

Old Bridge Surgery



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Patient Participation Group

Minutes of meeting: 25th April 2017

Present:

Steve Bird, Chris Roy, Derek Powell, Murray Collings, Pauline Major, Kate Copping, Mary Talbot, Danny Gill, David Welch
Mark Allen and Dr Kodde - representing the practice
Ali Reynolds - admin for the practice

Apologies: David Pengelly

Four members who attended the last meeting are no longer able to continue in the group and apologies have been sent: Mark Ayrton, Lorna Ayrton, Andrew Scott, Gary Warren

Mark Allen opened the meeting and welcomed everybody and introductions were made and apologies noted.

Mark Allen explained the history of the group and made reference to ACHE. He thanked Chris Roy for the draft Terms of Reference.

Minutes of the previous meeting were discussed, agreed and approved.

Objectives:

The Terms of Reference were read and discussed. It was decided that changes should be made to "long term improvements" and that it should be changed to "short term and long term improvements" as the members felt the group were acting in both the short term and long term future of the surgery.

Format and Frequency:

Virtual Group:

The idea of a virtual group was discussed and there were both positive and negative responses to this. It was felt that a virtual group would mean more patients could be involved i.e. people who do not have time to attend meetings, disabled people who are not able to attend meetings and that a larger group of people would mean more representation but that it could also cause problems as not everybody has internet access or know how to use the internet. Confidentiality was also discussed as email addresses would be known to everybody in the virtual group for all other patients within the group and that it would need policing.

It was decided that the group would prefer to continue with group meetings at present.

**Partners: Dr Ian Roy, Dr Johanneke Kodde, Dr Hannah Mogford,
Dr Katie Gummow & Dr Patrick Southam**

The frequency of PPG meetings was discussed and it was decided that during the first quarter of the year meetings would be held monthly and then quarterly thereafter. The possibility of having the dates of the meetings known for the whole year was discussed and it was felt that this would be a good idea so members knew in advance.

Membership:

Mark Allen informed the group that over 2000 emails and a practice newsletter had been sent out inviting patients to join the PPG and again thanked the members who were at the meeting for attending.

It was felt that set members for the group and their roles should be discussed and made in the future to ensure a smooth running of the group. It was also felt that the number of members should be restricted and that if somebody was to leave then a new member would be recruited. It was felt that more patients could be involved if for example surveys were to be undertaken and that there could be patient volunteers for such things.

There seemed to be an overall representation of patients in the group i.e. carers, male and female patients, disabled, local health groups and patients from Looe, Pelynt and Polperro although it was felt that maybe it would be good if a younger patient could become involved to represent the youth and a member with a young family.

After discussion it was decided that the group would comprise of a maximum of 12 patients at present and that this could be changed if it was felt necessary and that new members could be recruited for campaigns etc when needed and chosen because they have an interest in the surgery and its patients. It was felt that if the group was too big it would mean that there wouldn't be enough time to discuss items and would make final decisions harder.

Operation, Code of Conduct and Boundaries:

A PPG Code of Conduct from the Patient's Association was handed to the group and discussed and it was decided that this was perfect for the group and that this policy would be adopted by the members. Similarly the "boundaries" paragraph from the circulated draft Terms of Reference were agreed and adopted.

Organisation:

The roles of chairperson and vice chairperson were discussed and also the role of admin/minute taker.

It was felt that it was too early to decide on who would take on the roles of chairperson and vice chairperson and that the best way to do this would be for any member who would be interested in taking on these roles should let Mark Allen know in the next week or two and give him information on what your interests are and what you feel you could bring to the group. This will then be circulated to the group prior to the next meeting and at the end of the meeting a decision will be made.

It was asked if items for the agenda for the next meeting could be emailed to the surgery and if so who to. After the meeting Ali Reynolds has agreed that she is happy to do this and her email address is: ali.reynolds@nhs.net.

Any Other Business:

Patient Query:

It was brought up that patients are having problems seeing their registered GP and don't know when the GP works or the number of days they work and they feel this information would be good to know. Mark informed the group that we now have 5 Partners, 2 salaried GP's and 2 Nurse Practitioners and that a new patient information leaflet is currently being drafted and he will bring the finished document to the next meeting and add this concern to the agenda.

The members felt that they would be the "sounding boards" for patients and can bring both their concerns and positive things to the meetings and that they would also be able to feedback the positive things to the patients.

Previous meetings information:

It was brought up that the new members would feel happy if they could have information from the previous PPG (for reference and understanding of items brought up and discussed at these meetings) and this will be discussed at a future meeting.

Parking for PPG meetings:

The parking when attending the meetings was raised. The group was informed that the pay & display car park next to the patient's car park is free after 6pm although this could be busy during the summer season, the patient's car park is closed after 6pm unless you have a resident's permit for a parking space and the doctor's car park is also restricted access. It may be possible that the group could use the doctor's car park but would have to be let in and out.

The meeting closed and the date for the next meeting was set:

Date of Next Meeting: Tuesday 23rd May at 6.15pm.