**HIGHCROFT SURGERY**

**Patients’ Participation Group**

**Minutes of the meeting held on Wednesday 15 June 2016**

**Present:** Christine Foster (Chair), Bernadette Cocking, Ted Cocking, Jacqui Anthony, Michael Anthony, John Taylor, Arnold Harris.

Matt Doig (Practice Manager) represented the Practice.

**Apologies:** Peter Fisher, Claire Woods, Jacky Bucknell, Helen West (now moved to another Practice), Sally Mutton (Staff) and Joanne Croft (Staff).

**1. Introduction**

The Chair welcomed members to the meeting. She introduced John Taylor as a member of the Group.

**2. Minutes of the Meeting held on 11 May 2016**

These were approved as a true record of the meeting.

**3. Matters Arising**

Regarding the enquiry re. the absence of doctors at the A.G.M., the situation was explained during the course of the meeting. Use of the web site for information was advised.

**4. Chair’s Report**

* The Chair reported that she has maintained contacts with the hospitals and raised issues from patients. Hospital staff were responsive. She observed problems with poster displays affecting dealings with patients.
* At the Peoples’ Council there was an item concerning the Primary Care Project. The Chair met with the Practice Manager to further an understanding of this in order to clarify issues to be discussed by the PPG.
* The C.Q.C. had enquired if the PPG is involved with Patients’ complaints. The procedures for bringing concerns to the attention of the practice by the PPG had been explained. The Practice Manager thought it useful to address themes relating to complaints at PPG meetings. The Chair added that it would be advantageous to consider the substance, not confidential details, of formal complaints.
* Members of the PPG and the Virtual Group attending meetings represent the PPG though this was not always the case.
* The MORI surveys do not get many more responses than ours. They do not replace those which we feel we should conduct internally.

**5. The C.Q.C. Report and the Practice Action Plan**

The observations of the Practice Manager

* The Report outcome was as expected although not all of the Practices’ corrections were included even after its revision.
* A particular area of the Report’s concern related to patients who are vulnerable, particularly those in Care Homes. The Practice felt that it was not informed of complaints recorded by The C.Q.C. It was a matter of frustration that Care Home Staff did not attend meetings with the Practice. There was no clarity regarding the practices to which Care Home patients belonged. Because Care Home were risk averse and sometimes called for immediate attention, this created difficulties. There seemed to be an implication in press reports that the Practice takes on Care Homes to swell the numbers of patients.
* Regarding responsibilities for patients with learning disabilities there seemed to be an expectation of an annual review which in fact is not obligatory. 45 0f the 60 or so patients in this category had seen a doctor during the year.
* The Report does recognise the steps are being taken to improve procedures.
* It was suggested that next year there should be publication of significant improvements and positive outcomes. A reference was made to the contents of the June Newsletter and it was suggested also that patients should visit the Practice website to keep up with developments.

**Referrals**

It was noted that problems regarding referrals should be addressed to the G.P.

It was agreed that referrals to hospitals might be a suitable item for PPG consideration.

**6. The PPG Constitution**

It was agreed to set up a Task group to review the Constitution.

**7. Practice Report**

This agenda item was deferred to the next meeting**.**

**8. Patients’ Feedback**

1. A reported difficulty of booking an appointment for a medical procedure. Details to be forwarded.

2. A patient reported in for an appointment, was informed on the screen that there would be a 10 minute wait but after a 40 minute wait discovered that the doctor was called away but had not been notified of a change. The Practice Manager would take steps to address this omission with reception staff.

**9. Date of next Meeting.**

It was agreed that this would be on **Wednesday July 20th.**