**STOCKTON HEATH MEDICAL CENTRE**

**PATIENT PARTICIPATION GROUP**

**Minutes**

**Wednesday 15 January 2014**

**5.30pm – 6.30pm**

**Present:** Karen Chriscoli, Kit Heald, Roy Knight, Allan Mackie, Heather Miller, Susan Scales-Barlow, Zoe Thompson, Bernie Wilkinson, Hilary Wood, Katie Lightfoot from WCCG-EEC team

**Apologies:** Gareth Cox, Jack Froggatt, Julie Scholes, Dorothy Carter

**Resignation**: Ian Mackenzie

**Happy New Year!**

* **Warrington Clinical Commissioning Group: Engagement, Experience and Communications team**

Presentation given by Katie: copy to be emailed to members.

EEC team hosting a bi-monthly meeting for members of PPGs to which we are invited. Next meeting is on Wed 22nd January 10am-12 at Arpley House, Birchwood.

Purpose of the meetings: to enable discussion and passing on of best practice, ideas, support and help, etc. A newsletter is being published to run alongside these meetings.

Katie was thanked.

* **Recruitment of new members for PPG**

New signs in reception, Heather suggested information goes to Priestley College, Katie suggested that the EEC newsletter could help with this.

The virtual group needs to be re-launched hopefully addressed will be gathered through the survey and requests on prescription slips.

Karen wondered whether there are ways by which we can support groups being set up in the way we can already support existing groups. She gave the example of Men’s Sheds: menssheds.org.uk. At the moment the Practice can only advertise established groups.

* **CQC visit in previous week**

Gave notice on the Thursday that they were coming on Tuesday 7 January 2014. Did not tell which Outcomes they wished to examine until they arrived (see hand-out) but all were ready.

* + ***Respecting and involving people who use services***: PPG doing good work and engaging well
  + ***Care and welfare of people who use services***: training is taking place over the next few weeks on the topics of: dementia, fire, customer care
  + ***Safeguarding***: everything OK
  + ***Complaints***: more interested in the compliments. Was interested in how the practice was taking Doctor First forward rather than focusing on the problems with appointments and telephone access as he could see the work being done to address the issues.
  + ***Requirements relating to workers***. Staff files were checked to ensure correct recruitment procedures were undertaken. Training records were checked particularly Safeguarding and Information Governance. Checks were also made to ensure all staff had the correct CRB/DBS checks were carried out and that clinicians had up-to-date registrations with professional bodies such as GMC/NMC/MDU etc.

Overall a good outcome and the practice should be proud. The Practice was informed that they met all the outcomes without any concerns and a full report would follow.

* **Dr First**

Information seems to have got out widely and people are aware of the changes even if not the finer details.

The first message that people hear when they phone is Dr Palmer explaining the system; this gives patients the knowledge that it is being done with the authority of the Partners and full team behind it.

Hand-outs - showing good feedback received in first 3 days.

Generally happy with how it is working but some tweaking needs to be done.

The clinicians’ points of view: needs to be a bit more flexibility e.g. with teachers, the times that phone calls are returned is usually the time teachers are teaching and when teachers are available is when the surgery times are. Some patients are not answering the phone even though know the call is coming.

Karen is collating positives and negatives from individuals to determine how universal each issue is.

It will free up nurse time for other work such as disease management.

* **Productive General Practice: appointments and prescriptions**

Appointments problem been addressed by Dr First.

Prescriptions: the system has been altered with positive results. A core team now works in the prescription office and is looking at the processes to address any necessary changes.

The clinical team is to begin work on the Prescribing module to ensure they all work to the same guidelines and best practise. They will also prepare an “Urgent Medications” list to enable counter staff to be able to deal with requests with more authority behind them.

* **The new survey** (copy given) is to be distributed in the surgery in the week beginning 27th January with 11am-1pm and 3.30pm onwards being the best times for any PPG members to help.

With the decreased footfall in the surgery it will be important to reach as many people as possible both in person and electronically.

* A **donation** of £80 has been given to the surgery by a patient and ideas are required of what can be bought with this.

One idea is for a higher chair with arms for each reception area to assist those who struggle to get up from a chair without additional support.

Other ideas please send to Karen by 25 January 2014.

* The **Code of Conduct** for members of the group was re-distributed
* **GPES** mail shot due out soon to all households in England.
* **Zoe asked that members of the group** look at the website of Robin Lane Medical Centre, Leeds particularly with regard to the community or well-being centre that has been built. This is an innovative healthcare idea and she would like to know what we think of it. http://www.pudseywellbeingcentre.com/
* **Date of next meeting**: Wednesday 26th February 5.30-6.30pm at the surgery