Huntingdon Road Surgery Patient participation Group

Minutes of the meeting held on Wednesday 26th February 2014 at Huntingdon Road Surgery

Attendees:

Bryan Wilmore, Yvonne Higgons, Pippa Temple, Jillian Wilkinson, Ingrid Pryor, Lois Mears, David Faulkner, Daphne Thompson, Michael Woodisse, Kate Lawrance, Maureen Cundy, Robert Sanders, Celia Lindsay (Chairperson), Jackie Grimshaw (secretary), Richard Catchpole.

Practice staff: Dr Peter Connan.

1. **Apologies**: Jill Brighton, Shirley Magilton, Peter Teich, Veronica Becko, Rev. Charles Mather, Patrick Shamdas, Jackie Sanders, Doreen Rees.

Celia welcomed newcomers to the group.

1. **Minutes of last meeting:** agreedand now on the Surgery website.
2. **Matters arising**- none.
3. **Surgery update**: Dr Connan went through the questionnaire spreadsheet highlighting changes from last year’s questionnaire. There were 228 responses which is less than last year (the Core group will look into this). 181 were filled in on paper and 47 were completed on line. Two thirds of patients that filled it in were female, one third male. There was an increase of students filling in the questionnaire this year (19%). The number of patients with internet access increased and awareness of the website has slightly improved. There were a number of patients who did not know about the Patient Participation Group. There was a lot of feedback on the waiting room which 46 comments about reading material, there were also comments about the lack of children’s toys, although less than comments on reading material, (a meeting has been arranged to start addressing this with practice staff and core group members). Patients were not as aware as hoped that urgent appointments could be made at the surgery for the same day. There was an improvement in patients’ experience of the receptionists this year, however waiting times for an appointment were similar to last year and will continue to be monitored.

It was agreed the Core group would be able to make comments on the final response to the DES survey once Dr Connan had completed it. He thanked Yvonne for sending him a draft report including comments from the Core group.

**Proposed Action plan for 2013/14**.

1. To continue to promote and increase the awareness of the Huntingdon Road website, and to develop the website as a means of explaining practice policies.

 *Dr Connan informed the group that 2 new members of staff had been appointed who have good IT skills and would be supporting the development of the website and possibly be a link to the PPG*

1. To look at ideas to improve the function of the reception area and waiting rooms at Huntingdon Road and Girton surgeries.

*There is a meeting on the 12th March with practice staff and member of the core group to discuss and develop a plan to improve the waiting rooms.*

1. To continue to increase the awareness of the Patient Participation Group.

*The core group are developing a leaflet to promote awareness and understanding of the PPG.*

1. To help signpost patients to the most appropriate service for them to attend for their medical problem.

*To help patients understand the appropriate pathways that GP surgeries offer.*

1. To continue to help inform patients how health services are commissioned.

*Use the website to link with CATCH and NAPP.*

A discussion took place at how loose these aims were, it was agreed that part of the process was to develop aims and possible targets. It is important to review the action plan regularly to see how it is progressing throughout the year.

1. **Information from the local commissioning group:** Celia informed the group that the **111 service** is still in the soft launch stage. If you ring this number you will be given guidance on your health issue and the appropriate pathway/ service to go to. 111 service is likely to be launched fully by mid-March. Information about this service will be put in reception areas. It is in operation 24 hours a day.

It was mentioned that the Surgery answer machine needs updating. Dr Connan will check this.

Celia also informed the group that the **Older People’s Programme Consultation** is due to be launched mid-March and will continue until June. A consultation document will be sent out for people to feedback their views of how the new service will be with an emphasis on community care. The feedback forms will be anonymous although you will have to give the first section of your post code. The aim is to provide appropriate services for older people which is joined up and are cost effective.

There are 5 bidders so far, 3 will be chosen by the board very soon, hopefully appointing a provider around September, with the service starting Spring 2015. There are going to be 28 public consultations events throughout the CCG area – Saturdays, evening as well as during the day. It is important people try to attend these meetings and complete the questionnaire.

**A Referral Support Service** has been developed by the CCG where doctors with special interest review referrals to five different specialties for health services and give alternative suggestions, if needed, to GP’s. GP’s have the final decision on the appropriate referral pathway and have found these suggestions from colleagues helpful. Referrals are already taken to a meeting held twice a week at Huntingdon Road Surgery. The process can take 2/3 days unless it is urgent.

A decision has been made by the CCG that **IVF treatments** will be reduced from 3 to 2 which is in line with other areas.

1. **Care data and sharing information**.

There are 3 different systems in place:

1. **Summary care records**- it is assumed that everyone will be in this unless they state they want to opt out. This requires limited amount of data to be given out which can be helpful when seeking medical assistance from a different service/department from usual.
2. **Sharing in sharing out**- this is a computer system – SystemOne used by local services, including GPs to improve patient care. Services should ask for consent to share information at each episode of care.
3. **Care Data**- the aim of this to improve the whole health environment. It is a link with primary and secondary care, its aim is to make sure the right services and treatments are used. The assumption is that everyone is opted in and has to fill in a form to opt out. The service has been delayed for 6 months due to some concerns that data might get to the wrong places. There will be a review of procedures and a fuller explanation to the general public. If used correctly this information could assist research.

There is a link on the Huntingdon Road Surgery website to all three areas of data sharing.

 There are leaflets explaining data information sharing in the reception area of the surgeries.

1. **Future events:** the meeting was asked if they thought an information evening focusing on Keeping Healthy/ Healthy living would be of interest, this would include smoking cessation, diet, diabetes, exercise.

A member of the group suggested a peer support group for people with type 2 diabetes, which would encourage people to support each other while helping themselves.

It was agreed to organise a healthy living information evening.

Another member of the meeting suggested an evening focusing on supporting parents/carers with difficult young people, this could include drug and alcohol issues, depression. Another member thought that this might be addressed in schools. This needs further discussion.

An idea to advertise the Information evenings could be to put it on appointment cards.

A date needs to be confirmed.

1. **AOB**: A member of the group has agreed to sort the magazines and label them. They will be put them in the 3 waiting rooms.

Patients who would like to donate appropriate reading material for adults, young people and children can hand them in at the reception area at both the surgeries. They will then be collected and sorted once a week to start off.

If staff find reading material that is not labelled they will remove it from the waiting rooms. *At a subsequent meeting with the Practice it was agreed that unlabelled and worn out reading material would also be left for the PPG to either label or take to recycling.*

Young people’s and children’s reading material needs further discussion.

1. **Dates of future meetings:**

Wednesday 12th March 2014- PPCG and practice staff to meet to discuss and develop a plan to improve the waiting room

PPG meeting to be arranged.