

HOLLOW WAY MEDICAL CENTRE

Notes of first Patient Participation Group Held on Tuesday 7th October 2014

Present: Practice: Dr. Alison Maycock, GP
Chris Robinson, Practice Manager

Patients: Catherine Meats
David Hurn
Sheila Slay
Marion Webster

Other PPG reps: Michael Leech (Summertown Health Centre and Chair of Oxford City
Locality Forum)
Elaine Cohen (Jericho Health Centre and Vice Chair of OCLF)

All were welcomed to the first meeting of the PPG. A virtual patient group had been in existence for several years, mainly to help with compiling the annual patient survey but the practice wished to start a face to face group with a wider remit and greater involvement with the practice. The practice is keen to foster good communication with our patients.

Main points discussed:

Alison Maycock talked about some of the current challenges for general practice, such as increasing workload, patient expectations and financial constraints. She felt it was important for patients to be aware of what is happening in general practice, and the NHS and the Oxford locality forum also gives patients an opportunity to be involved with the wider commissioning aspects of primary care.

Michael Leech and Elaine Cohen talked about their experiences of being involved with their patient groups in their own surgeries. Elaine said that in their surgery they had developed several initiatives such as:

Two types of patient meeting which could be alternated – business/discussion meeting and health topic meetings where a GP or another invited health professional would talk about a health topic. ML said that he considered that members of his PPG acted as “critical friends” of the practice, to support and make constructive suggestions.

Table in the waiting room dedicated to the PPG with information – sometimes manned. When two practices merged recently within the Jericho health centre, members of the PPG were present on the first day to guide patients and explain the new arrangements.

Set up of groups

ML and EC both agreed that there were often difficulties in setting up new PPGs – it was important for the group to be as representative as possible of the practice population, and this was not easy to achieve. It was often difficult to engage patients and persuade them to join a group, and it was felt that direct approaches, either from staff in the health centre, or by existing PPG members was usually the most effective way to gain patient interest. Timings of the meetings was also important as some patients can only attend meetings in

the evenings and some only during the day. It was suggested that evenings were probably the most popular time but that an occasional lunchtime meeting would attract different patients. It was suggested that some information about the PPG could be included on the new patient form. The website already included an invitation to join the group, but this could be developed with a separate section for the PPG on the website.

It was agreed that it was important for a member of the patient group to be willing to lead the group and set the agenda, in conjunction with the practice. ML said that in his practice, the practice manager started off as chair and then this role was taken over by a patient, once the group had been established.

Frequency of meetings – possibly quarterly at first. Possibly also some meetings with no practice representatives present - ? at a member's house.

Summary notes to be taken and put on website as well as e-mailed out to members.

Role of PPG members

Some suggestions were

- Harnessing the skills of patients e.g. with social media or website skills to support the practice, organising events
- PPG members to take over or contribute to the practice newsletter
- Give a patient perspective on complaints and significant events
- Help out in the waiting room by e.g. assisting patients with using the patient check-in machine, or helping at flu clinics (maybe moving the machine nearer to reception to make it more prominent)
- Promoting the group in the waiting room by handing out leaflets and signing up new patients to the group
- Think about ways to communicate with patients other than e-mail
- Helping with patient surveys
- Think about useful messages to convey to patients – e.g. DNAs and other wasteful practices
- Induction for new patients
- Helping promote the health message of the moment (monthly or 2 monthly)
- Consider making the upstairs waiting room feel more friendly and less isolated.

Conclusions

Everyone was thanked very much for attending. It was agreed that the meeting had been very helpful and that the next meeting should be held in two months time with mince pies!

Kate and David would consider whether they would be willing to promote the group in the waiting room and design and hand out a suitable flyer. Notes would also be sent to all the other existing members, and Kate kindly offered to talk to any of them if they wanted further information or had suggestions.

It was agreed that it is a priority to increase the group size

Michael Leech would send information to the practice about Locality Group meetings which are held twice yearly at the King's Centre, and Chris would circulate this information to PPG members.

Chris Robinson Practice Manager