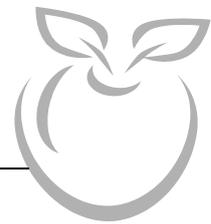


Chapelgreen Practice



Patient Participation Group (PPG) Meeting 11th November, 2014

Venue: Burncross Surgery, Time 6pm

Attendees:	Patient Group	Practice	
	Richard Hemper	Dr W E Warren	GP Partner
	Evelyn Hemper	Blake Foster	Practice Manager
	Dennis Farnsworth	Kathy Wilson	Deputy Manager
	Derek Broomhead		
	Andrea Jackson		
	Judith Keyworth	Guest Speaker – Dr Trish Edney	
	Chris De-bruyn		
	Clifford Whitehead		

Apologies: Ms. Edley, Mr Penny, Ms Macbryde, Ms Hattersley

All attendees were given an agenda for the evening. Blake Foster opened the meeting by welcoming everyone to the Patient Participation Group and thanked everyone for attending.

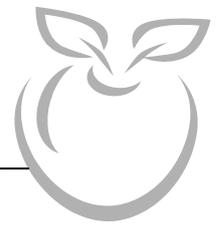
Blake went over the agenda for the evening and explained that our guest speaker Dr Trish Edney was unfortunately running late. Blake then proceeded to go over the minutes from the previous meeting held on the 9th September, at High Green.

The group were then shown the Organisation Structure (please see attached document), many of the attendees were surprised at the amount of attached staff that currently use Chapelgreen Practice and who work closely with us monitoring our patients health, most recently the AAA (Abdominal Aortic Aneurysm) team who joined us approximately 12 months ago.

At this point Dr. Trish Edney from the Clinical Commissioning Group (CCG)

Dr Edney apologised to the meeting for being late. She went on to explain the changes that are happening/happened within the NHS, and how it is more politically led, recognising how patients are now having to wait longer to get an appointment with their GP, and how the NHS and it's goals are used at times when general elections are drawing near and how promise of changes are introduced to hopefully gain votes, many of our Patient Group signed the petition recently supporting their GP and Trish thanked the group for taking the need to keep the NHS.

Trish explained a little about the background of the localities which provide care, originally there were the North Primary Care Group – this often became confusing for invoicing, due to the number of localities Hallam & South, West and Central areas too, so it became more sensible to group areas closer together, the current North area covers 22 practices from



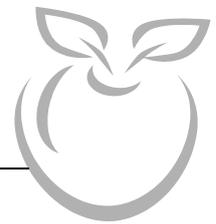
Pittsmoor/Burngreave – Chapeltown, this also enables practices to support each other in commissioning services.

Trish went on to provide information of what happens currently, where by managers sit together to bid for extra money to provide the services we have, mainly the bulk of money is given to the hospitals to provide services such as A&E. Trish then pointed out that patients are valuable and each has an invisible £ sign which grows with age, and medical conditions, and as the population is now living longer the cost of keeping anyone over 75 increases dramatically depending on their medical condition, this is why the NHS is investing in outside organisations to try and manage costs more effectively, for example looking at costs of using Ambulances for transport to out- patients, the CCG realised that this was not cost effective, so out sourced this to enable savings and keeping ambulances for 999 calls only.

A question was raised asking “how do you keep hospitals to budget?”, Trish explained that in Sheffield we have an excellent team of managers who frequently look at spending costs, Trish also asked if anyone could recall a few years ago how Sheffield were at crisis point and a specialist team had to be called in to help manage the financial side, and certain services were withdrawn in particular on this occasion it was Orthopaedic referrals, however, this is something that Sheffield has not had to do for a long time as the CCG is managing budgets well.

Trish informed the meeting that any money saved by the CCG at the end of a financial year has to be returned back to the government, a question was raised “are we spending too much on managers in this area?”- Trish reassured the group that the management side is very small and reiterated that a close eye is kept on all contracts, looking at variations, and actively managing the budget. Trish also mentioned how variances happen for example due to Sheffield having the Teaching Hospitals this requires more money, than say for example Doncaster, and due to this Sheffield is always on the “breadline”. However if a patient is referred to Sheffield Teaching Hospitals from Hull for specialised services, such as Cancer Care, or Neurology, then an invoice is raised and sent to that organisation, so Sheffield is not funding other areas for using our services.

Trish again mentioned how Sheffield GP surgeries get little money for the service that they provide, and how GP practices are now having more attached services like the triple AAAs, to enable patients to stay out of hospitals, and it is this that the CCG are trying to invest in, but by doing this GPs require more doctors and more nurses, currently there is a £200,000 slippage which she had discussed earlier today to try and look at projects to provide better services, as this money if not re distributed before March 2015 will be returned to the government. Mr. Whitehead at this point thanked the additional services for providing excellent continuing care for his wife which was the Active Recovery Team, Trish explained that this is another area that they have developed in order to encourage patients to rehabilitate at home, as hospitals are renowned for sometimes causing additional infections.



This area also is a way of saving money, and CCG want to provide money from the hospitals budgets to fund back to the community.

Trish again mentioned how the Government may want to change the NHS Policy's but hopes that they will appreciate how less personal it has become, once upon a time a GP when referring to a Consultant was able to make the letter personal, whereas now it has become Dear Colleague – Trish feels that we are now able to talk to each other and that Consultants are listening, and do want to return to working closely with GPs and re connect with consultants.

Trish closed her presentation by using an example of Hospital v GP costs, basically if a patient has a cut on their arm and attends A&E, the NGH will raise an invoice to be paid £80.00 – just for that one visit, GPs, for each patient they have on their records are paid an income of £70 a year – Many of the group were astounded by this figure.

Blake and the Group thanked Trish for attending and giving an insight into the CCG.

Blake then returned to the Agenda, and asked if any member of the group would like to volunteer to chair the next meeting – both Ann De-bruyn and Derek Broomhead put their names forward working jointly together, Blake explained that we will contact them to discuss the next meeting date dependent on the weather as this will be January at High Green.

Blake then introduced the new Friends and Family Test which NHS England has introduced from December 2014 and made the first question compulsory to ask whether or not patients would recommend the practice to friends and family – any other question can be set by ourselves, and changed at any time. The group were all given a copy of the questionnaire to complete and informed that these can be found on the website and returned to the practice for submission to NHS England.

Finally Blake thanked everyone for attending.

Minutes by Kathy Wilson