MINUTES OF BEDMINSTER FAMILY PRACTICE PATIENT PARTICIPATION GROUP THURSDAY 11TH July 2019

Those present: Sue Ashford (Assistant Manager) Rose Ross RR (scribe/administrator)

PPG members - JA, PG, SG, RH, SM, VW Interpreter A

Copies to : Those present, Apologies, Secretary

	ACTION	
1.0 Welcome		
Apologies: Apologies received from: LG, LA, JB, MB, CM. No GP was able to attend today due to holidays. LG was unable to attend, SA agreed to chair. LG has decided that he should		
stand down as Chairperson but is keen to remain on the PPG. SA passed on a huge 'thank you' for his time and dedication over the many years he has been Chair.		
2. Action from previous minutes		
 Annual PPG conference 15th June at Cheltenham Unfortunately no PPG members had been able to attend the conference. 		
 PPG Awareness Week 10th – 15th June Unfortunately there were no PPG members who were available to man a table in reception during that week 		
 Hand gel sanitiser at entrance to waiting room The Practice is looking at whether we can get a hand sanitiser on the wall on the inside of the waiting room by the doors. 	SA	
• Supporting Deaf patients LA had been unable to attend the meeting to discuss the challenges to deaf patients and the importance of all GP's and staff being deaf aware. RR will put this topic on the agenda for the next meeting.	RR	
 Practice Website The logo has been added, the forms have been checked and the content revised. 		
 Community Webs Charitably funded and work across BS3. Referrals are made by staff particularly for those with social isolation, housing or benefit issues and can signposted to activities/groups. Future is uncertain as we do not know what will happen with the current funding arrangements. The group would like CW to come to a PPG meeting to discuss in more detail. 	RR	

		T he set is a set of the set of	
2		The previous minutes were agreed G Members and Constitution	
3.	PP	G Members and Constitution	
	a)	Chairman – There is a need to make arrangements to appoint a replacement Chairperson who must be a patient. It is largely down to the PPG but the Practice could help by putting notices on the website and display notices in reception. PG asked whether the nomination of a chair person should be more formal. Discussion took place as to whether a chairperson could be from the virtual PPG members but SM thought it would be unusual to choose a chairperson who had not attended a PPG meeting.	
		PG suggested that a vice Chairperson is needed as well to stand in when necessary.	
		PG asked who will take over the Chair in the interim period. PG offered to stand in as temporary chair in the interim period and to share this role with RH. There were no objections.	
	b)	Constitution RH had kindly reviewed the existing BFP PPG Constitution and SA expressed her thanks for his hard work. His draft Constitution had been e- mailed to PPG members on 9 th July for them to read before the meeting on the 11 th July. A copy of the current Constitution had been e-mailed to members on the 9 th April. RH and LG offered to meet up before the next meeting to review the document and to draw up the final draft.	
		LS is in agreement with the majority of the draft Constitution and is happy to meet up with RH between the meeting . Her comments this far:	
	•	Purposes – Lynda would like to finalise these once the group has had its discussions about likely PPG activities. SA distributed handouts titled "Ideas of some Purposes that may resonate with the PPG".	See attached
	•	Membership - need to allow carers of BFP patients, even if they are not patients themselves. 16 is fine but she would also be happy if this were up to 20.	
	•	New Secretary - needs to be appointed and would like that person to Deal with Minutes, Agendas etc, though as a practice Rose is happy to circulate documents.	
	•	Meetings - Would like it to be the Practice Manager or Assistant Practice Manager with standing item.	
	•	Finances – no funding for PPGs though the practice does provide the room, refreshments, and NAPP membership. As the PPG has not been involved in the type of activities which have resulted in a request for financial support, Lynda would prefer that, initially at least , spending is on an ad hoc basis. Her understanding from other practices is that PPGs approach the practice with ideas of things they would like to do/achieve and the practice considers how it may be able to help	

	1
It was agreed the RR would re-send out the draft PPG constitution which has been drawn up by RH together with the current PPG constitution . Members should have 14 days to review the draft Constitution and to reply to Rose Ross with any comments or amendments they wish to make. After this deadline PG, RH and LS will arrange to meet to review the document and the final draft will be e-mailed out to members 14 days in advance of the next meeting which has been arranged for Thursday 10 th October 2019.	RR
4. Ideas for PPG Activities	
 Discussion took place regarding how to recruit more members. PG suggested an event in the surgery. SA read through "Ideas for PPG Activities" suggested by LS. Health promotion & education (key area for GP practices at the moment) Contribute ideas about what would patients like to see on our waiting room screen. Talk to patients about the Friends & Family Test & encourage completion of 	
 Work with other PPGs in our PCN or local area to gain wider views and consider if there are things the PPG could do at a wider level. Organising health awareness events (e.g self-help groups, talks about over the counter meds, how pharmacies can help, local services or charities) Organise events and activities – local walks, classes, speakers, coffee mornings. 	
 Bridging communications with patients in relation to development topics such as Care Navigation, PCNs, Appointment Procedures, Flu procedures/ clinics, Accurx. NAPP – does the PPG want the practice to continue membership? What benefit are the PPG getting from this and how are they using it and its resources, etc. 	
 Conduct patient surveys and collage feedback Fundraising – to improve services. Liaising with local health care providers or charities – may be able to get them to an education event or talk or promote to patients. Contribute to the PPG page of the website with articles or content Agendas, Minutes, etc 	
 Leading local patient walks – e.g short local strolls to tackle social isolation and great exercise Set off regular or ad hoc patient groups – e.g. around a particular health issue such as diabetes. By patients for patients. Come up with ideas and win funding from local commissioners to roll out their ideas. 	
 5. Practice Update a. The Practice will shortly be recruiting for an Advanced Nurse Practitioner. 	
b. Accurx – Not just to provide test results but has lots of applications that	

will help the Practice work more efficiently and provide quicker service to patients. Maybe once we start to use it, the PPG might be able to	
gather some feedback and ideas from patients.	
c. A Clinical Pharmacist has joined the practice this month and in due course this will become a patient-facing role. JA asked how does the pharmacist deal/communicate with deaf people. SA asked JA how she deals with queries over her medication. JA said that when she needs to communicate any queries she writes them down	
d. DNA – RH was keen that more was done to reduce DNAs. A more updated and stringent DNA policy may be reintroduced. RH asked if it is possible to find out why patients do not attend their appointments eg weather, bus services.	
RH asked if the Practice Update should be changed to Information Notes and not recorded in the minutes.	
7. Any Other Business	
PG wished to pass on a positive comment regarding the efficient manner in which a receptionist dealt with an urgent referral. SA will pass on the positive comment.	SA
Next Meeting: THURSDAY 10 th October 2019 at 3.30pm	

The Patient Participation Group plays an important role in the life of Bedminster Family Practice. If you want to get involved, please ask a receptionist