**The Cottage Surgery**

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**Patient Reference Group [PRG]**

**Draft Minutes of the Meeting on Tuesday, 23.5.17 at 6.00pm at the Cottage Surgery**

1. **Attendance**: Present were Les Pole (Chairman), Rod Hudson (Treasurer), Colin Brookes, Ann Irving,
Liz Shrives, Sue Taylor, Dr. Steve Clay (GP), Dave Harris (Assistant Practice Manager)
and Margaret Taylor (Secretary). Apologies were received from Claire Ayres, Marsha Blisset, Anne Gray, Emma Pattison and Karenna Galer-Coombes

2. **Minutes of the Meeting on 7.2.17**: The minutes of the meeting on 7.2.17, having been previously circulated,
were taken as read and approved.

3. **Matters arising not otherwise on the agenda**:
 a) Good Neighbours Scheme: Claire Ayres had sent a brief report (attached) indicating that the Good
 Neighbours Scheme is progressing well. Consideration is being given to developing the aspect of
 providing companionship.
 b) Driveway improvement funding: Dr. Clay reported that there had been no progress on this.
 c) First Aid Training: Sue Taylor reported that a useful and enjoyable session had been held the
 previous week, led by Bob Lilley with fifteen people attending. Another Session was planned for
 Wednesday 24th led by Sue with twelve people booked. Les Pole suggested that other similar
 sessions should be arranged and the meeting concurred.

4. **Treasurer’s Report**: Rod Hudson reported that there had been no major payments or receipts and that
 the balance stands at £566.83. A replacement ear machine had been bought but the cost had been
 met from other funds. No immediate expenditure is anticipated although there may be a small
 contribution needed towards the cost of a meeting room for the South Charnwood PPG Network.

5. **CQC inspection**: Margaret Taylor presented a statement which she had prepared on the CQC Report
and findings *(attached*). In discussion PPG members agreed that the report contained unacceptable inaccuracies and exaggerations and the rating given did not represent the excellent care given to patients by the surgery. The manner in which the inspectors carried out the inspection was flawed and the CQC processes for correcting inaccuracies was not fit for purpose. While the investigation carried out under the CQC Complaints procedure did partly uphold some of the complaints, the investigator’s response to others was indicative of an unacceptable variation in requirements caused by the freedom given to inspectors to determine the standards required. In the case of one complaint the investigator was ‘unable to determine the outcome’ because the inspectors’ record differed from that of the surgery staff. The PPG thought it unfortunate that the investigator had thought it appropriate to speak to the inspectors about this but not to speak to surgery staff.

 The PPG reaffirmed its view that the care given to patients by the Cottage Surgery staff is exemplary and that, notwithstanding the CQC’s rating, there is no risk and has never been any risk to patients’ safety. Colin Brookes gave a typical example of the level of care when he described how Amy Weightman took a blood sample without Colin feeling the needle. Others shared the same experience and acknowledged Amy’s skill.

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6. **NHS Concerns**: a) The meeting noted briefly the on-going concern about delays in treatment and the funding challenges faced by the NHS.
a) Margaret Taylor told the PPG of a meeting she had attended informing patient representatives about developments in the keeping and sharing of patients’ summary records. It is now possible to include more information but only with the patient’s consent. It is hoped to make it possible for consultants to add appropriate information about prescriptions etc. but this is not at present possible because of data protection regulations.

7. **South Charnwood PPG Network**: This was begun about a year ago with funding from the CCG but that funding has now ceased and the Federation staff informed members that the Network would no longer meet. However some of the patient representatives believe that meeting together can provide support and enable the sharing of ideas and are planning to invite patient representatives from each of the surgeries in South Charnwood to a meeting on June 8th to consider if and how we can continue organize the network ourselves.

8. **Reports of meetings attended**: It had not been possible to produce reports from the WLCCG PPG Network and from the LLR Alliance, the Planned Care Board and UHL Patient Groups but notes of relevant items from these would be circulated later. (*attached*)

9. **Dying with dignity**: Colin Brookes shared with the meeting a news item on the decision of a German court to legalise the purchase of prescription drugs to allow people who so chose to end their own lives with dignity.

10. **Patient Feedback**: There were no particular items of feedback from patients of the Cottage Surgery to report although there was some sharing of patients’ experiences elsewhere.

11. **Other Business**: Ann Irving shared with the meeting some comparison figures of patient feedback taken from NHS England GP Patients Survey showing how the Cottage surgery outperforms Quorn Medical Centre in all but one area and does significantly better than the national average. Ann also shared a list she had produced of the Achievements of the Cottage Surgery Patient Participation Group since it began as the Friends of the Cottage Surgery. (*attached*)

12. **Next Meeting**: The next regular meeting will be on Tuesday, August 8th at 6.00 pm at the surgery, unless otherwise advised. Ruth Waddington from WLCCG has asked to meet with the PPG members to consider the CQC report. The meeting agreed that the secretary should contact her to try to arrange a suitable time, possibly during the day, when a number of PPG members could meet her.

 Margaret Taylor 30.5.17