as from 1 April. There will be more quality indicators and palliative care measures which will be more clinically relevant. In response to a query about the NHS health check, SB responded that the invitation letters to all patients over 45 are still being issued on a five-year cycle but the practice does not have the capacity to follow up those patients who fail to respond. The current list size at Leyburn is 6036 and Harewood is 7676. In response to another query about frequent flier patients, SB said that this was not currently a problem.

8 Other Practice/CCG/Heartbeat Alliance Update and News

- a Practice extension

No updates available.

- b Other

SB is interviewing for a new assistant practice manager at Harewood.

9 Date of Next Meeting

The date of the next meeting will be Wednesday 8 May 2019, JS will not be present and TS will take the minutes.