Drs Broom, Ward, Shelly & Maxwell-Jones

MINUTES - PATIENT PARTICIPATION GROUP
Monday 14th November 2016
Attended by: Susan Birch, Barbara Williams, Arthur Williams, Kay Orme, Carrie Osborne, Christine Price, John Chamberlin, Rebecca Clewed, Peter Bishop, Rachel Taft (minutes)

Informal pre-meeting 5 – 6 pm

Formal meeting 6 – 7pm

1. **Apologies** David Brace, Viv Jury, Muriel Robinson, Andrew Brown Jackson, Sue Ffoulkes

2. **Minutes of the previous meeting (12th September)** – taken as read

3. **Matters arising**

4. **Dates of meetings 2017** – decided to postpone till January's meeting

5. **DNAs** – further to information supplied by RT, DNAs discussed. RT will ask Debbie to analyse the DNAs by age, how long prior to the appointment they were booked, usual suspects. Discussed suggestion that going for a positive message (rather than sending patients to the naughty step!) might be more effective in reducing DNAs. RT to ask Debbie to change the tone of signs etc.

6. **Surgery update**

a. Dr Broom is making excellent progress and will return to work in the near future

b. Investments in staffing to improve patient access

   i. Vicky Hetherington has started as our On Call Clinician, supporting the GPs in the demand for urgent, acute appointments. This should allow the surgery to free up GP prebookable appointments

   ii. Sunil Kandukuri has started as our full time Clinical Pharmacist. Expect to meet him for medication reviews and more

   iii. The Surgery is recruiting for a new nurse and Salaried GP

c. Ashbourne housing development – finally healthcare is being considered as needing investment to expand facilities to meet the increasing population. The Surgery has been asked to apply for Section 106 monies (that comes from housing developers). Thanks to the Ashbourne Local Plan group for their support.

d. Discussion of Pharmacy First – scheme to encourage practices to send patients to a community pharmacy with minor ailments rather than making an appointment. The Surgery's view is that whilst this may help in some areas, the Surgery has invested in its own Pharmacist and so we would rather offer all services under one roof (rather than asking patients to go elsewhere, potentially only to have to come back again).

7. AOCB

    a. Discussed in pre-meeting about how to get a broader group of people on the PPG. Suggestion on whether the PPG should hold an annual briefing session for patients to encourage involvement

    b. Suggested to start each meeting with introductions

    c. Group members pointed to interesting animation by the Kings Fund on the new structures of the NHS – RT to add link to the emailed minutes

    d. Peter Bishop bid us his farewell from the PPG after many years of faithful service and contribution to the group. On behalf of the PPG, the Partners and the whole practice team, thank you Peter!

    e. Patients to be encouraged to provide mobile numbers and register for online access. RT to provide % of patients with mobile numbers and with online access activated at next meeting. Ways in which the PPG would encourage patients to apply – possibly show them how, and how easy it is, patient to patient? RT to have a chat with Debbie whether this could be done in the waiting room or interview room

    f. Noted by some members of the PPG that the Reception team are doing a good job with genuine warmth felt by the patients in their dealings with Reception

    g. Possible that, with changes to how we are dealing with the demand for urgent care, the phone options when calling may need to be changed. Watch this space.

    h. Qu re complexity of appointment system, and evidence showing that if you let patients determine who they need, it can free up bottlenecks and improve access. Certainly a pause for thought for RT

    i. The CCG have asked that PPGs complete self-assessments – with David Brace (Chairman) and for discussion/completion in January meeting (RT to send out in advance)

Date of next meeting – Monday 9th January 2017