

**Kiveton Park Medical Practice – Patient Participation Group**  
**Minutes of Meeting Held Wednesday 12 September 2012**

1. Present: Brian Daniels (BD) Chair: Marilyn White (MW) Vice Chair  
Jean Hirst (JH): Barry Winterbottom (BW) and Charles J Hazle (CJH)
2. Apologies for absence had been received from: Dr Say: Linda Bainbridge:  
Jodi Flynn: Matt Perry.

With only four members present the meeting was not quorate, however it was decided to progress with the agenda. (A quorum is 5 committee members and one practice representative).

3. Minutes of the meeting held on 18 July 2012 were agreed.

4. Care of the Elderly: the Group had previously expressed an interest in this area and it was recommended that a sub-committee be formed to investigate possibilities and then report back to the Group. It was noted that there will be some overlap of carers and elderly people. One question is “what is a definition of elderly ?” and BD will contact Age UK for an answer.

BD, MW and BW all said that they would like to be involved and CJH agreed to circulate details to other members to give them the opportunity of taking part.

The Guardian newspaper (Page 34 of the edition dated 5 September 2012) had devoted a full page “Is this the future of Community Care ?” with reference to the Sussex village of Rotherfield which has a charity devoted to providing support and services to senior citizens. See <http://www.rotherfieldstmartin.org.uk/> for more details.

CJH will organise information around numbers of patients in age groups.

5. Members Questionnaire: CJH had circulated a questionnaire to known members of the Group and 13 responses had been received - see attached with responses in red.

6. Resume of Developments with NHS Rotherham/CCG: BD commented on the changes to medical provision brought about by new legislation (Health & Social Care Act 2012), noting that Dr Tooth is Chair of the local Clinical Commissioning Group (CCG) and that the Rotherham area has to make some £75m in savings, from a budget of £640m, over the four years from 2013. BD said that the CCG wanted Patient Participation Groups on board as a link between the CCG and patients. He also referred to plans to manage patients with long term conditions more efficiently and look at referrals to secondary care and prescribing budgets, together with staff reductions.

7. Meeting of PPGs 19 September 2012: BD and Susan Wietscher will attend to represent the Kiveton PPG.

8. News from the Practice: CJH advised that Dr Reid is expecting to make a phased return to work during September although will not, initially, be seeing patients. Paula Smith and Marianne Bailey have recently joined the reception team and Cheryl Rodgers has joined the administration team.

9. Date of next meeting: Wednesday 17 October 6pm at the surgery.

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**KIVETON PARK MEDICAL PRACTICE**

**PATIENT PARTICIPATION GROUP**

Survey of Members

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1. Level of Membership – which category best describes you:-

- |   |    |                          |
|---|----|--------------------------|
| a. Active Member – attending most meetings  | 10 | <input type="checkbox"/> |
| b. Interested in the work of the Group but unable to attend meetings  | 1  | <input type="checkbox"/> |
| c. Interested in the work, unable to attend meetings and would like to have a copy of Meeting Agendas and Minutes | 1  | <input type="checkbox"/> |
| d. I no longer wish to be involved as a Member of the Group   | 1  | <input type="checkbox"/> |

2. Which is your preferred day for meetings:-

Tuesday	1	<input type="checkbox"/>	Wednesday	3	<input type="checkbox"/>
Either	6				

3. What is your preferred time of day for meetings:-

Between 10am and 12 Noon	2	<input type="checkbox"/>
Between 3pm and 5 pm	2	<input type="checkbox"/>
Between 6pm and 7pm	6	<input type="checkbox"/>

It would be helpful if you would provide your e-mail address, and preferred telephone number:-

Are you agreeable to your e-mail address and preferred telephone number being shared with other Members of the Group:-

Yes	10	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	2
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4. Section 1 of the Group Constitution states:-

***The purpose of the group is to represent the patients of the practice:***

*To obtain information which represents the opinions of patients on certain and relevant key issues.*

*To feedback this information to representatives of the practice and to provide comment and opinion on its content*

*To advise patients of the Practice's response to this information, i.e. to ensure that the communication established is two-way.*

With this in mind what topics would you like to see the Group consider over, say, the next twelve months:-

1. Care for the elderly – defining the elderly population/predicting future issues/plan to meet their needs.
2. Provision of information on how to avoid likelihood of stroke/recovery from stroke.
3. That the group should determine its own agenda rather than be led by the practice.
4. At some point during the next 12 months – treating minor ailments at home.
5. What over 65s needs are from the practice
6. Look at a number of individual illnesses eg: fibromyalgia, arthritis, heart problems, cardiovascular accidents, and ascertain what these people need from the practice and what the practice needs to help them deal with problems.
7. Implications if any of the new area health funding on the practice and patients welfare and treatment.
8. Information available to patients regarding the various health services which can be accessed at the surgery for young and old.
9. Any topics that the medical team think will help the practice.
10. Arthritis perhaps to “control pain, dealing with it, with best advice from doctors or physio
11. Sugar Diabetes – how to avoid ? also how to live with it
12. Strokes and blood pressure, dealing with it, life after.
13. Perhaps a group discussion on healthy living, any age within group, costs of healthy eating and best way to exercise.

