

Park and St Francis Surgery
Patient Participation Group – Committee Meeting
Held at St Francis Surgery 14th June 2017 at 16:30

Minutes

Present:

Claire Parsonage (Chair)
Jan Blann (Vice- Chair)

Phil Waterton
Peter Turnill (Secretary)

Brian Saunders

1. Apologies for Absence:

Apologies were received from Dennis Pearce, Sue Levesque and Mark Rickenbach.

2. Election of Officers

There having been no new nominations, the existing officers were re-elected as follows:

Chair: Claire Parsonage (proposed PT, seconded PW)

Vice-Chair: Jan Blann (proposed BS, seconded PW)

Secretary: Peter Turnill (proposed JB, seconded PW)

In view of the absence of funds and the unlikelihood of this changing, no appointment of Treasurer was made. This situation will be kept under review. It is hoped that DP will continue to serve on the Committee.

3. Minutes of the last Meeting

The draft minutes were AGREED. Proposed JB, seconded BS.

4. Matters Arising (previous Minute reference in brackets)

4.1 PPG v PRG (8)

This distinction was now felt to be irrelevant. All patients who provided email addresses and agreed to their use were now deemed to be members of the PPG. This committee is merely the active part of that population.

4.2 PPG information on Waiting Room screens (3.2)

CP had reworked the information to exclude redundant items and put the remainder into a common format using legibility guidelines from the RNIB. This had been presented to the Practice and was awaiting implementation. It was AGREED that PW would liaise with the Practice and assist with the uploading and ongoing maintenance.

ACTION: PW

5. Patient Participation Survey

CP reiterated her thanks to PT for sourcing and setting up the survey on Google Forms. She had examined the age profile of the total patient population, and that of those for whom email addresses were held. The latter closely matched the profile of survey respondees which suggested that we had obtained a representative sample, and analysis of the responses had provided good guidelines for future PPG work. A recent West Hampshire PPG networking event had received a presentation on Monitoring quality in General Practice. Matthew Richardson, Acting Deputy Director of Quality, advised that there is a yearly GP Patient Survey that is an independent

survey run by Ipsos MORI on behalf of **NHS England**, in January each year. The survey is sent out to over a million people across the UK, usually around 2% each practice population. The annual results are published and can be found at: <https://gp-patient.co.uk/>

Following discussion we believe there is no requirement for the PPG to carry out a survey on behalf of the Practice in February next year. The questions we were asking were very similar and were being sent out just one month after the national survey. It was felt that the timing and content can therefore be optimised to the needs of the PPG itself. Our action plan will mean that the next survey will probably take place in October 2018.

6. Newsletter

The first edition seems to have been a useful initiative (see below) the second edition is due out on 19th June and the third will be distributed in September. However, CP has learned that there is a heavy overhead in effecting its email distribution. JB has discovered that the NHS and most recently the local Clinical Commissioning Group (CCG) use a product called 'Mailchimp' which takes large distribution lists and batches them in a way acceptable to the mail servers. As it is already in NHS use, it might only require giving current members of our distribution list the option to not use their email address in that way. If there were a significant number of people saying they don't want their email shared, then the surgery would perhaps choose not to go ahead.

ACTION : CP to advise SL of Mailchimp

7. 'Awareness' in the Waiting Room

The first session has proved a success. Sue Moore of the Alzheimer's Society reported that in her 2 hour stint she had 10 good quality contacts. 3 of which reported having seen her availability in the Newsletter. She felt that the Waiting Room had been a good venue as people listened in and some were stimulated to get up and take leaflets. All in all, very positive.

8. Speaker and Agenda for next Full Meeting

CP reported that negotiations were in hand for a Consultant Psychiatrist to talk at the July meeting and for Dr Jayne O'Connor and another Practice GP to talk about Women's/Men's health in November.

There is still uncertainty as to the continuing availability of the Church after the imminent retirement of the present incumbent.

9. Practice Update

SL had provided a written update which CP read to members.

'My updates for the meeting are:

We now provide an excellent and updated Learning disabilities clinic at Park Surgery where we are inviting all our patients with Learning Difficulties so they have a full health check. For those patients who are unable to attend the surgery we do home visits. We have previously offered this service to all our patients with Learning Difficulty and are now are inline with all the surgeries in Portsmouth, Southampton and the Isle of Wight who have a template to use with a much more detailed Health

check assessment. All the local practices have also been sent the new health check assessment.

NHS Health checks are going well and we are sending out invitations to our patients aged between 40 and 74 (without a pre-existing condition) a letter offering a NHS Health check , this is a full health check including blood test.

It was great to see the Alzheimer's lead Sue Moore have a stand in the waiting room and I would like to ask can we encourage any more groups to attend preferably along the lines of Diabetes or community services?

10. Future Work Programme

Based on the outcomes of the Patient Participation Survey, CP proposed the following areas of work:

- a) Full meetings – the PPG would now take a leading role in proposing subjects and sourcing speakers. Contacts have already been made with Nuffield Wessex, The Spire and BMI Sarum Road. A positive response had been received but it was recognised that these presentations must not become a hard sell for private treatment. CP will lead this process.
ACTION: CP
- b) Awareness Stands – this will become an ongoing feature. JB is to prepare a programme using support charities to provide personnel and resources.
ACTION: JB
- c) Newsletter – this has already shown value and will be used to address some of the issues raised by the survey, e.g. use of Pharmacies and access to 'own GP'.
ACTION: CP
- d) Consideration to be given to a smaller more focused survey of a 'minority' patient group/ groups in Oct '18

10. Any Other Business

10.1 Pre-Consultation Forms

BS felt that these are a very useful tool and could focus the patient on the GP appointment. He felt it had not received sufficient publicity. Perhaps they could be included in the Newsletter?

ACTION: CP

11. Dates of Future Meetings

Committee: 13th September

Full PPG: 12th July, 8th November

The meeting closed at 18.00.