

# Kelsall PPG Meeting

Thursday 3<sup>rd</sup> October 2019

Kelsall Community Centre

## Minutes

**Present:** Humphrey Claxton (Chair), Caroline Stein (Vice-Chair and acting Secretary), Dr Claire Baker, Julie Johnson, Alan Bottomley, Jen Bottomley, Nick Kuszniir, Fiona Smith, Rena Gardner, Arthur Wycherley, Ann Parsons

**Apologies:** Michele Grant (Secretary),

### **Minutes of the last meeting**

Agreed

### **Matters arising from the Minutes**

No progress has been made with contacting the Beer Festival organiser.

**Action:** Arthur to get in contact as soon as possible.

### **Update on the Medical Centre**

Work has not yet started but Castlemead need to start very soon as they are contracted to complete the residential units, which have been pre-sold to Sanctuary, by the end of 2020. Work must start by Nov 2019.

A recent meeting with Clinical Commissioning Group clarified that the short fall in the rentable value of the Medical Centre is now only £4600 each year, this is a much smaller figure than originally thought. This amount will not be a problem when the Tarporley satellite practice moves into the new building.

The highways issue concerning the entrance to the site has now been resolved. Clair Deruty representing the Parish council has been very supportive. The only outstanding issue is the lighting and the impact on the badgers.

The lease agreements with Assura are not yet fully finalized. The Wellbeing hub will be an integrated part of the Medical Centre so an arrangement needs to be made with Assura and the Medical Centre. The Trustees have requested an urgent meeting with the both Partners of the Medical Centre to discuss the lease situation. The Trustees need assurance that the Hub and Medical Centre are working together. Motivation for fundraising has dipped due to exhaustion after all the hard work over recent months to reach our first target. There are three events already planned for 2019 but until all the necessary agreements are in place between Assura and the Medical Centre the next big initiative will not be launched.

The next big initiative is the sale of tiles The group was shown the tiles with personalized writing that will make up the colourful internal walls within the Hub. The group liked the tiles.

**Action** Dr Baker to find suitable dates for a meeting with the Trustees

### **Patient Survey**

This only gives a small snap shot of the practice patients (244 surveyed with 126 responses) and compares them only with our immediate neighboring medical practices. Dr Baker explained that the results were reasonable considering that the practice has only 23% of the space it requires to operate successfully. All the GPs are part-time and if a medical emergency occurs in the practice the patient has to stay in one of the clinical rooms until the emergency services arrive, this results in waiting times for the other patients increasing significantly. The staff has to book time slots to work at a desk for their admin commitments. In contrast Dr Adey's practice in Tarporley has 8 clinical rooms for 5,600 patients. All these facts prove that Kelsall needs a much bigger practice to provide enough space to make it safe.

However, when we compare our figures with the national average we are inline or better. For example: 92% reported that they can get through on the phone to our practice but the national average is only 62%. Clinically we were above the national average, scoring well on the amount of time given to patients and mental health advice. The areas we scored less than our neighboring practices were all due to the lack of space in the practice.

In the future the PPG will organise it's own patient survey, which will have a much larger percentage of responses and be more meaningful.

## **Primary Care Network**

Dr Adey is the lead doctor for the Rural Alliance. Funding is about £1.50 per patient. By employing other health care professionals for the Alliance this will release GPs to do the more specialist jobs. The primary Care network has a 5-year funding plan and we will employ more auxiliaries, fewer GPs and have more social prescribing. It is appreciated that this may upset some patients but this will be the model moving forward across the NHS.

We already have Physio First. We have just started to share a Wellbeing worker who will take on social prescribing. A link-worker will coordinate with other organisations for example Health Box who provide all sorts of activities such as strength and balance classes. The Alliance hopes to employ a Pharmacist next year who will undertake a medication review for patients, freeing up a huge amount of GP time. A Mental Health Professional would also be a very valuable asset to the Alliance, in the future they hope to employ one.

It was thought that perhaps the village pharmacist could be better utilised for simple ailments by providing better sign posting. PPG open days would be good for improving communication with the patients but it was felt that we are not big enough yet. Humphrey updated the PPG chairs meeting about our fundraising activities and this was met with great enthusiasm.

## **Marketing and Promotion**

Thanks to Nick the PPG Website is working well, he was asked about the number of visits to the site but he was unsure. Social Media has been quiet over the summer months but we know it needs improving and once the next big initiative gets going and the building work starts this will happen. We hope to eventually have a separate Wellbeing Hub website. Facebook could direct interested parties directly to this new web site and we may be able to gain some revenue through advertising.

Kadras has been very supportive and over the last year every issue has had an article about the Hub project, Medical Centre, fundraising or the NHS. We hope to continue to provide articles in every issue and use this as our Newsletter.

## **Friends and Family**

Once again there was positive feedback last month with 30 responses of which 93% would recommend the practice.

Dr Baker reported that the three different flu vaccinations are available, over 65, under 65 and children. There are no shortages reported so far. The older age group could also have shingles and pneumonia vaccines at the same time.

**Date of next meeting**

Next Meeting: **Tuesday 10 December** at the Community Centre. The following meeting is Thursday **30 January 2020**

**Action** : Michele to book community Centre for the Thursday 30 January meeting

There being no other business the meeting closed at 19.00