



**Patient Participation Group
Thursday 28th July 2016
7.30-8.30pm**

Minutes

1. Welcome and introductions

All introduced themselves.

Attendees:

Gib Hancock, Lorna Hancock, Jean Hardie,,Jenny Skilton,Alison Harbour,Esther leach, Andrew Leach, Irene Clark, Ken Clark, Phyllis Blake, Andrew Evans, Gill Evans, Valerie artridge, Dr James Rose (partner), Dr Daniel Lickman (partner), Anne Hardiman, (Advanced Nurse Practitioner), Alison Wogan (Practice Manager).

2. Revisit reasons for merger and where we are now

Dr Rose recapped the reasons for the merger.

General Practice is under great pressure with fewer doctors wanting to be GP's. Population is getting older and patients are more complicated with more drugs. Currently the budget is only 7% (reduced from 8.3%) of the NHS budget.

Prior to the merger 1 partner remained at Whitchurch which was not viable and 1 partner at Derrydown requiring succession planning.

Aim is to improve continuity of care at Whitchurch following the clinical model of a team of clinicians including GP's and advanced nurse practitioners. There will be three teams comprising 1 GP partner, an Advanced Nurse Practitioner and sharing salaried GP time with the wider practice team.

Two Rivers Clinical staff:

3 GP Partners
2 Salaried Doctors
3 Advanced Nurse practitioners
2 practice nurses
2 HCA's
1 Phlebotomist

JR set out the level of clinical administrative work a GP is required to carry out e.g referral documentation, letters from consultants – can be 200 per week per full-time GP as well as blood results. This work is increasing as the medical needs of patients become more complicated. There are also other administrative burdens e.g attendance at meetings, meeting the requirements of our regulators (CQC).

Resources for administrative staff are equally short we will review how we provide our reception and administrative function to assist with the burden on clinicians.

Comments regarding the need for communication were acknowledged particularly around the availability of doctor's appointments. Many patients have not been happy to see a nurse practitioner instead of a doctor and more communication and explanation of their role would be welcomed. This could be done by leaflets in the surgery or focusing on topic in the local magazine or newsletter.

3. Read and agree the aims of the PPG (attached)

All read and agreed the proposed aims of the PPG as circulated.

4. Agree a structure to patient group including a chairperson and secretary.

Chairperson - It was agreed that Gib Hancock would be chairperson. This would be for a period of 12 months.

There were no volunteers for this role it was agreed that Alison Wogan would continue in the administrative function for the group working with other members on different projects.

5. Agree frequency of meetings (every 2 months suggested)

Agreed.

6. How could the patient group help the practice?

1. It was agreed that communication should be improved with good ideas put forward:

PPG area on notice board
Article in magazines and newspapers
In surgery leaflets

It was agreed that Jennifer Skilton and Alison Harbour with the support of (Dan Lickman and Alison Wogan), would lead on writing an article for the parish magazines. It was acknowledged that there are still differences between the patient groups of two surgeries that should be reflected but this should lesson in time as all are used to being 1 patient population of Two Rivers Medical Practice.

Action: Create a list of future topics for magazines articles should be prepared. Jennifer and Alison H to liaise with Dan and Alison

2. It was agreed that a patient survey should be carried out. Ann Holstein and Lorna Hancock to work on this.

Once registration with NAPP is completed all would be able to access support material for PPG's.

Action: Alison Wogan to circulate copies of previous surveys to Ann and Lorna – Ann to redesign. Ann/Lorna to agree how they think this is best disseminated e.g in surgery, website etc.

3. Discussed the issue around stopping telephone prescription requests and the importance of using online services.

PPG to offer support and help coach patients on the use of the website. Andrew Leach agreed to lead on this. It was suggested that the practice provide a session to the group first – Dan Lickman offered to do this in the next three weeks in Alison Wogan’s absence. Alison Wogan to provide a second session if necessary.

Action: Dan Lickman to circulate possible dates to the group and set up a teaching session.

It was noted that the PPG currently represents a groups of the population but that the surgery actively serves the all population groups:

- Older people
- People with long term conditions
- Families, children and young people
- Working age people
- People whose circumstances make them vulnerable
- People experiencing poor mental health (including dementia)

4. It was suggested that in future the group could help promote events such as flu clinics.

***Post Meeting Note:**

Two Rivers Medical Partnership will be inspected by CQC on 10/8/16 and participation from the PPG is encouraged.

7. Future Developments

When established it was suggested that the PPG could look at fundraising for the practice and promote and work more closely with Neighbourcare..

8. Date and venue of next meeting:

Agreed 29th September 2016
Venue: Whitchurch