NEETSIDE SURGERY

PATIENT PARTICIPATION GROUP

MEETING – MONDAY 27th JANUARY AT 6.15pm

MINUTES

Present – Jonathan McConnell - Chair, Gemma Sampson, Mike Wreford, John Goacher, Dr Mike Dowling, Melanie Chenoweth – Practice Manager

1. Minutes of last meeting

Minutes were agreed and signed by Chair

1. Feeback of current news from the surgery
2. Stratton Hospital - is going very well with good, positive feedback from patients, relatives & nursing staff. We are now looking after 12 beds plus the day bed.
3. Trainee/Registrar – Since we last met Dr Radford has completed her training and is now working as a locum, Dr Chandrika Shivakumaran will be here until 1st April. We currently do not have another trainee arranged, but hope that the deanery will have somebody for us as we do enjoy the training aspect.
4. The process of getting an online appointments system and facility to do prescriptions online is underway.
5. Updates and links are continuing to be posted on the surgery’s Facebook page. Discussed that there are not many people using this and whether we could advertise it in the surgery. **ACTION –BY SURGERY**
6. A photo of the staff has not yet been taken, Jonathan offered to come in and take photos. The other option would be for Dr Dowling to take action shots of staff! **ACTION – TO BE ACHIEVED BY NEXT MEETING**
7. Melanie reported that the number of patient numbers was now up to 4050. Concerns were voiced about the amount of new houses being built and whether there were enough resources. Melanie and Dr Dowling reported that there were no actions in place by the developers to help with this population increase in health care terms that they are aware of.
8. Melanie reported that the new phone system is due to be installed this week. There will be an initial period of changeover when people that ring the previous number will hear a message giving the new number.
9. **PPG Setup** – the setup of the PPG was discussed by all and agreed to be working well. Melanie thanked members knowing that they were all very busy and did not want to ask them to have to devote more time than they already were.
10. **Virtual PPG** – It was agreed that the minutes of the PPG meeting should be emailed to those that had expressed an interest in joining the virtual PPG and that they were invited to comment and if at all possible attend any meetings they felt they could.
11. **Useful Information –** John bought in an example of a “Information for Patients Leaflet”. Although it was agreed that this was a good leaflet it was explained that this would be very expensive exercise and that as a practice we did not believe in advertising (which is how the example seemed to be paid for).

It was agreed that the useful information for patients was a good idea and a section would be added to the Practice Leaflet that we currently have. Ideas included, family medicine cabinet, meningitis information, useful telephone numbers and child vaccinations.

1. **Living Wills –** Gemma has gathered all the information to write the piece on Living Wills and will type up shortly.
2. **Care Data –** This was expanded on from the last meeting. Melanie explained that there were two different extractions the Summary Care Records which started being implemented 2 years ago. This is where relevant health organisations can view patients medications, allergies and adverse reactions. The patient will be asked their consent to view their SCR except in certain emergency situations. Patients can opt out of this scheme.

Care Data (alias Better Information means Better Care) refers to the Health and Social Care Information Centre (HSCIC) being able to extract data from GP practices and other care settings. Extractions are due to start in Spring 2014. Info will include: family history, vaccinations, diagnoses, referrals, values (such as blood pressure) and all NHS prescriptions. Identifiers used will be DOB, postcode, NHS numbers and gender. Patients have two opt out options for this scheme, dissent from secondary use of GP identifiable data and/or dissent from disclosure of personal confidential data by Health and Social Care Information Centre.

Both schemes allow the patient to opt in or out and patients can change their minds at any time.

1. DATE OF NEXT MEETING

The Date of the next meeting was set for **MONDAY 28th April 2014**, 6pm at the Surgery, subject to change – members to be informed of such a change by MC.

The meeting then closed at 7.25pm, Dr Dowling and MC thanking all present for their attendance.