

CLARENDON LODGE PATIENTS PARTICIPATION GROUP

MINUTES OF MEETING 19/11/13

Present: Michael Pearson (Chair), Sally Jury, Maureen Hirsch, Martin Merson, Anthony Cox, Bridget Winn, Sam Grover, Stephen Gallagher (Practice Manager), John Fullbrook (Senior Partner)

Apologies: Emma Haddon, Kate Sayer, John Pickering

Michael explained that Kate was tied up with family issues and would not be able to attend meetings until later next year.

Minutes of last meeting and matters arising

Stephen pointed out that there were some revisions needed to the section in the last minutes concerning the Community Liaison nurse. He would do the necessary changes before putting the notes on the website. **Action - Stephen**

As Maureen had been unable to send information out about the last CCG meeting she gave a verbal presentation to the group about the talk given by NHS England.

Three major points were raised for feedback from PPG members

1. What are the key characteristics of the NHS that we must retain for future generations?
2. What future opportunities should we be looking to seize?
3. What needs to change to deliver a sustainable and high quality health care system?

Feedback from PPG members to Maureen as soon as possible. **Action - ALL**

Anthony mentioned a project at the Shipston-on-Stour Practice about avoiding waste concerning prescribed medication. He agreed to email the information to members.

Action -Anthony

Michael also said he had some information on the subject and would forward this to all.

Action - Michael

Meetings attended by members

None reported. Next CCG patients meeting is on 11 December at the Sydni Centre. Michael and Maureen to attend.

NAAP information:- Michael to send latest e-bulletin to members

Bulletin suggests that all PPG members are required to sign a confidentiality clause as required by the CQC. The group was not sure this was necessary so Michael to follow this up.

Action – Michael

Date of next meetings

Tuesday 10th December 2013 and Tuesday 21st January 2014

Michael suggested that the January meeting should be the AGM as it will be one year since the PPG was formed. More details at the next meeting.

Work Planning

Newsletter

The first Newsletter was launched successfully and plans are now in place to produce the next one in January. Feedback from members will be taken on board and more information will be included about the work of the PPG throughout 2013. Emma has been approached about describing the work of the reception team.

A PDF version was agreed upon and Sam agreed to assist with this as necessary.

Action - Anthony/Emma

PRG recruitment

Michael reported that this was going well and currently 23 patients have applied. There was a problem at present with communication as Kate holds the email list but will be unable to continue her work at present. Sam and Kate to discuss how to proceed with this

Action - Sam/Kate

Children's project

Bridget reported that following the presentation by Healthwatch at the last meeting she has been invited to a children's feedback session on the questionnaire about younger people's views on their health care. Michael also to attend. Meeting is on Friday 22 November.

Action – Bridget/Michael

Practice news

Dr Fullbrook reported that Dr Rashid would be doing extra sessions to cover for Dr Chan's sick leave. Dr Rashid is a very experienced GP who has worked at the practice as a locum for many years.

The Practice will be carrying out Health Checks on patients between 40 and 74 years old on Saturday mornings. These patients are ones that do not present with any obvious health issues and are not on medication.

Dr Norton has now joined the practice to cover Dr Alsop's Maternity Leave. Dr Norton will be here until June 2014.

Dr Roberts will be returning to the practice in May as a salaried GP to replace Dr Colliver.

There are currently 12,680 patients on the Clarendon Lodge list and concerns were expressed that this situation was becoming unmanageable within the current practice setting. Unfortunately the need by NHS (England) to save considerable sums of money make it unlikely that new premises for the practice will be approved.

Dr Fullbrook explained that in order to cope with present demand most GP's have to work 12 hours per day. Pressures on all staff are considerable and show no sign of easing in the future.

The new appointment system is bedding in quite well and the next practice questionnaire enable patients to give their views for analysis. The triage system is working well for patients who cannot get an appointment on the day. A GP contacts these patients for a discussion about their problem resulting in only one quarter of patients needing to be seen.

A Pharmacists perspective.

Michael welcomed Alison Abbot to the meeting. Alison is a pharmacist working at Boots the Chemist in the Parade. Alison led a lively discussion on the role of the pharmacist and how pharmacists can provide considerable health care advice to people and perhaps lessen the load on GPs.

There were mixed views on the effectiveness of this service. Some members would seek pharmacist's advice whilst others would only consult with their GP. It was felt that the pharmacy service should advertise more widely its services to patients. Currently Boots do not make this clear to customers. They do however have a consulting room available if privacy was required.

There was some concern that promoting this service would take the pharmacist away from their front line role of dispensing. However Alison was confident they could cope with demand. As a contrast Dr Fullbrook stated that the Practice would carry out 400 consultations a day – many, many more than a pharmacy could cope with.

As a follow up Alison agreed to liaise with Michael on producing a simple general guide to pharmacy services. Michael would circulate this to members of the PPG and PRG for comment and to determining how many members would seek pharmacy advice prior to

considering a GP appointment. Michael thanked Alison leading the discussion in such an informed and interesting way. **Action - Michael**

The meeting closed at 7.45.

REMINDER NEXT MEETING:- TUESDAY 10 DECEMBER

Abbreviations

CQC – Care Quality Commission.

CCG – Clinical Commissioning Group

LAT – Local Area team NHS (England)

PPG – Patients Participation Group

PRG – Patients Reference Group – a virtual group providing feedback to the PPG.