

**The Family Practice Western College
Patient Participation Group**

Resume of the Meeting Held 11.06.18

Present:

Keith Minty (KM)	Jill White Chair (JW)
Denise Williams (DW)	Penny Dobson (PD)
Ann Nicholls (AN)	Ruth Baber (RB)
Ilfra Jarman (IJ)	John Plumb (JP)
Jim Jarman (JJ)	Georges Ware (GW)
Ann Light (AL)	
Guest Speakers: Sylvia Carpenter and Penny Wells, RSVP (SC and PW)	

Apologies:

Ian Goodenough	
David Shelton	
Catherine Eva	

Retired and Senior Volunteer Programme - RSVP

SC and PW gave an overview of the work of RSVP. They work in 26 GP practices across the old Avon area, recruiting volunteers aged 50+ to assist, either as drivers taking people to surgery or hospital appointments, or befriending people who are lonely or isolated. KM and DW confirmed that they would do their best to assist with a recruitment campaign and SC asked PPG members if they would spread the word about RSVP. For more information please see: <http://rsvp-west.org.uk/>

Retirement of Keith Minty

KM's last day with the practice is Friday, 29 June 2018. A new Business Manager, Suzanne Priest, has been appointed and starts on 16 July. DW will work full time W/C 2 and 9 July. Suzanne will spend W/C 25 June at the practice for a handover from KM. Although Suzanne has no previous experience in primary care, she is a management accountant and has worked for NHS England, the Meteorological Office and is currently working at Cotham School. Suzanne will attend the next PPG meeting.

Confidentiality Agreement

Following a short discussion regarding the need for a Patient Participation Group (PPG) Confidentiality Agreement, the group voted unanimously against signing one.

Practice Update

Demand continues to be heavy for appointments and we continue to look at ways in which we can work differently to cope with this. Recently we have introduced an enhanced texting service, which is much easier and writes back to the clinical system.

Dr Boon and Emma Winton, Nurse Manager are training to fit coils to increase capacity – there has been ever increasing demand following curtailment of services at Central Health Clinic.

The 2018-2019 contract gave a £2.57 increase in funding per patient, but we do not get the full benefit due to the waiting applied to our demographics.

The local NHS England team (Bristol, North Somerset and South Gloucestershire) has reviewed all local funding following the merger of the three Clinical Commissioning Groups. The initial report will be released on 29.06.18, but it looks like one of the services from which we made £40K will be withdrawn or substantially reduced.

There have been no significant changes to the Quality and Outcome Framework. The value per point increased from 171.20 – 179.26, but again is weighted by our prevalence data.

The Clinical Commissioning Group is renewing the contract for Improved Access: they are looking for the North & West locality to provide cover from 8am to 8pm, 364 days per year. We are trying to figure out how this can be done with the existing workforce, but we have been promised that funding will be recurring.

The trainers' re-evaluation went well.

The Care Quality Commission is in the area again.

Election of Chairperson

Jill White agreed to continue as Chairperson, with the support of Penny Dobson, and the group unanimously voted in favour of her appointment. Keith asked Jill to let the practice know if she finds the role too demanding.

Frailty Update

As part of the Bristol Primary Care Agreement we agreed we would advise our PPG about the changes to contract around Frailty. The following is brief, but reflects our change in clinical practice:

- Frailty is now better understood to be a syndrome: Frailty is a loss of resilience that means people living with frailty do not bounce back quickly after a physical or mental illness, an accident or other stressful event. As the population of England ages the prevalence and impact of frailty is likely to increase.
- Distinguishing older people living with frailty from those who remain fit is of key importance to ensure that fit people are supported to remain fit while those living with established frailty are supported on the basis of their needs.
- NHS England added a requirement for General practice to respond positively to frailty by adding it to the GP contract 17/18.
- Early identification aids targeted support for older people living with frailty to help them stay well for as long as possible.
- We are being tasked with assessing degree of frailty in our over 65 year olds using clinical tools and targeting a small number of key interventions in those with severe frailty.
- Main areas we are being asked to focus on are:
 - Falls assessment (and referral to falls services of those at high risk)
 - Medicines review (to reduce medication related side effects/complications and to rationalise those with polypharmacy)
- For those with the most severe frailty (usually with 24 hour care) then consent to share their clinical information across agencies and encouragement to embark on end of life discussions.
- We have been doing this:
 - Opportunistically when we see patients in surgery
 - Routinely when we did our winter pressure nursing home reviews
 - Trained our Health Care Assistant to undertake these assessments
 - Developed a template with our federation to record consistent information and prompt response from Primary Care

General Data Protection Regulation - GDPR

Keith gave an overview of the impact on the practice of the new General Data Protection Regulation legislation which became effective on 25.05.18 and applies to General Practice.

We have issued a new Privacy Notice extending to 8 pages, which will need regular amendments to keep it current. It can be viewed on our website and includes a paragraph about use of mobile phone numbers.

The practice is sharing a Data Protection Officer (DPO), appointed by the Local Medical Committee, with a number of other practices at a cost of £2700 per annum. The DPO will visit the practice in the coming months to ensure we are GDPR compliant.

As this is European Economic Community legislation, no one is certain what will happen, but breaches of the legislation are likely to result in much heavier fines than under the Data Protection Act.

The practice is no longer able to charge for providing copies of medical records to patients and solicitors, although it will be possible to charge where a request is particularly onerous. Insurance reports will still be chargeable.

Keith confirmed that the practice does not release any information to employers without the patient's consent. We also always seek patient consent when the police request information.

GP Update

Dr Smyk talked about self-care and encouraging patients to take ownership of their health problems, finding their own solutions. He added that the website is an under-utilised resource which could be used to a greater extent for self-care. This is work in progress for the practice, so watch this space. Dr Smyk also touched on texting results which the practice is now doing successfully.

Patient Transport Service

Keith informed the group that the Monday lunch club is desperate for volunteer drivers in the 55-70 age bracket and asked the group if they knew of anyone.

Post meeting note – there has been an excellent response to a text message to patients in this age group – approximately 20 people have come forward to help.

Next Meeting

Monday 3 September 2018 - 7pm at The Family Practice.