Woodville Patient Participation Group (PPG)

22nd January 2019 at 6:30pm

Present : Nigel Botham

Karen Gothard – Assistant Practice Manager

Nick Locke Micky Locke Colin Moody Dave Sharpe Jenny Slawson Peter Slawson

Alison Wright - Practice Manager

Previous Minutes

386 Colin noted that the Derbyshire Carers Association offers a clinic at local surgeries, where anyone becoming eligible for care can be walked through the process and given any required help.

Marie is the surgery's care coordinator. Colin will ask the Association to contact Alison.

26 June – Carried forward.

7 August – The association has been contacted as agreed, but no contact has yet been made with the surgery.

18 September - Still no contact with the surgery, Colin will chase.

30 October – No further update. The meeting agreed that it would be beneficial to have the DCA attend at Woodville Surgery.

11 December - Contact has been made with Alison, but no further update at this point.

22 January – There has been no further contact, potentially due to funding issues. The surgery will ask the Care Coordinator to chase it one more time.

424 It was noted that the TV has a lengthy 20 minute cycle, whereas 5 minute is more the norm for a waiting room display. There is a feeling that people tend not to watch the screen, preferring to chat. It was also noted that the screen states that one function of the PPG is to review all comments handed to the Practice – this is not content added by us and has not been sanctioned by the PPG, so we need to understand where it came from.

18 September – Noted that the incorrect PPG words are still there. Carried forward.
30 October – Karen did not feel that the cycle length should be changed – the screen covers everything that it needs to and provides the information that patients need. The presentation was created for Swadlincote surgery and has been adapted for Woodville. Alison will check the wording around what the PPG does.

11 December - The PPG wording still needs to be checked and, if necessary, corrected.

19 December – The PPG wording has been revised.

442 Colin resurrected the "what do the doctors want from the PPG" question and Alison agreed to restart the discussions.

30 October – Dr Somarathi has offered to attend our meetings, so we will ask her to attend the next one. After that perhaps we could have a GP at alternate meetings. We could dedicate the first ten minutes of the meeting to allowing the doctor to have their say.

11 December – Dr Somarathi was on call and unable to attend. The doctors are aware that they need to provide input to the PPG and will discuss.

22 January – Following the negative survey feedback about appointment availability and difficulty making telephone contact, the GPs have suggested that the PPG could help. The aspiration is to reduce waiting time from four weeks to two and then potentially further. One possibility could be to drip-feed the

Nick / Alison

Alison

Nick

release of appointments for booking. It was agreed that Nick would help the practice to craft a survey to gain an understanding of booking patterns – how many times did the patient try to book before getting in, for example. We will then look to undertake some survey sessions in the waiting room.

- An anonymous patient survey is being carried out at the moment, and is aiming for 150 completed surveys. Alison will report back at the next meeting.
 - 11 December The 150 surveys have been completed and sent for analysis. It is expected that access to surgery staff will be the main issue.
 - 22 January Results as explained above.
- Colin has attended a meeting covering Patient Experience in Derbyshire, the Sustainability and Transformation Plan, and the £51M budget cut. He will report back on any Woodville related aspects at the next meeting.
 January Noted that £33.5M has been saved by tightening up supplier relationships. It was noted that the funding payment "per payment" will soon be curtailed if there is a shortfall in clinical staff this has not yet been communicated to the Practice.
- It was noted that Measham surgery has had some success with "social prescriptions". We will invite the Living Well Group to present at a future meeting.
 22 January The group will be invited to speak to the staff and, if it can be arranged, the PPG. Probably in March or April.
- Karen noted that two PPG members have mentioned to the surgery that they are no longer attending because recent meetings have lost focus on Woodville Surgery, being dominated by the wider picture around the NHS and other PPGs. With this in mind, the meeting agreed that we must regain focus on Woodville and that we must get back to meetings taking a maximum of one hour.
 - 22 January this has been noted.
- Taking minutes 442 and 451 into account, an email will be sent to all current and previous PPG members pointing them towards the latest minutes on the web site (perhaps including a link, for ease of access). The email will proffer the view that for 2019, the PPG will have a sharp focus on Woodville Surgery and that we are looking for ideas for tangible improvement. The aim is that we encourage people to return to the PPG.

 22 January This was done and there was an improvement in attendance.
- To correspond with minute 452, we will review and update the PPG section on the web site to present the PPG as a refreshed and Woodville-focussed group.

 22 January The wording has improved, but there is scope to

say a little more.

Matters Arising

None.

Any Other Business

The meeting agreed that it makes sense for the content of the waiting room screen to be available on the web site and the Facebook page, probably as segmented PDF files. Nick and Alison will attempt to get this sorted out.

Nick / Alison

- 455 Clarification of Marie, the Care Coordinator's attendance at the surgery was requested. It was noted that she attends the surgery two days per week and is employed by Derby Community Health Service and provides a link between health and social care. She already runs reports to identify relevant people to contact, plus she takes referrals from GPs, the ambulance service and hospitals. Allowing people to contact her directly would be overwhelming,
- 456 It was asked how the location of publicly accessible defibrillators was published. An appropriate call to 999 will result in the caller being directed to the nearest available one (they have to be reset after use). One is to be installed outside the surgery.
- 457 It was noted that there had been an issue where a patient required use of a nebuliser, but that these are no longer part of the GPs armoury and have to be administered in hospital. The son of the patient wants to donate towards an alternative an aero chamber which is a use-once way to deliver an improved Ventolin dose compared with the normal inhaler. The meeting agreed that this would be a brilliant idea.
- 458 It was noted that the Patient Association has produced a list of suggested things that PPGs should be doing – and we are doing most of them. There was also discussion about the NHS longterm plan, and it was noted that Dr Thorne from Heartwood attends on behalf of the six Swadlincote surgeries.
- 459 It was agreed that we need to resolve the issues with appointment availability before we try to recruit new patients.
- Friends and Family responses run at about thirty per month.

 Patients can also leave comments on the NHS Choices web site.

 As is fairly typical in all forms of feedback, people only tend to bother to leave negative feedback. We should try to think of ways to encourage positive feedback to be reported too.

Date of Next Meeting

Tuesday 5 March at 6:30pm.

ΑII