**THE CONSTABLE COUNTRY MEDICAL PRACTICE**

**PATIENT PARTICIPATION GROUP MINUTES**

**MEETING HELD 10.08.2015.**

**Members present:**

Mrs. Kathy Pollard (Chair) Mrs. Janice Cheng (minute taker)

Mrs. Greta Abbs Mr. Christopher Dooley

Mrs. Elizabeth Digby Mrs Susan Yellop

Mr Michael Huard Ms. Sharon Dixon (Deputy Practice Manager)

Mr Andrew Ravasio Mr. Pete Keeble (Practice manager)

Dr. Frank Wells (Dep. Chair) Ms. Gill Jones (in attendance)

1. **Apologies:** Mr. Peter Wright, Dr. Nancy Cohn, Mrs Kirsten Nicholls, Dr. Ayache, Becky Thomas
2. **Notes from last meeting**: The date of the meeting was changed to 27.07.15. The remainder of the minutes were accepted as a true record.
3. **Conflict of Interest**

Gill Jones declared a potential conflict as a representative of Healthwatch Suffolk

1. **Matters Arising**
2. Frank Wells commented that a partner was not in attendance at this second meeting of the PPG. It was agreed that this was very worrying. Pete Keeble assured the group of the commitment of the Practice partners to work in partnership with the PPG. The absence of representation at this meeting due to illness and a replacement was not available at short notice. Sharon Dixon was attending instead.
3. Secretarial support: As Kirsten Nicholls had sent her apologies; her offer of potential support was deferred to the next meeting. In the absence of other volunteers, Jan Cheng agreed to undertake this task once more.
4. Pete reported that he had confirmed with Becky Thomas that the group wanted her participation and that she was delighted and will attend future meetings.
5. Publicity: Kathy confirmed she had liaised with Pete re: articles for village magazines. A PPG email address had been set up for patients to send information to. (See below for details)
6. A group photo will be taken at the next meeting ready for local press articles. Kathy has received four head and shoulder shots of individuals. Members who have not submitted a photo should do so by the next meeting please. These will be used, along with a brief resume for patient information within the surgeries etc. Gill Jones offer of support with publicity by Healthwatch Suffolk was accepted. Pete will also liaise with the press office at the Clinical Commissioning Group. **Action: All.**
7. Draft 2 of the Terms of Reference: The updated version had not been circulated. A brief discussion took place and Pete agreed he would amend them and bring to the next meeting. **Action: Pete Keeble**
8. Frank Wells commented that he had identified himself to a receptionist as a member of the PPG and was concerned that she did not feel able to give any comments without the permission of the Practice Manager. The PPG reiterated its desire to work openly with the Practice and to do that the Practice needed staff with the confidence to be open themselves.
9. **New Appointment System**
10. It was agreed that both reception staff and the PPG should be able to comment on the new appointment system at a future meeting. Pete gave the meeting an overview of the new system. One ambition was to change the perception of patients that they needed to ring or queue at 8am. Jan Cheng commented that the previous week she telephoned for an appointment at 10.40 and was seen at 11.10. She wanted this acknowledged positively.
11. The new system is based on the one used by the Hadleigh Surgery. In the mornings, the GP surgery time was being extended to cope with all the requested appointments. In the afternoon a Dr and Nurse Practitioner will triage all requests and either see the patients or deal with the issue over the telephone. There will be 40% more appointments available to pre-book online in future. Some will be released the evening before. It is a case of trying the new system and then evaluating it. Andrew Ravasio pointed out that the new system should not be at the expense of the patient’s individual consultation time.
12. All test results are now seen by the requesting Dr. and they are encouraged to ring the patient directly if results indicate a need for further intervention by a clinician. The PPG agreed that it is not acceptable to not contact a patient at all if results were normal. Patients still need and want to know the outcome of any test. Pete said that this work was stacking up for the doctors. The PPG acknowledged this but are concerned that patient safety is paramount.
13. The question of whether a Dr. of choice could be pre-booked under the new system was asked. The PPG all agreed that the Dr/patient relationship was crucial to the patient’s well-being and eventual outcome and this had been a missing element thus far. This will be an ongoing piece of work in which the PPG will have a crucial role. Gill Jones said the Healthwatch Suffolk will be doing some work on this. It was then asked whether patients could have the information of which Dr was where through the week. Pete explained that this couldn’t be achieved because of training commitments to the Registrars. He was challenged on this comment on the basis that the service is for patients and that training should be designed around their needs, not the other way round. He replied that it is not possible because the Dr.s have to all cover the training and so predicting where they will be is not possible at this time. The registrars are a vital resource to provide the number of Dr. appointments needed and for the success of the increased appointments that will be pre-bookable. The PPG asked that information be published on which doctors would be available at each surgery each week, as well as the availability of nurses, nurse practitioners and phlebotomists. This information would not include the name of the duty doctor. Pete accepted this and agreed to trial making this information available. The PPG were keen to capture data on whether or not the Dr. of choice was available when booking. Healthwatch Suffolk will include this in the evaluation. **Action Pete Keeble/Gill Jones**
14. Greta Abbs made the point that online communication is not used by older people and this group risks getting left out.
15. Mike asked whether missed appointments could be identified in the system. Sharon Dixon said it was not really an issue to date as appointments were made on the day and there was little risk of them being forgotten. It was not clear if this would change with the new system.
16. Appointments for phlebotomy were also discussed. Pete explained that one staff member was on long term sick leave and they had been unable to cover the hours. PPG members reported long waits being endured by patients. Pete said the receptionist should be told whether a test was urgent or not. A discussion about whether bloods can be taken at Ipswich hospital or Riverside took place. Pete will look into this and clarify. **Action Pete Keeble**
17. The issue of the security of paper notes going between the two surgeries was discussed as this is perceived as a problem by some patients. Pete explained that scanning of clinical records was not available at Capel and so had to be done at East Bergholt for uploading onto the electronic system. Also post was delivered to both premises and not always to the right one so it was inevitable that paper had to be transferred.
18. **Re-Inspection by CCG**

The CQC will inspect again during September or October. A date has not been given yet. Pete will provided an action update on the CQC report at the next meeting

**Action: Pete Keeble**

1. **Communication with Patients**
2. Kathy said the email address to which patients can send comments is as follows:

[ConstableCountryPPG@gmail.com](mailto:ConstableCountryPPG@gmail.com). Comments boxes would also be available in both waiting rooms.

1. The password to access the comments will be emailed to members. It was agreed that a system needed to be agreed by the PPG to respond to any comments. Kathy suggested that any issues identified by members are emailed to each other. The role of PPG members is to signpost, not deal with complaints directly. Pete suggested that Google drive is used as it has the facility to share documents from the gmail address.
2. Sue Yellop agreed to ask Hadleigh Practice how they manage the boxes and card format.  **Action Sue Yellop**
3. There is no budget for the PPG but the practice will provide cards and boxes.
4. It was agreed that the PPG will undertake listening events. It was agreed that an ideal opportunity would be attendance at the surgeries on flu vaccination day.
5. Healthwatch Suffolk will help with patient survey design. Gill agreed to contact the researcher at Healthwatch for support. **Action Gill Jones**
6. It was agreed to pursue NAPPG membership which the Practice kindly agreed to fund. **Action Kathy Pollard**
7. Gill Jones asked whether it would be helpful for her to attend future meetings from Healthwatch Suffolk. It was agreed that the close links with this organisation would be beneficial to the group and her offer to attend was accepted.

Next meeting agenda to include:

* An update on the improvement plan.
* Transport

Please submit other issues to Kathy or Frank.

Date of next meetings: 24.08.2015. @6pm - East Bergholt Surgery

07.09.2015 @ 6pm – East Bergholt Surgery.