



Minutes of ASK PPG Meeting Held 7/12/10 at Adelaide Street

Member List:

| Name | Designation |
|-------------------------|----------------------|
| AA – Ann Allen | Patient (Chair) |
| GQ – Gavin Quick | Patient (Secretary) |
| JB – Jo Booth | Practice Nurse |
| JCB – John Butler | Patient (Vice Chair) |
| JR – Dr Jessica Rose | GP |
| MW – Mike Wain | Practice Manager |
| PL – Dr Paul Lynch | GP |
| RH – Robert Herron | Patient |
| RWn – Richard Watkinson | Patient |
| RWh – Rita Walsh | Patient |
| SR – Susan Ransome | Patient |
| TB – Tony Bladen | Patient |
| VC – Viv Critchley | Patient |

Present: MW, JCB, JB, RWh, GQ, TB

Apologies Received: AA, RH, RWn, VC, SR

Minutes of Previous Meeting: agreed as a true reflection of the meeting

Matter Arising –

Draft constitution is fine, no further action needed.

The question of the practice newsletter was raised and MW advised it was due out in a surgery near us before Christmas. There then followed a discussion regarding the group and how we could advertise ourselves more, including inclusion in the newsletter. It was thought minutes of our meetings could be posted on the practice web site with bulletin points being put into the newsletter.

It was also agreed we would benefit from having a phone number to advertise for patients with the practice to contact us with information and suggestions. TB advised he had some spare ones and generously agreed to provide one for dedicated use by this group. MW also advised he would be

able to provide a generic e-mail address dedicated to group use. The details of phone number and e-mail address to be put on the website and included in the newsletter as soon as they are to hand. The holder of the mobile phone, taking messages for the group is to be agreed.

Reps from other PPGs – JB advised she is awaiting feedback from Glenroyd, who have a meeting in December and will then advise her by e-mail if anyone is willing to come and talk to our group. The Glenroyd PPG has been in existence for over a year.

Patients Survey -

Flu jabs will be dealt with next year, spreading the days on which it is done and also how people are dealt with on arrival. MW also agreed to take on board our suggestions to provide volunteers to assist people coming for the flu jabs. This will assist the practice and also increase our profile.

The practice is also testing a system that will enable advance booking to be extended from 2 days to 6 to 8 weeks. They are also looking at using text messages where patients provide mobile numbers to enable this system to be used.

Screening is going ahead, and TVs are being installed at Adelaide Street on the ground floor and first floor (different channels being shown on both floors).

Helpfulness of receptionists – This refers to last year, and now they have two receptionists who handle the triage bookings, and also training is being provided via MPS (who provide medical insurance to the practice).

Surgery Opening Times – the Adelaide Street surgery does open late on Tuesday and Thursday. This fact will be advertised in the practice newsletter as 69% of patients didn't know we opened at all after 6:30. It is thought greater communication will help ease this perceived problem. A problem possibly lies with requests if asking for a particular doctor, and if patients are willing to see another doctor instead, then the problem of access to the practice may also be reduced. Sometimes a doctor is not available (e.g. illness, holidays) and it is recommended to see an alternative doctor with an acute problem rather than wait.

Discussion On Way forward For PPG –

RWh advised that the Whitegate Health Centre has committee rooms available for free. She was though unsure as to what times they were available. She agreed to make some enquiries and report back. It was agreed that if a neutral venue midway between the two sites could be found then this would seem to be acceptable.

There was then a good talk on what we want from the PPG. It was quickly established that the members present did not see the PPG as being a fund raising organisation, but rather a means of communicating between the practice and its patients. The question was raised of what we had done, and the pace and scope of our influence. It was also agreed the group works on the principle the doctors drive the practice and the group is there to help provide additional input.

The question of a bereavement policy was raised, given the experiences previously told by SR. MW agreed to ensure the practice re-introduced the policy that used to exist. There was also talk of the

PPG being part of a policy to have chronic sufferers talk to fellow chronic sufferers (e.g. XPert for Diabetes.)

To this extent the following are seeing as areas where we have shown influence to a greater or less degree

- 1) Input on the problem of unhelpfulness at reception – anecdotal evidence re patients being overheard, had helped to effect the planned introduction of screens at reception, plus installing of TV screens.
- 2) Intent to provide e-mail access for people to bring concerns and points of view to group for 2-way dialogue with practice. In addition mobile phones to be used.
- 3) Improving of communications between practice and patients in form of input to practice newsletter and suggestion of texting.
- 4) Bereavement policy – following input from SR in particular it was agreed by MW to ensure the policy previously operated by practice was re-continued.

Provisions for Hard of Hearing - deferred to next meeting, back of lack of time.

Date of Next Meeting – Jan 18, 2011 at Kentmere drive at 6pm