

Praze Surgery Patient Participation Group

Minutes of Praze Surgery PPG Meeting held on Wednesday 22nd March 2017 at 7.00pm

Those Present:

Mr J Nash, Mrs M Nash, Mrs J Thompson, Mr T Iremonger, Mrs E Pinto-Willis, Mr J Gorst, Mrs A Talbot, Mr A McLeod, Mrs A Prior, Anne Craig (Practice Manager)

1. Welcome and Thanks to all attendees.

2. Apologies received from Mrs C Iremonger, Mrs M Tipton, Mrs C Gravett, Mrs C Sampson

3. Declaration of Personal Interests

No declarations made.

4. Matters Arising from Minutes of Previous Meeting on 22nd February 2017

- AT - in the interests of cost savings can the picture be taken off the header for future minutes. *Actioned*
- MN – Cornwall Stroke & Aphasia Network posters were on display but no handouts/flyers had been prepared. *Actioned*
- JT asked if the minutes of the previous minutes were agreed and could be signed.
Proposed by M Nash
Seconded by E Pinto-Willis.
Agreed by All present

Minutes of previous meeting signed by PPG Chair as a True Record of the meeting.

5. Election of PPG Vice Chair

JT advised that the Vice Chair post had not yet been elected for the PPG Committee. Following discussions and proposals the following committee official was elected.

- PPG Vice Chair: Mr Alastair McLeod – Proposed by Mrs A Prior
Seconded by Mrs A Talbot
Agreed by all present.

6. Signing of Code of Conduct & Safeguarding Declarations

- Confidentiality Agreement including Code of Conduct & Safeguarding Guidelines to be signed by all members. AC confirmed that these would be ready for the next meeting.

7. Agree Terms of Reference and Constitution

- After discussion it was agreed that the PPG should adopt the Patients Association version.
Proposed: Mr A McLeod
Seconded: Mr J Nash
Agreed by all present

8. Agree sharing of personal contact details among group

- A consent form was circulated for the sharing of personal data amongst PPG members i.e. email or home address.
- This will be reviewed at six monthly intervals.
- Attendees at meetings will be invited to sign the consent form.

9. View and approve 2 Power Point Films for screen use in surgeries

- The idea of the films was discussed at the inaugural meeting in December 2016. JT presented the 2 films and a discussion took place after each.
- Film 1 ends in a quiz for the watchers and the PPG members participated in this.
- Points made by members:
 - Where is the MIU (Minor Injury Unit)?
 - What is the difference between MIU and A&E?
 - Could slides be slowed down?
- Slides – pictures more useful than too much text e.g. patients who were feeling ill may find pictures easier, stroke sufferers could not read the slides quickly.
- Could there be a note at end of film advising text available in other languages as we cannot assume patients are English speakers/literate.
- Film 2 – very useful, again could slides be slowed down?

- Further discussion re waiting times for appointments. Members felt that the receptionists should be aware of late running clinics and apologise to all waiting. A human voice is a good way to calm down those patients who may become frustrated by lengthy waits. AC confirmed that reception staff do apologise when patients book in. In the event of a lengthy delay caused by GP/Nurse dealing with an emergency staff will go out into the waiting room to apologise and offer to re-book if patients cannot wait any longer.
- Nurse appointments not always respected
- In summary all agreed that the slides should be clearer and slowed down. Otherwise members were happy for the slide shows to run.

10. Any Other Business?

- JG – practice seems short of nurse appointments as it is difficult to get appointments. Discussion re long days for nurses.
- Publicity for PPG – Notice Board in each surgery.
 - AM advised that The Chronicle will continue to be published.
- AM- should PPG have a policy or procedure for who patients should approach if they wish to raise an issue/problem? Patient may be apprehensive to approach surgery as they don't want to be seen to be making a 'fuss'. Could we set up a conduit so that PPG members could speak on someone's behalf and pass the matter to the appropriate person in the surgery? Should we put something on the slides? Would patients be wary of speaking with someone they knew? AP advised that she would be happy to represent patients.
- PPG Suggestion Box – sited by TV screen for ideas and comments from patients for the committee members to discuss.
- PPG members would have to make it clear that they could only pass matters on. AM – the first port of call should always be the person in the practice i.e. Practice Manager. Perhaps if the patient felt they were not listened to AC could refer the patient to the PPG members and vice versa the PPG would refer patient to AC or act independently on their behalf. Agreed to publicise – recommend practice, then offer PPG (PPG to AC or AC to PPG)
- Comments received by a PPG member re 1) height of reception desk – quite high and can be off putting and 2) attitude – sometimes comments to patients can be quite brusque.
- AP, TI, CI, JN & MN volunteered to be conduits/representatives if patients wanted to raise an issue with the PPG in the first instance.
- Dot Matrix signs in waiting room – members commented that the messages were 'boring'
- Posters in waiting room – too many – AM felt that power point slides would have more impact than all the posters.
- How can the group raise awareness and get involvement from a wider range of patients e.g. younger patients, those with families, overseas workers, vulnerable patients.
- Does the surgery ever have to deal with trouble/violence from patients
- Replacement GP for Dr Sharp leaving on 3rd April. Patients want continuity from GPs.

- Do we have a limit on number of attendees? AC confirmed large meeting room on 1st floor can be made available. This meeting took place in s maller meeting room on ground floor at Praze.

11. Date of Next Meeting:

Wednesday 26th April 2017 at Praze Surgery starting at 7pm.