

BEECHFIELD MEDICAL CENTRE - PATIENT PARTICIPATION GROUP

MEETING TUESDAY 9 MAY 2017 FROM 1830

In attendance:

| | |
|------------------|----------------------------|
| Clive Green | Chair |
| Tony Wright | Vice Chair |
| Linda Walters | |
| Kate Sanders | |
| Ruth Hunter | |
| Gwyn Matthews | |
| Richard Matthews | |
| Rosemary Lloyd | |
| Melissa Lawson | IT/Compliance Manager |
| Don McGeorge | Practice Manager/Secretary |

Apologies:

Paula Tippler
Margaret Hand
Sam Cooke

Clive welcomed Rosemary to her first meeting of the group.

1. New Chair's Vision:

Carrying on from the AGM, Clive discussed his vision for the development of the group:

- a. **Web Presence:** This is discussed separately.
- b. **Growth of PPG Surgeries:** He felt that these should be taken forward, although had achieved little success to date. The object was to provide a forum for patients to be able to discuss their thoughts on their practice experiences and they could, if appropriate, be taken forward by the group.
- c. **Database:** It was his intention that the group aim to develop a database of issues for the general use of the group over the year ahead, but recognised that this may have various confidentiality issues attached and would require further thought/consideration but felt that it was possible.
- d. **Sustainability and Transformation Plan (STP):** Clive was taking a keen interest in this particular issue, as it was crucial to the GP Forward View and various other developments of health services for the future. He advised that if the opportunity arose, group members should take a look at it.
- e. **Cluster Meetings:** Clive had found these to be a useful and informative forum and would continue to attend and feedback for the year ahead.
- f. **National Association for Patient Participation (NAPP):** Another very useful resource that the group were engaged with, although Clive could not access parts of

it as he did not have a password. Don (guessing) suspected that this would have been issued to the Chair for 2016, John Marriott, but would clarify when the next year's subscription was paid.

g. It remained the intention of the Chair and group to act as the voice of the patient, and to be bold in taking initiatives and ideas forward. This developed a wide ranging discussion in relation to the ways in which the Group could promote itself and make the patient's more aware of their existence, as it was generally agreed that the PPG was a little known entity amongst the wider patient base. Many suggestions were put forward for improving this, but it was agreed that once the group were ready (see "Web Presence") the best approach might be to try and get an article in the local press, and to invite subscriptions to a PPG Newsletter.

2. Notes of the meeting held on Tuesday 7 March 2017 and matters arising, not already on this agenda:

a. **Web Presence.** Tony had done some work on the web site over the past couple of months, but it was still a "work in progress" as he had only limited time available to develop the site. He passed around the draft front page, but admitted that he was struggling for additional content. This elicited various comments and feedback, which he undertook to look at prior to moving forward. He also said that he would circulate details of the page via a "hidden" link to members of the group so that they could take a more leisurely look at the detail. It was agreed that the site would be ready to go live by August, and that would also be the time to aim for some publicity for the new website and the group through an article in the local press.

b. **BP Pods.** It had previously been reported that we had been allocated funds to have a self-assessment centre set up in the practice, and this had all been emplaced over the past 2 months and was now in the downstairs waiting room. Although we had experienced no problems with the functionality of the equipment, most other practices had and it had been agreed that we could return them if necessary. However, whilst ours all worked very well, the issue we had was that of space – once the equipment was screened off for confidentiality, it made the waiting room where it was sited extremely difficult for wheelchair and general access. Although we were looking at another potential area, it was unlikely that we would retain this equipment.

c. **GP Rooms.** Don advised that the additional consulting rooms were now complete and that that they were now available for use by new doctors. This opened an energetic discussion in relation to various aspects of the patient/doctor ratios at the practice, leading on to the appointments system and how it could be improved to reduce the waiting times for routine appointments. Whilst accepting that routine appointments were now becoming very difficult to allocate, it was (hopefully) explained that demand was currently outstripping supply to a considerable degree and, until we had the new GPs in place, the situation would remain challenging. It was also explained that we were actually in the same position as the vast majority of practices, and that this was well reported and known.

However, it was also stressed that the practice always triage and see urgent matters on the day that they are brought to attention.

5. Funding of PPGs:

Don had done some research locally with other PMs, as well as having a long discussion with NAPP in relation to funding PPGs through the practice baseline income, some of which appeared as a post meeting note in the previous Meeting Notes. We are doing at least as much already as others, and in most cases more – in that we will fund a web presence – most only fund NAPP membership at best It is not the intention of the practice to add further to this.

Clive felt that, following his own discussions, that some practices also funded attendance at the NAPP Conference and AGM and that the group should have a funding stream direct from the practice regardless. Don said that he would be quite content to propose individual items subject to bids being made, but would not support any other approach. It was also explained that the practice already provided significant support in other ways – secretarial services, meeting facilities etc.

6. Dr Beet

Don advised that Dr Beet had given notice and would be leaving the practice in October, although he was unaware of her future plans. It was agreed that the PPG would formulate a letter of thanks and appreciation to her before October.

7. Any Other Business:

- a. Clive mentioned a Diabetes Event to be held at Tonic Health later that week.
- b. He then reiterated the points he had made as a part of his inaugural address – the need to develop the group, engage with and understand the STP, develop PPG surgeries and possibly consider greater involvement in health projects for Spalding

8. The next meeting is scheduled for Tuesday 4 July 2017 from 1830.

There being no other business, the meeting closed at 2010.