## PATIENT PARTICIPATION GROUP Minutes

WEDNESDAY, 4 September @ 11:00

**Venue: Orchard Street Health Centre** 

Attendees: Collette Fisher, Practice Manager; Jo Whight, Practice Nurse Plus 4 patient participation Group members

Apologies from 3 PPG members plus Hazel Sanders, Admin team

No.	Item	Added by	Details	Action
1	Geoff Apperley (IESCCG) presentation on 111 Service	Practice	111 is the number to call if you need urgent healthcare information or advice but it is not a 999 life-threatening emergency service.  111 will sign-post or advise you to the most appropriate healthcare service.  111 phones are staffed by highly trained Suffolk based health advisers; language line is available as is text relay for hearing impaired. The healthcare advisers are supported by experienced clinicians	The information on 111 was very informative and useful to all present. The PPG felt that there is a public awareness issue and this could be a contributory factor to the upsurge in use of A&E. There is literature and posters in the surgery and we hand out an information leaflet in our new registrations pack. Suggestions are a local information drive possibly on radio Suffolk; on the buses in the EADT; information could be distributed at schools as this would reach the 'hard to reach population' etc. CF to discuss with the Ipswich and East Suffolk Care Commissioning Group & NHS England.
2	Patient Satisfaction Surveys	PPG	Group discussed questions to be asked on the satisfaction questionnaire and came to an agreement that the majority of last year's questions should be asked again particularly around access, the ability to book ahead and continuity of care plus we should endeavour to raise awareness of the on-line availability of appointments and repeat prescription ordering. It was agreed to offer the questionnaire to as many patients as possible between September	Group will meet again in December to discuss the findings/results of the questionnaire and any actions arising. CF to ensure the questionnaire is posted on the website with details of the generic e-mail address to enable on-line/virtual participation. Group would like to see a box in reception for surveys to be popped into.

			and the end of November and post on website.	
3	Flu Campaign + introduction of Fluenze	Practice	950 vaccination doses on order with the first delivery week beginning 23/9/13. Practice aims to vaccinate over 65 year olds; chronic disease patients, carers and pregnant women.  The Department of health has introduced a new fluenze vaccine for 2 & 3 year olds and we aim to vaccinate as many children as	
			possible; this vaccine is given nasally (puffed into the nostril)	
4	Shingles Vaccination	Practice	New initiative to vaccinate 70 and 79 year old in this 1 <sup>st</sup> year over time all over 70's will be vaccinated against shingles.	The group were not aware of this initiative and were interested to learn how 'catch up' programmes were implemented.
5	2013/14 Clinical Initiatives	Practice	The Care Commissioning Group, which came into force on the 1 April, is leading us locally on the drive to reduce emergency admissions related to the following:  Dementia; Diabetes and admission prevention in general.  Also reduce Outpatient referrals for the following areas by effective management in the community:  Irritable bowel syndrome; back pain and atrial fibrillation (irregular heart beat).	
6	Care Quality Commission	PPG	The Care Quality Commission (CQC) is much talked about in the media, some practices in Ipswich have been inspected and we will be inspected at some point in the next two-years. We invited the Local	

7	BMA/RCGP survey	Medical Committee to carry out a mock inspection which went quite well; it is always helpful to have a fresh set of eyes looking around the surgery and highlighting areas that could be better. Patient input is always welcome.  BMA/RCGP survey GPs are fearful we cannot continue to provide a high quality service, we will of course, continue to the best of our ability, but how can we encourage appropriate use of services?  DNA's are fairly frequent but the worst recent misuse of our valuable service was a family of 5 booked 5 apps. booked for travel that accounted for one hour and 40 minutes (travel is 20-minutes per app) 3 members failed to attend one hour wasted – we are not allowed to instigate a booking fee and are duty bound to offer travel health appointments somehow we need to raise public awareness of the costs involved in the use of NHS services and the waste involved in DNA's – suggestions?	PPG agreed that the waste is horrendous and the general feeling is that the public perceive the NHS as a free service so there is no cost element. Public awareness campaign is much needed, it's our NHS and we all pay for it so let's not abuse it!  In relation to travel appointments the group unanimously agreed that a £10 booking fee should be charged which will be refundable against any vaccination charge incurred; if there is no charge for vaccination the £10 will be refunded; however, if the patient fails to attend without prior warning the fee will not be refunded and will be added to the practice improvement fund.
8	AOB: Patient Information	The group suggested that it would be helpful if the patients in the waiting room were kept informed in regard to appointment delays; i.e. when clinicians are	CF to ensure that reception staff update as much as possible.
	Doctors in training	running late.  Discussion around the supervision of junior doctors and how patient safety is maintained. Not all were aware of all the	

steps involved but all left with a greater knowledge, understanding and appreciation of being part of a training practice.	
NEXT MEETING: Wednesday, 4	
December 2013	