

Patient Participation Group Meeting

Wednesday 12th October 2011

Present:

Alan Tiplady (AT) **Vice Chair**
Jessie Woodhouse (JW)
Angela Dickinson (AD)
Wayne Sherwood (WS)
Ian Sadler (IS)
Francis Thomas (FT)
Louise Davis (LD)

Apologies:

David Pratt (DP) **Chair**
Brenda Stevenson
Jay Hemmings
Avril Johnson

Welcome & Apologies

AT opened the meeting. Apologies noted.

Notes of Last Meeting and Matters Arising

Notes of September meeting agreed. The **group formally adopted the Terms Of Reference document**. There was agreement that David, Alan, Jessie, Jay and Louise would meet separately in the coming weeks to discuss a plan for the recruitment of new members.

LD reported a rise in the number of patients missing their appointment. Agreed to monitor more carefully and discuss at future meeting. AD asked if a text message reminder could be requested when booking an appointment on-line *Action: LD to investigate*

LD reported that she had been asked to speak at the Principia Patient Reference Group about the proposal to trial a scheme within the practice to encourage patients to think twice when ordering their repeat script. She mentioned that she and David had visited Boots Pharmacy to discuss their system. It was noted that the Boots system requires patients to order their medicines 2 months in advance thus leading to potential wastage.

Carer Co-ordinators – County Health Partnerships

Sue Dyke and colleague came to talk to the group about their work within the NHS Trust Healthcare Partnership.

AD mentioned that the demise of Warden Aided Accommodation within Housing Services meant that the services of carers was an ever-increasing and important role, and one which needs to be recognised and supported by healthcare services.

Despite a lengthy presentation, some members of the group agreed that they were still not entirely sure exactly what services were being offered/provided and felt this needed further clarification.

Update on Merger Proposal/New Surgery Proposal

Dr Reddy attended the meeting to update the group on progress. He advised the group that the final Business Case needed to be submitted to the Primary Care Trust by the end of November. Prior to this, a Public Consultation will be held, although the exact format and dates for this had yet to be set. He mentioned that the exact location of the proposed site, whilst known by some, is at the moment commercially sensitive information and therefore should be discussed with caution. Transport links were discussed in some detail, and it was agreed that ease of accessing the proposed site would be of utmost importance in patient's being in agreement to the location when it came to the Public Consultation. There was concern about the difficulties, which might be experienced by patients without their own transport, and/or those who are incapacitated by age/illness/disability or for other reasons.

Dr Reddy advised the group that by merging with other local practices there would be advantages for all the practices within the group. These being that practices can share resources and expertise, offer a far greater variety of services to patients than we are currently able to provide such as physiotherapy, minor surgery, specialist clinics and will be able to open longer hours. The new building will offer facilities that are compliant with 21st Century standards ie, those laid down by the Quality Care Commission, to which all practices will need to comply by April 2013 to be able to continue to practice.

DP re-iterated the groups' two main provisos to the project. One, that the new surgery needs to be easily accessible and, two, that patients should be able to retain the right to continuity of care from the GP of their choice.

It was agreed that a further update would be given at the next meeting so that the group is kept fully informed about the developments as they happen.

Meeting Closed