

Minutes Directors Meeting Amber Valley Health 20/8/18

Attendees: Kaysia, Anne, Nic, Jane

1. Review action points from last meeting:
 - a. Practice has permission for a dummy clinical code for pathology, they will let us know when this is available.
 - b. Discussed malpractice insurance, will ask **Cheryl to pay invoice**.
 - c. Anne has produced some criteria to audit consultations and looking at initial DHU/NEMS approach feel 3 consultations/3m/clinician is sensible. Will be looking at data entry and clarity of notes, not clinically assessing the notes. Needs a bit of further work and instruction cards for clinicians in hub. **Anne/Jane will produce for Cheryl**.
 - d. Discussed the format of patient input at e.g. organisational group meeting. Directors feel this will become more apparent if/when this meeting develops into more of an information giving format at the start, agree patient perspective/input could be useful for certain things.
 - e. Kaysia not heard from CQC yet, waiting for response before emailing others to change statement of purpose. **Kaysia will chase**.
2. IT Update:
 - a. Seems EMIS in now in Jessops, not clear that TPP has been installed in EMIS practices yet. Need to chase David Hill about this. **Cheryl informed**.
 - b. TPP have created/completed GP hub setup, need to check Cheryl's access and whether all now in place to get rota on. **Cheryl to check**.
 - c. Need to make sure all practice staff trained about how to use/book onto GP hub module. **Cheryl again...**
 - d. We should be able to set up NHS.net emails for the hub now we have ODS from NHS digital – Cheryl is the lead admin on these forms, can we get ambervalleyhealth@nhs.net set up? **Cheryl to check with IT**.
3. Bank account:
 - a. All paperwork done our end, waiting for bank to review. Nic is now primary contact, 3-5 working days, so should hear by the end of the week. **Nic will chase end of the week for update**.
 - b. All directors have seen and read the mandates on the terms and conditions, all agree with the signing criteria (2 signatures, unlimited amount).
4. Locks at Church Farm:

- a. Discussed that this ideally should have been raised as part of the SLA agreement/discussions and now an additional unexpected cost. Discussion around the need to help get the service running, setting of precedent that extra costs can be passed our way and principle of who should be paying. Agree that AVH will pay cost.
Nic to inform.

5. Cytology:

- a. Not sure why we can't have a hub access to open exeter that can see all 9 practice patients. This is probably worth chasing up to see if possible.
- b. Agree that need a back-up in case patients arrive without paper copy – if not able to access in hub, can email as pdf for printing on arrival. Worst case can do smear, hand write details and then get form from practice the next day/Monday.
Jane/Cheryl to create plan and backup.

6. Mobile phone:

- a. Waiting for bank account in case needs to be set up with contract. Agree get handset separately and pay as you go sim for first month. Can then transfer to contract if needed. **Jane will source/get**

7. DNAs:

- a. Discussed the need to follow up DNA appointments. Agree this is sensible as will give information to AVH about why not attended.
- b. Staff to get text reminder about shift next day, patients not to get a text reminder.
- c. Need to block the mobile number on the handsets/simcard prior to first use as do not want the mobile number available to non-staff. **Jane to check phones on arrival**

8. Working Group Update:

- a. Chaperone policy in place, all receptionists have been trained.
- b. Need to check safeguarding policy in place for hub, who to contact and how. **Jane will check and adapt practice policy if needed**
- c. Name badges, Nic feels need to have some way of allowing patients to clearly identify clinician seen. Agree that name badges expensive if clinician only attending one shift. Suggestion of "hello my name is..." stickers/wipeable name badges for use in the hub. Consider more permanent name badges for staff doing more shifts. **Jane to see if can source**
- d. Discussion around rush to start and clinicians feeling there has been a lack of clear system and AVH training. Reception staff to get on site training from Managers. Agree clinicians need time in 1st shift to ensure able to use system in our way and AVH need to promote hub working as stress free and enjoyable. Agree 2 appts in 1st

shift per clinician to allow for adjustment and training. **Nic will discuss with Cheryl to implement**

- e. Swabs/smears at weekend can all wait until Monday for collection. This has been checked with the lab, need to update this in handbook for clinicians. **Nic to review hand book.**

9. Diabetes:

- a. Agree this would be sensible to do through AVH. **Anne to discuss with Justine** to check ok. **Place leads to finalise proposal** and send through to CCG.

10. AOB:

- a. Discussed Nic being place lead for AVN alongside Kaysia, fits with work being done anyway and will make things easier logistically on who needs to be in email discussions. Nic agrees. **Kaysia to email Emma to inform.**
- b. Discussed current directorships and Nic asked about date set for review as unable to find in previous organisation group minutes. If 3 months – that is now. Group agree that timeframe was most likely 1yr. **Jane will check her minutes** to see if written down for discussion. Agree no change needed to director group at the moment but potential interested parties discussed, including the possibility of non-executive director (PM).

Proposed date for next meeting: Tuesday 11th September

Actions:

Who	What	When
Cheryl	Malpractice insurance invoice needs paying	24 th August
Anne/Jane	Create “crib sheet” for lamination to go into GP/nurse boxes to explain data entry requirements.	29 th August
Kaysia	Chase CQC for written confirmation about service we are going to provide.	1 st September
Cheryl	Check TPP installation in EMIS practices happening.	24 th August
Cheryl	Add rota to GP hub and aim for booking of appointments by 24 th August	24 th August
Cheryl	Set up email if possible.	1st September

Nic	Email to say AVH will pay for locks	24 th August
Jane/Cheryl	To create plan for smear forms and back up plan for just in case.	1 st September
Jane	Buy 2 phones and PAYG sim cards with monthly PAYG plan that has adequate text/minutes.	30 th August
Jane	Block mobile phone number	30 th August
Jane	Check safeguarding policy for hub and create/adapt if needed	1 st September
Jane	Source "wipeable name badges" and order if found.	1 st September
Nic	Discuss in hub training for clinicians with Cheryl	22 nd August
Nic	Review hand book and update as needed	30 th August
Anne	Check if AVH managing diabetes money with Justine	24 th August
Nic/Kaysia/Anne/Justine	Liaise with CCG to complete diabetes proposal	30 th August
Kaysia	Email Emma P to inform about place lead changes.	22 nd August
Jane	Check if information on duration of initial directorship in your minutes, feed back to the group	Next meeting.