

Patient Participation Group Meeting

10th November 2015

Present: (Patient) Elizabeth Cole, Jean Burgess, Brian Burgess, Kate Holley, Jim Malloch, John England, Nicola Richardson, John Rose, Doug Vince (Practice) Tony Watts, Adrian Down, Simon Robinson, Boyd Gilmore

Apologies: David Ellis, Neil Fritzsche

Conflict of interest: Doug Vince, reminded all that his wife works for the practice as a receptionist.

Minutes: Minutes to previous meeting of 16/09/15 agreed and approved for publication to website.

Matters Arising: District Nursing team now delivering an effective service, still not entirely there but heading in the right direction, input from Elizabeth Cole to represent patients was invaluable to support the challenge the Practice placed to LCHS. DN team have asked to if they can have input into an update in the next edition of the newsletter to show how things are moving forwards. Friends & Family feedback very positive again. Patients have asked for credit cards to pay for prescription charges. Unfortunately due to the cost of providing this it is not currently possible. NR to put article into newsletter explaining why. New electric door opener has been fitted at Caythorpe, paid for by Practice rather than equipment trust, thought to be an excellent addition by patients who were present.

Healthwatch: Seldom heard voices report has been launched which represents minority groups. Emerging themes such as tailored communications and staff shortages with knowledge of the specific needs of certain group were very apparent, it was particularly important to those who were housebound. Also important to recognise the needs of carers. The report can be downloaded from the Healthwatch website. Work being readied on mental health to input to CQC. Healthwatch undertaking work to recognise why patients may DNA on appointments.

Reports from Sub Groups:

Website: Only issue noted is with the change of role from HCSW to HCA there are references to HCSW's on the website. BG will check for these, NR will update him to where changes need to be made. New links in local services linked to dementia services.

Newsletter: Following last PPG sub group have met RT has now resigned from the newsletter sub and will be running the PPG Facebook page. JE and JM have joined the group to support NT. Next issue is due out on the 15th December. Distributed 414 copies outside of Practice through local organisations alongside copies given to patients in the practice and delivered to patients by prescription delivery van. Issue 4 shown to group. Long term push is to increase awareness of online copy to reduce need to print. Group have decided not to accept advertising at this point. JE happy to write article for local newspaper, AD to liaise with JE on this. A new Powerpoint presentation promoting the group is on the waiting room electronic display boards.

F&F sub group: Group haven't had much opportunity of late to visit waiting rooms but this will be addressed over the coming months. Patients appear to enjoy being involved and having their opinions asked. The results from these questionnaires are shared with NHS England.

Patient council feedback: JB attended on behalf of the practice. Only 5 practices represented out of the 19 in the local area. The main item on the agenda was the shortage of GP's in the area. Commissioning intentions were discussed such as delivering care in the community and how patients felt the CCG could help to achieve this. Discussion about services in primary care and what additional services patients would like to see provided locally. Mental health was discussed to look at what the CCG could do to help patients to improve self-care. JB would like to gather feedback from members of group so she can feed back to the patient council. Early bids for future development were discussed which is related to population growth and where specific groups of properties are built. This then highlights funding to cover services that were needed. Push is very much to ensure patients are treated closer to home. Mechanism needs to be put in place on how patients can feed back to JB to input to patient council. BG thanked JB for taking the time to attend this meeting. Feedback given from patient council on how impressive our newsletter is and patient council would like NR to attend to show how we got the newsletter off the ground to such a high standard.

Complaints: Shared complaints log with group, number of complaints very low and group happy that responses are appropriate and that in the real world whilst mistakes will happen it is encouraging that the practice use these as a learning experiences. Group were interested in complaints from the Practice where patients had behaved badly. The practice recognised that there were very few instances of this but they were dealt with using a tight protocol.

Pharmacy application: Applications have been put in to both Caythorpe and Ancaster villages to start a pharmacy. Practice appears to be covering all areas that applicant is offering. From practice perspective a pharmacy opening in the area could be devastating and lead to a massive reduction in the services that the practice could provide. If a pharmacy were to open the practice could not then dispense to patients living within 1.6km of the pharmacy. Patient group happy with existing service and do not feel a pharmacy is needed. Patients prefer to collect their prescriptions from the practice. Only service not currently provided by the practice is substance misuse service but this was largely down to there being no need in the local area. Patient group to compose a response to the application on behalf of patients. DV happy to collate response to application.

PPG moving forwards: In response to a discussion paper distributed prior to the meeting, it was felt that the time was right to have a more formal structure with the group electing their own office bearers to include chair, vice chair and secretary/clerk. Group has achieved a great deal over the last 12 months which has had a positive impact on the Practice. Great layers of ability within the group in a number of areas. Very important to get chair and vice chair and structure of the group formalised. Important also to get aims and objectives of the group. Question raised asking what is the group looking to achieve. Respect within the group is very important and recognised that the role of chair may require a reasonable time commitment. Role of the group to be voice of patient with the Practice but also to represent and protect the Practice for all patients. Group members should be a critical friend to the Practice. EC to contact NAPP (National Association for Patient Participation) to look for good practice guidance. Felt important that a member of the PPG should act as secretary to the group. Contact details to be shared amongst the group. January meeting to purely discuss this agenda item.

Dates: Date set for next meeting Wed 27th January 2016 at Caythorpe surgery at 6:30pm

AOB: New chair and vice chair appointed for Healthwatch Lincolnshire.