

Barnabas PPG

From: Barnabas PPG <barnabas.ppg@gmail.com>
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To All Barnabas PPG Members ...
[Printed copies to those PPG members without email]

[If you can't read any of the attached documents, or want printed copies of anything mentioned, please contact me and I'll try to send you a copy.]

Welcome to the November bulletin for Barnabas PPG members.

PPG Meeting, Monday 14 November (AGM) – Agenda

Our Annual General Meeting is on Monday 14 November, 1800 hrs at the Medical Centre. Please make an effort to attend.

The meeting agenda will be:

1. Introductions & Apologies
2. Approve Minutes of September Meeting [attached]
3. Receive Chairman's Annual Report [attached]
4. Election of Chairman (for next 2 years)
5. 2017 Meeting Dates
6. Projects Update
7. 2017-18 Priorities: Introduction
8. Share & Exchange
9. Practice Updates
10. Other PPG Updates
11. Other Matters Arising & AOB

Chairman's Annual Report

A copy of my annual report of our activities is attached and we will discuss this at the AGM.

2017 Meeting Dates

As you will see we need to decide on meeting dates for next year, and we will do this at the AGM.

Meetings are currently every two months, alternating between Monday early evenings and Tuesday early afternoon – the intention being to allow as many people as possible to attend at least some meetings.

If you have any strong feelings about when we should (or should not) hold meetings and you can't be at the AGM, please let me know as I want to ensure your views get heard. Also suggestions of possible venues close to the Medical Centre are always useful (and no, unfortunately the Greenwood isn't an option, we've already talked to them!).

2017-18 PPG Priorities

I also want that we start thinking about what our priorities are for 2017-18 and beyond. What do we want to achieve and what do we want of the Practice? I intend to briefly introduce the topic at the AGM so that we can have real debate at our January meeting. I will write more about this next month, but for now please dust off your thinking caps.

And now for some more general news ...

Ealing Health Profile

Public Health England have recently published "health profiles" for every local authority in the country. If you want to know how Ealing stacks up against the country as a whole, and you have a head for data, you can find our local report at <http://fingertipsreports.phe.org.uk/health-profiles/2016/e09000009.pdf> – it is a dense four pages hence I've not attached it here (but get in touch if you need a copy). My overall assessment would be that considering Ealing has a higher level of deprivation than the national average our health outcomes are relatively good although there are some notable inequalities.

Do Receptionists put People off Seeing a GP?

It is interesting that following Angela's talk about the role of Reception at our September meeting, Cancer Research UK have found in a [survey](#) that the most commonly perceived barriers to seeing a GP were:

- finding it difficult to get an appointment with a particular doctor : 42 per cent
- finding it difficult to get an appointment at a convenient time : 42 per cent

- disliking having to talk to Receptionists about symptoms : 40 percent.

I know our Reception team make things as easy as possible but getting some clues what is wrong is needed to make sure you see the right clinician with the right degree of urgency. Nonetheless I do know that many of our patients also dislike having to explain themselves to Reception. How can we make this less intrusive for everyone?

Government Plans for Community Pharmacies

You may have seen in the news that the government has plans to “modernise” the community pharmacy service. However as this seems to be being proposed using only the existing budget it is not clear what is going to be done or how it will affect any of us. There is the usual government press release type spin at <https://www.gov.uk/government/news/new-plans-to-modernise-community-pharmacies>.

Public Engagement and the NHS

We all like to be consulted on what services we want and how they should look, and the NHS is mandated to engage with its users to test out new proposals. This is usually done at a combination of open meetings and discussion with representative groups like Healthwatch and other community organisations. As Healthwatch England point out (see <http://www.healthwatch.co.uk/news/fear-public-engagement-holding-nhs-back>):

When professionals and policy makers sit down to talk about how things might be done differently there is often a strong sense of fear that whatever they propose they will face an army of activists campaigning to stop them. This fear can then translate into people being brought in only at the very end of the process to simply ‘rubber stamp’ over-simplified plans. Those affected are left with little understanding of the reasons for change, unclear as to how the plans have been put together and feeling ignored. Understandably this fuels the fires of opposition, but it also means the NHS misses out on a golden opportunity to use feedback to make the right decisions first time. Ultimately it creates a vicious circle where change is often a slow and needlessly painful process that leaves communities feeling betrayed and creating unnecessary barriers to further change in the future.

However it needn’t, and shouldn’t, be like this. Most people do understand the pressures on the NHS and, if they are explained clearly and openly, will engage constructively with plans for change. Yes, that might take a bit more effort (from all sides) but if we are to move forward, NHS management, civil servants and politicians need to understand this and not try to enforce unrealistic constraints and deadlines. And the NHS needs to listen to realistic comments and suggestions from patients. Equally we – patients, local politicians and community groups – need to think clearly about what is being proposed, and why, and listen and respond in a measured and considered way.

Understanding the NHS

I know I’ve told you about this before but a reminder doesn’t hurt. The King’s Fund have a good 6 minute video on YouTube which explains (give or take a bit) how the NHS is currently put together. You can find the video at <https://www.youtube.com/watch?v=8CSp6HsQVtw> if you want a refresher.

NAPP eBulletin

Finally, the latest eBulletin from NAPP is attached. This month’s issue contains lots of good stuff, some of which I’ve covered above.

More next month, but meanwhile hopefully I’ll see you at the AGM.

Keith

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