

Patient Participation Group Meeting Minutes 24th October 2017

Attendees PPG : Paddy Cribb (PC) (Acting Chairman). Val Dillon (VD)(Secretary), Christine Endacott-Palmer (CEP), Jackie Mallery (JM), Jill Corpes (JC), Diana Martin (DM), Des Finnegan (DF), Alan Dillon (AD) (Treasurer) Judi Pollard (JP).

Attendees Practice: Isata Green (IG) (Practice Manager) (in part)

Guest: Adrian Ricard (AR)

1) Apologies: Sarah Boltwood (SB) (Admin)

2) Approval of the Minutes: Approved

3) Matters arising from the Minutes:

PC recalled that Moira Newman had resigned from the committee but may return next year. She is still willing to help out with distributing leaflets and putting up posters.

SB has been asked to let us have hard copy of the registration forms for eConsult - ongoing.

CEP commented that, in her view, the eConsult process online is very involved and the whole process has to be repeated when speaking to the doctor. AR asked if it might work for particular complaints. VD suggested it might help housebound patients. PC said this should be discussed with IG on a future occasion.

Stroke Patients: Discussion followed about allocation of patients to RSCH, St Peter's or Frimley Park immediately after a stroke. Following a furore in the local press, the CCG has decided that stroke victims should be transported initially to Frimley or St Peter's and can then move to RSCH for ongoing treatment.

JM said that she had received a letter from some outside organisation regarding getting repeat prescriptions through the post, thus avoiding visiting the Pharmacy. VD has also had this letter and commented that this would bypass the Pharmacy and perhaps put their business in jeopardy.

4) Report from VD re the CCG meeting 14th September:

VD had been very impressed with the proactive PPGs attending. They had been involved in fund raising activities to purchase particular items for their practices. Speakers, such as a Matron from RSCH had been invited to attend and the meetings had been well supported.

VD had the Minutes of the meeting to pass onto, AR, our Chairman Elect, to peruse, along with printouts of various emails and leaflets which had been received from the CCG since September.

AR and CEP suggested that some of our members might visit these other PPGs to glean ideas.

Other PPGs seem to have doctors attending their meetings regularly.

Discussion followed about the frequency of PPG meetings and whether doctors should attend for all or part of the meeting. AR said that there should be a specific reason for a doctor to attend. DM said that the doctors need to hear from the patients via the PPG. PC suggested that we should prepare specific questions. AR thought that patients' experiences of treatment at RSCH might be discussed.

5) Our Patient Survey:

We should ask SB for feedback re the numbers of surveys filled in. AD and JM have been entering completed survey forms into the database. AD said that each survey took at least 5 minutes to enter into the database. JM said that it has taken longer when comments have to be typed in. Some surveys have been brought back to the surgery, where there has been no box to put them in. We need to inform people about the survey and some members of the committee might attend the surgery at peak times to give them out to people who are there for a longer period than on flu inoculation days. AD said that the results from the flu days might be skewed towards older patients.

IG commented that it would not be suitable for doctors to hand out the surveys. This could lead to conversations for which there was not enough time. However, she would remind the receptionists to hand out the forms to patients. PC suggested that the electronic display board could also carry a request for patients to fill in the survey. IG agreed to implement this.

IG said no deadline had been set for completing the survey but it would probably go on until February 2018. AD asked IG to consider terminating it by

the end of 2017. It would need three months for the practice to come back with a reaction to the findings and implement any changes. It was agreed to terminate the survey at the end of 2017. IG said that the same questionnaire should be repeated annually to measure like for like. AR asked whether the PPG will have access to comments. IG said that the survey will be analysed by computer and comments cannot be tied down to demographics relating to age etc.

PC asked for us to receive a report to interpret the data. AR asked for a meeting of a subcommittee with IG to go over the report which could then be passed to the doctors with any recommendations.

6) National Patient Survey

IG was asked to inform us about the National Patient Survey. The data can be accessed on line at gp-patient.co.uk where good positive responses have been seen. 224 patients from the Fairlands Practice were chosen randomly to complete the survey.

7) Project for Next Year:

The doctors suggest that the topic should be cancer and its effect upon patients, family and friends. The subject of MacMillan cancer support and home help assistance might be covered. JP said that sources of funding might not be available for next year. Deadlines have passed. IG asked what the PPG felt about forming a "Friends of Fairlands" Group for the Practice. She stated that some Practices have a similar group that have supported the Practice including raising funds. Such funds could be used for PPG events etc.

CEP suggested setting up a charity as schools do. The MJOG automated appointment reminder system might be used to send messages.

AR endorses the idea of cancer support and suggests that we define our project and leave the funding to be achieved later. IG said that it is very difficult for Practices to fund events as there is no budget for this and Practice income continues to decrease while workload increases. The NHS is not funding extras. She suggests that we write letters to NHS England and the Clinical Commissioning Group expressing our frustration about Practices not receiving specific funds to support PPG events/activities.

IG stated that the Practice will however continue to provide light refreshments (once confirmed) for the PPG's in-house events such as the AGM. The Practice

had provided light refreshments for the previous minor illness event organised by the PPG.

CEP asked how many of our GPs are full time. IG informed the meeting that there are only two full time doctors – Doctor McKendry and Dr Arnold.

8) Accounts:

AD listed our accounts as: Income 0, Expenditure 0, and Balance 0.

PC has been in touch with Frank Clement-Lorford to find out if there is any remaining cash after our Dementia Day expenditure. Apparently, all expenses were reimbursed directly by Surrey Healthwatch and any income remaining from sale of tea and cakes was passed on to Dementia UK.

AD, as Treasurer, has asked John Thody to act as an independent accounts examiner for the coming year, to be appointed at the AGM. A brief CV would be provided and no fee would be involved.

9) AGM:

PC asked IG to ensure that there was no extraneous noise from cleaners during the AGM. IG will ask that cleaning takes place before the meeting and will check with the partners about refreshments to be provided after the meeting.

10) Any Other Business:

JM asked about the Practice defibrillator. IG said it was easy to use and self-explanatory. CEP will enquire about the loan of a screen for the AGM.

CEP asked for a “Rogues Gallery” to be provided at Glaziers Lane as at Fairlands. IG will look into it.

11) Date of Next Meeting:

Monday 27th November at 2.45 pm, subject to room availability.