**Minutes of the Patient Participation Group (PPG) meeting held on Tuesday 29 July 2014**

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**Present:**

Cathy Jones (Chair)

Ann Bennett

Ian Bennett

Judith Davies

Lovemore Kamuzingeni

Senior Practice Nurse/Team Leader, Jackie Moore joined for part of the meeting.

1. **Minutes of the last meeting**

The minutes of the last meeting held on 20 May 2014 were agreed as a correct record.

**2. Matters arising**

Membership – CJ introduced Lovemore Kamuzingeni to the group, who lives in Hilton. LK was interested in representing ethic/minority groups on the PPG and wanted to come along to attend a meeting.

CJ confirmed that Martin Cocker had now moved out of area and therefore resigned from the PPG. CJ had thanked Martin for his contribution to the PPG over several years.

CJ confirmed that she had written to the local schools to invite membership as discussed last time, but as it was the summer holidays it would be unlikely we would receive any response now until September/October time.

Future input to PPG meetings – Dr Aiton to attend the September meeting to meet PPG members. CJ to arrange for other staff members, including Karen Toby, Reception Manager and Laura Webster, Assistant Practice Manager to come along to the PPG to explain their roles.

CJ to present an overview of the GP contract to the PPG as discussed, but explained that as details of changes from October were still being finalised it would probably be more helpful to do this later in the year.

CQC visit

CJ had now obtained a small supply of PPG name badges for use as required.

AB/IB had conducted an informal survey and discussion with patients in the Waiting Room, as discussed last time, to help give some up to date feedback to the PPG and which could be useful to pass onto CQC at a future visit. The questions, agreed with the practice, covered appointments, doctor of choice, appointment length, telephone consultations, extended hours and attendance at A & E and Walk in centres. AB/IB shared the results which were generally very positive. It was felt that, although there would always be some appointment issues, satisfaction had generally improved and feedback indicated a good practice with good clinicians. CJ agreed to pass this onto the staff as it was recognised we did not always receive the positive feedback.

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AB invited other PPG members to consider participating, either now or in the future, to increase number of responses, if they would like to do so.

LK felt it was helpful to publicise costs of services, e.g. the recently publicised cost of an A & E attendance, which he felt caught the eye. He explained that in his experience the Asian community believed that they would be better attended to in A & E than in primary care and therefore attendance at A & E was the norm in this community. Further educational input would therefore be useful where possible. It was felt we could include something within the next Newsletter and/or online, via Facebook.

Carers’ Coffee morning – JD confirmed that she had attended this event and that, although numbers were small they were a welcoming and supportive group.

**3. The Role of the Practice Nurse**

Jackie Moore, Senior Practice Nurse/Team Leader, attended to give an overview of the role of the Practice Nurse at the surgery and how their role had developed. Jackie explained the structure of the team:

Jackie Moore: Senior Nurse/Team Leader – 32 hours p.w.

Karen Doyle: Practice Nurse – 24 hours p.w.

Helena Jacobs: Practice Nurse; 12 hours p.w. (currently on maternity leave) and covered by Zoe Brown until May 2015.

Natalie Charlesworth, Health Care Assistant – 28 hours p.w.

Jackie explained that they see people across all age groups, from pre-conception advice, pregnancy, new-born babies, children and adults of all ages. She explained that they had a major preventative and screening programme of work including the immunisation programmes of children and adults, including HPV, flu and pneumonia, shingles, travel vaccinations, etc. She explained that they worked closely with the school nurses with regard to the health care of school children and teenagers.

Jackie described the programme of chronic disease management, where nurses had a primary role in this area, e.g. asthma, diabetes, heart disease, etc. Other areas included work with young families, blood tests, blood pressure monitoring, including 24-hour monitoring, family planning, cervical screening (smears), ECGs, NHS health checks for cardio-vascular disease (CVD), cryotherapy, Dopplers, dressings, care on discharge from hospital, including post-operative removal of sutures, etc. The Practice Nurses/Health Care Assistant also assisted the doctors with minor surgery procedures.

She explained that we also offered a service for those patients on Warfarin (anticoagulation therapy) who required regular monitoring; this included home visits where required. This provision in primary care saved them regular visits to hospital. It was noted that not many other local practices provided this service.

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Jackie explained that she was also an Independent Nurse prescriber, so could issue prescriptions where necessary within her area of responsibility.

The group discussed how the role of the Practice Nurse had developed and now the Practice Nurse was often better placed than the doctor to provide the care required, e.g. chronic disease management. It was felt that patients did not always appreciate that the nurse, rather than the doctor, was the best person to see them. The more information that patients could give us on their difficulties, when asking for appointments, then the better opportunity that the Practice Administrators had to ensure patients were seen by the most appropriate person. The PPG thought it would be helpful to include reference to this within the next Newsletter.

Jackie explained that the practice had been developing a range of forms and information that was available to patients to access via our website and that it would be helpful for the PPG to provide their comments or feedback on the content and accessibility to patients. LK mentioned that the travel forms were not that easy to ‘find’ on the website. JM/CJ to check this.

**4. Flu Clinics**

Jackie confirmed the dates for the flu clinics for this year as follows:

Weds 8th October, 1.30pm – 5.30pm Frank Wickham Hall, Etwall

Thurs 9th October, 1.30pm – 5.30pm Frank Wickham Hall, Etwall

Sat 11th October, 9.30am – 11.30am Wellbrook Medical Centre

AB explained that in the past the PPG have helped coordination of the flu clinics, which CJ confirmed had been really useful. Anyone interested in helping out at flu clinics to let CJ know please; AB/IB happy to do this again; LK happy to help on the Saturday clinic. CJ to ask Laura Webster to liaise with PPG members regarding this.

AB stated that she could arrange publicity of the flu clinics in the Etwall Express and possibly Hilton Directory free of charge. CJ to ask Laura Webster to liaise with AB regarding this. Note: deadline for September Etwall Express was 18th August.

**5. Facebook profile for Wellbrook**

CJ confirmed that the number of Facebook users of the Wellbrook page had increased to over 220 now, who would be receiving regular news updates etc. The group felt that this was a useful form of communication and could be further used for opinion polls, surveys, etc in the future.

**6. Date and time of next meeting**

Tuesday 30th September 2014, 2.00pm

PMs/CJ/PPG/Meetings/29.07.14.docx/11.08.14