

**Minutes of the Patient Participation Group Meeting**  
**Wednesday 5th April 2017**

**Present:** Sue Ashton, Michael Reilly, Debbie Swain and Kathryn Clark.

**Visitors:** Karen Sandy, Diane Carter and Julie Walker

**Apologies:** David Green and Ernie Hunter

Local Partnerships attended to present a presentation on 'PRISM' and what this means for patient care.

Prism stands for - Profiling Risk, Integrating Care, Self-Management and is also sometimes known as the Integrated Care Team.

The team is to provide better care by linking together existing services.

They are:

- A division of Nottinghamshire healthcare NHS foundation trust.
- Delivering community, physical and mental health services to the people of mid Nottinghamshire.
- Work in partnership with GP practices and Newark and Sherwood Clinical Commissioning Group to design and deliver services to the people of Newark.

By having all of these areas working together it is hoped to cut hospital admissions and the demand on EMAS (East Midlands Ambulance Service).

Before the team was set up the area was profiled and was found to have:

- A large elderly and ageing population
- Health problems from a historic mining community
- Social care problems; families no-longer all live as close to each other as they did historically so elderly and sick people need outside help with day to day issues
- A lot of rural communities.

The plan was set up to join together care services (integrate) so in effect people with multiple conditions get joined up care as the different 'teams' can liaise with each other.

The 'core' team includes - GP's, social workers, community matrons, community nurses, health care assistants, self-care advisors, specialists in copd (chronic obstructive pulmonary disease), diabetes and heart failure.

The 'extended' team includes - Intermediate care, community pharmacies, continence advisors, tissue viability specialists, dietetics, podiatry, falls team, medicines management and voluntary services.

These teams link with out of hours and EMAS supporting people at home.

This innovation is not just about financial efficiency, but mainly to provide better care to support patients.

In the future the GP will always remain central to co-ordinating patient care as they are usually the initial person to come into contact with a patient.

It is hoped to support more people with complex needs to remain in their own homes, the team is continually evolving in response to changes in population needs.

The team ideally would like to be proactive in helping people by looking at certain registers of people with conditions which may need additional help and care. This brings up the issue of sharing information as the surgery needs patient consent to share information with other care givers.

The team have asked for any patient feedback where people have received help from 'prism' good or bad so that they can praise those involved or learn from any points made.

More information about services can be found on the 'mid-notts better together' website.

After our visitors had left we proceeded with the rest of the meeting.

### **Matters arising**

At our last meeting David told us about a meeting which he had had with the new chairman of the SRG (stakeholder reference group). We have now been made aware that he has resigned.

### **AGM update**

Just to update, the date for this will be 13<sup>th</sup> June and it will be held at Lombard Medical Centre at 6.30pm. Posters will be placed in the surgery and on the website. Patients will be asked to tell us if they intend to come so we can be sure we have sufficient seating.

### **Contacting patients using e-mails**

The surgery are already asking more patients if they wish to receive SMS text reminders and are obtaining mobile numbers for this. They will now start asking for more email addresses and will create a form for patients to fill in to see if they are happy to receive intermittent communications.

### **Annual survey of patients**

A copy of this is going to be made available on the surgery website now that the figures have been reported to the GP's. It will also go up on our notice board.

### **Notice board**

We will put up some more application forms to join our group and also a mission statement detailing what we do.

### **Any other business**

Sue is going to email all of our virtual group members with a link to the surgery website once the survey results have been loaded.