

## Minutes of Patient Participation Group

Held on Wednesday 5<sup>th</sup> June 2013

In

The Conference Room

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### Apologies

Sandra Bridge	Margaret Williams	Betty Harrsion	Pam Wright
Patricia Chambers	Gertrude Elphee	Janice Bather	Jean Crossley
Lisa Tulip	Lynda Hewitt		

### Attending

Joan Bramley	Margaret Bradder	Michael Burdett	Joan Graham
Marjorie Hopton	Susan Waitt	Enid Morris	Shirley Griffiths

Matters arising from May meeting

- Netherthorpe School contacted by Julie Rutter regarding younger patients attending future PPG meetings as part of their Citizenship classes. The school are interested in year 12's attending meetings but were unable to send a representative to the meeting because of exams at present.

ACTION: Julie to contact the school with future meeting dates

- Julie reported that the extension is now nearing completion with the chairs and the display boards to be delivered. Once finished the new confidential room will also become available for use.

### Presentation by Pam Purdue Head of Patient Experience North Derbyshire CCH

Pam introduced the role she and the PPG have within the CCG.

Network meetings were discussed. A suggestion had been raised that future network meetings should be held on differing days of the week and different venues therefore allowing more PPG members a chance to attend. It was also suggested that other practices should be asked to host the meeting.

The stakeholder forum was introduced by Pam, PPG members were invited to attend this meeting which is useful for gathering information from a wide range of health professions to feedback to the CCG. – Next meeting at Chesterfield Football Club early July.

The patient experience was discussed and the need for information relating to hospital or GP care to be gathered by representatives of the PPG and taken to the stakeholder forum in order that action can be taken if needed on these issues. Issues both positive and negative were encouraged.

Equality within all GP practices was discussed, the "Basket of Services" was introduced. This basket includes services provided by each practice allowing equal access for patients within the area.

The pro and cons of the GP First pilot running through Wheatbridge Surgery at present were discussed. The service which required a GP calling back a patient to assess the need for an appointment had received a mixed reaction. The views of the GP's patients and staff were being collected for a future discussion and review of the system.

The GP revalidation system was outlined; this comes round every 3 years. Pam informed the meeting that the views of peers, staff and patients may be asked for and to remember that honesty was the best policy when filling in these questionnaires.

ACTION: Pam suggested that a newsletter item be written by Julie Rutter.

The 111 service was discussed. The recent problems reported by the media seemed to be related to the fact that the Derbyshire service had taken over running the Leicester, Nottinghamshire and Northamptonshire 111 system. Pam reported that earlier teething problems had now been addressed and the system had recently been given a clean bill of health.

The national Association of Patient Participation was introduced to the meeting by Pam. At a cost of £45 per year the membership can provide access to speakers who can be booked and also allows access to the national PPG network.

ACTION: Julie was asked to look on line at the Association and consider possible membership by the group.

A touch screen tablet was delivered by Pam for patient use within reception. The screen can have CCG and practice questionnaire loaded for completion by patients.

Pam introduced the Patient Advice and Liaison Service (PALS) which is a service provided to support patients who have received disappointing care within the health service. The service helps to direct patients towards help and can offer to liaise on their behalf with service providers to obtain a successful resolution to any issues raised. PALS are also willing to attend patient's homes to gather information from the housebound.

## 5 A+E and COPD Pilot

### A+E pilot

3 practices were included initially in the A+E pilot. One practice has withdrawn from the pilot and the surgery had been asked to join. The pilot requires the monitoring of attendees to the A+E department. GP's will look at the patients who attended A+E and if they feel they could have received treatment from a better provider a letter will be forwarded to them reminding them of this. Julie also introduced a GP triage service which has been given the go ahead to trial at A+E. GP's will see patients who do not need A+E attention to help reduce the time waited for care at the hospital for those who do.

### COPD pilot

This is a pilot being run by The Brimington and Calow practice. The surgery will join the pilot and hopes to provide 6 education sessions for patients suffering with COPD. The hope is that educating patients to manage their condition which will help to prevent crisis calls and emergency admissions. GP's will forward invitations to patients they believe may benefit from the sessions.

## 6. AOB

Discussion on multiple medical issues to be dealt with at GP appointments. The suggestion was made that the patient books a double appointment and informs the doctor at the start of the consultation that they had made a double appointment for this purpose.

Discussion on the availability of appointments for booking ahead. At present 2 day and 1 week ahead appointments are being trialled with the removal of 4 week in the future appointments. This trial was proving to be successful when patients needed to book a non urgent appointment. Concern was raised about patients needing to book more than one week ahead by the GP. Julie suggested that patients inform reception of the need to book ahead, as requested by their GP, which would then enable an appointment to be released.

Meeting closed at 8.00pm.

Next meeting Wednesday 18<sup>th</sup> August 1pm at the surgery.