

## **Castle Street Patient Participation Group**

### **Notes from meeting held on the 11<sup>th</sup> July 2011**

#### **Present:**

Dr D Kar  
Karen Bestwick  
Jean Railton  
Mary Kay  
Debra Ford  
Mandy Wareham  
Anne Aston  
Grant Stothard  
Guy Freeland

#### **Apologies:**

Hazel Mellard  
Mike McDonnell  
Barrie Ducker  
Pat Ducker  
Geoffrey Henry  
John & Cheryl Mair

#### **Previous Minutes**

Agreed as accurate

#### **Matter arising**

The CQC (Care Quality Commission) registration process for surgeries has been deferred until April 2013

#### **Surgery and Locality Update**

Hardwick Health (The Consortium) will be arranging a public involvement event in September.

#### **Charity Day Event**

Decision taken not to be present. Consider the winter event and next summer's event.

#### **Group Business**

Grant Stothard was proposed and accepted as the PPG Chair, Anne Aston was proposed and accepted as PPG secretary

## **Local Survey**

Karen discussed the requirement for a local survey to be carried out. Discussions took place on how to ensure the wider practice population views are captured. To be carried fwd to next meeting

## **Newsletter**

The surgery to include an item on the PPG in the next newsletter. Ensure that the newsletters are distributed to the housebound (district nurses). Also suggested that we have district nurse input into the meeting.

## **Any Other Business**

1. Further discussion relating to improving the reception area. Dr Kar to look at any available funding. To be carried fwd to next meeting.
2. Drinking water- Grant raised an issue that the tap water in the toilet is not drinkable- to be investigated.
3. Issues relating to giving DOB and address at reception- suggestion about a small ID card that can be handed over reception.

**Date of Next meeting 12<sup>th</sup> September at 6.30-8.00pm**

**Enc:** PPG Terms of reference

**Terms of Reference**

- 1.** Contribute to practice decision-making consult on service development and provision.
- 2.** Provide feedback on patients' needs, concerns and interests and challenge the practice constructively whenever necessary;
- 3.** Serve as a 'safety valve' for dealing with grumbles and complaints about the practice – representing patients but also helping them to understand the practice's viewpoint;
- 4.** Assist the practice and its patients by arranging voluntary groups/support within the community;
- 5.** Communicate information about the community which may affect healthcare;
- 6.** Give patients a voice in the organisation of their care;
- 7.** Promote good health and higher levels of health literacy by encouraging and supporting activities within the practice and promoting preventive medicine;
- 8.** Influence the provision of secondary healthcare and social care locally;
- 9.** Monitor services, eg hospital discharge and support when back in the community;
- 10.** Give feedback to NHS trusts on consultations;
- 11.** Work with the Practice to identify sources of funding for medical equipment or other facilities to improve the practice and/or fund the activities of the PPG; and
- 12.** Liaise with other PPGs in the area.