

**MINUTES OF A JOINT MEETING OF THE
PATIENT PARTICIPATION GROUP OF
WEEPING CROSS/BEACONSIDE AND JOHN AMERY DRIVE
HEALTH CENTRES
HELD ON
WEDNESDAY 25TH JUNE, 2014 AT 6.00 P.M.**

PRESENT: Mr. Steve Powell, Business Partner, Mrs. Ann Broadfield, Assistant Practice Manager (Weeping Cross Health Centre), Mrs. Rachael Stokes, Assistant Practice Manager, (Beaconside Health Centre), Mrs. R. Noyes, Mrs. M. Brocklebank, Mr. P. Cooke, Mrs. S. MacIntyre, Mr. D. Goodfellow, Mrs. A. McComiskie, Mr. E. Robinson, Mrs. A. Howard and Mr. S. Platts

APOLOGIES: Mrs. L. Russell, Mr. J. Morgan and Miss J. Smith

<p>Mr. Martin Chadwick had been invited along to the Group from an independent voluntary agency called Beat the Cold who worked with partners in Staffordshire and Stoke-on-Trent to reduce the incidence of cold-related illness and fuel poverty. Martin had brought along a fact sheet which he handed out to all those present and elaborated more on this. It is commissioned by the Borough Council and consists of two charities working together to run the service. The Group talked of ways of trying to help promote the service in more deprived areas. It was agreed to let Martin have post codes of these areas that fall within our Practice boundary. It was also suggested that putting leaflets in pharmacies might be helpful which a large majority of the elderly population use. Stafford Rural Homes and Age UK attend Steering Group meetings also. It was suggested that members of the PPG might like to attend the flu clinics to hand out leaflets to the elderly population. It was finally agreed that Martin would supply the Practice with cards which the Practice would send out with routine recalls to patients over 65 with chronic diseases.</p>	ACTION
<p>MINUTES OF MEETING 19.3.14 These were accepted as a true record.</p>	
<p>MATTERS ARISING: S. MacIntyre and Julie Smith had finished working on the fact sheet "Did You Know" and it had now been edited by the Practice. It now needed approval by the Group to be given out to patients. After some discussion it was agreed to make one or two changes then it would be put into circulation and reviewed at the next meeting.</p>	SP/AB
<p>Following on from previous discussions regarding appointments and demand and supply on resources in the NHS, patient expectations, people living longer etc. and demands on the service, had meant it almost reaching crisis point. This had been discussed at a Partnership meeting to try and find solutions. The walk in surgeries were now becoming ridiculous with some days GP's seeing up to 26 patients each. To try and take some of that pressure off, the Practice was offering the opportunity of telephone consultations. Patients who do not want to sit and wait at a busy walk in will be offered this service, and will be told that a GP will contact them between 11am and 1pm. Then across all three sites from the beginning of July, we have turned the first two appointment slots on every afternoon session into 4 telephone consultations that will be pre-bookable appointments, and patients can choose who they wish to speak to. There is evidence that around 30% of face to face consultations could be dealt with on the telephone, and staff have been told to try and promote this. The next part of the plan would be rolled out in August which involved the current extended hours. The Practice is stopping all the early mornings at Weeping Cross as patients have become wise to the fact the doors are open early, and they are arriving at ridiculous times to sit and wait for the walk in surgeries to start. GP's will still be working before 8.00am and will be able to give patients the opportunity to book</p>	

<p>into a telephone slot, and Beaconside Health Centre will have an extra 3 sessions of face to face. It was suggested that at the September PPG meeting this could be reviewed with any feedback.</p> <p>DISTRICT PPG FEEDBACK: S. Platts gave feedback and said there were not many in attendance and was chaired by a lay member. A lot of items on the agenda were repeated from previous meetings as there had been little feedback. The District Group had asked if the PPG's would review the web site. They also mentioned recruitment and getting people to attend the Practice and District PPG's and to collect contact details for PPG members i.e. e-mail addresses which S. Platts had agreed to collate for our Group. Friends and Family would be starting in December which basically would be asking everyone who comes through the doors if they would recommend the Practice to friends and family. This was initially created for secondary care. S. Powell said there is a new initiative of 7 day access to GP appointments, but there are not enough GP's and would mean having to give up one of the surgeries in the week to accommodate it. Communication with GP's was mentioned at the District meeting and patient's knowing what questions to ask when visiting their doctor and a hand out had been provided at the meeting.</p> <p>All members had now had their training and had an understanding of the role of a PPG member, and slides and scripts were offered so that members of the Practice PPG's could also be trained. Regarding the Joint Communications and Engagement Committee, S. Platts had joined as a Virtual Member as he didn't think communication was good. Patient experience was also raised and members were encouraged to share some of their experiences. It was agreed that this should be screened by the Practice in case of releasing sensitive information. S. Powell wished to make it clear that if it was information about the Practice then the CCG do not commission Practices, and he would be frustrated if complaints went to the CCG as Practices are commissioned by NHS England. In any industry the deliverer of the service should have the opportunity to do something about any complaint before it goes anywhere else. We as a Practice follow a strict process within the Practice. It was felt that the wording of the form issued by the District PPG needed to be different. If people are trusting you with information they need to be assured that the process is safe and protects them.</p> <p>Children's commissioning was raised and how to get more information out to children and families and they are looking at recruiting on to the Governing Body for 2 ½ days a month. The next meeting of the District PPG is 22nd October and they would encourage as many to go as possible as attendance has petered tremendously.</p> <p>FLU CAMPAIGN: This had been talked about on many occasions. Reminders have been attached to repeat prescriptions, posters and information is placed around the health centre and we start our campaign earlier than anyone else. The Practice has a massive cohort of over 5,000 who fit the criteria for vaccination. Some have it done privately but we never get that feedback so cannot record on the system. We should be reaching around 75% but we only achieved 68% last year. S. Powell asked the Group if they could think of any more ways to encourage patients. The Group felt it should be promoted more at a national level. It was suggested to add a line to the flu disclaimer letters that asks if patients have been vaccinated elsewhere.</p> <p>MEMORY FIRST SERVICE: S. Powell showed the Group some leaflets that had been produced, and asked members to spread the word and encourage people who might benefit from the service to speak to their GP for referral.</p>	<p>ACTION</p> <p>ALL</p> <p>SP</p> <p>AB</p> <p>ALL</p>
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