Notes and actions of PPG meeting at Clift Surgery

Thursday 7th February 2019 at 1830

1. Apologies for absence

Clair Berry (CB), Keith Oborne (KO), Antonia Dewhurst (AD), Richard Wood (RW), Juliet Crawley (JC), Angela Kerswell (AK)

Attendees

Dr Roisin Ward (Dr.RW), David Gent (DG) Chair, Mike Davis (MD), David Canham (DC), Nick Hutton (NH)

2. Minutes of previous meeting on 15th November 2018, matters arising and discussion/updates at meeting

\* Minutes approved with discussion points below

\* Noted that Vicky Clarke has resigned

\* Agreed DG would liaise with Margo Scannelli in all PPG IT matters

# Action DG/MS

\* No need for Margo to regularly attend meetings but on a need basis

\* Suggestions sought from PPG members on suitable (clinical) articles for local magazines. NH suggested we could link to the 'seasonal' campaigns run by NH CCG. Action ALL

\* Discussion on the practical difficulties attracting patients to the weekly walk. Agreed to refer back to original group who set it up, for their proposals. Action Walk sub-group.

Discussion points for consideration -

\* How best to promote the Walk to patients and use of the leaflet

\* Dr.RW questioned time of walk in relation to work pressures. Could the walk be early mornings which might work for all

\* DC suggested a shorter walk for example  $\frac{1}{2}$  hour which might attract more patients

\* MD highlighted difficulty of the walk in winter with the saturated ground, especially for elder patients

\* Dr.RW said no patients who had been referred to the walk had yet attended

\* Agreed display of paintings looks very smart and improves the whole surgery environment – a thank-you to AD. However, noted that most of them had 'for sale' prices which is contrary to that agreed at the last meeting. To be referred back to AD. Action AD

\* Dr.RW explained that the Surgery has no immediate plans to introduce

eConsult at this time but would continuously review the situation

3. Items for discussion (not necessarily in order of Agenda)

## 3.1 You said > We did notice board

DG suggested the board was improving but still needs to be tidied and kept updated. Post it notes (if used) should be all over sticky to stop them curling up/falling off. Action CB

### **3.2 Patient Surveys**

Discussion on how best to operate surveys. Noted that MS had implemented the surveys on the surgery website. NH explained the current situation and Dr.RW/DC suggested that the surveys should be best phased over an agreed timescale, which would give an opportunity for comparison. Agreed to run surveys as planned over February only. Action NH/CB/MS

### 3.3 Dispensary

MD/DG questioned the rational for the Dispensary in the light of recent issues. Dr.RW explained how the system worked, including the surgery 'JIT' stock situation and limited delivery service, and reiterated the NHS England wide drug supply difficulties which are affecting both Dispensaries and Pharmacies. Agreed the need for better patient communication. Action DG/CB

Dr.RW agreed that there were customer service training needs for the dispensary team. Action Dr.RW

### 3.4 Appointments

PPG raised concerns about patients' understanding of the surgery appointment system. A wide ranging discussion took place on the structure and operation of appointments and Dr.RW explained the detail of the current processes. It was agreed that there must be pro-active communication to patients by the surgery on all 'key' clinical processes in a timely manner. Dr.RW agreed to raise this with her colleagues. Action Dr.RW

#### 3.5 Old Age Review

Dr.RW explained what is underway with the development of the Old Age Review of patients. DC would appreciate greater engagement and closer co-operation with the surgery. Action Dr.RW/CB/DC

## 3.6 Virtual Email Group/NAPP membership benefits

Postponed to next meeting when more attendees are present. Action DG

3.7 Use of Blood Pressure Machine

DG raised issues from patients (including himself) using the machine. Dr.RW explained why the machine was there, how it was intended to be used and interpretation of results.

3.8 New surgery staff

Dr.RW informed the group of two new staff – one in the Dispensary and one in Reception. They would be rotating on a 6-monthly basis to gain a wider experience of the surgery operation. This was welcomed by the PPG group.

Dr.RW also informed the group of Medical Students spending 6-week placements over the next 6 months.

3.9 Surgery Car Park – Entering and Exiting

DG/NH raised the safety issues of one single entrance/exit, which could be an accident waiting to happen. Dr.RW explained that the surgery had no say in the matter as it was determined by Basingstoke Planning/Hampshire Highways during the building development.

Dr.RW suggested that this issue could be addressed by the PPG who would contact Basingstoke Planning/Hampshire Highways and Hampshire Road Safety Officers with an objective of submitting a oneway separate IN and OUT proposal - IN at original entrance/exit and OUT at new entrance/exit. This was welcomed by the PPG. Action DG/NH/CB

# 3.10 NH CCG Matters

DG/NH informed the meeting of improvements at the NH CCG/PPGs meetings. DG/NH had jointly criticised the purpose and focus of this meeting in the light of changes at the CCG. DG had recommended the need for a workshop for PPG delegates to meet, get to know each other, to determine the focus of this meeting and to facilitate the sharing of best PPG practice. This workshop is now set for Friday 15th February from 1130 to 1545.

3.11 PPG workload

Group recognised the need to devote time between meetings. Action ALL

4. Date of next meeting

Thursday 28th March 1830 at Clift Surgery