**MINUTES of PATIENT PARTICIPATION GROUP Meeting, 14th September 2017**

1) The meeting opened at 1200.

Present: Dennis Ford (Chair), Joanne Gibson JG; Toni Goodley TG;

Joyce Lee JL; Patrick Legg Pl (Practice Manager); Brenda Reeves BR;

2) Apologies from: Elizabeth Hyatt, Dr. Michele Legg, Alfred Murdoch, Daniel Perriton,

Sandy Ramdany, Elizabeth Sturton, Ronnie Waterman, Margaret White MW.

3) Minutes of previous meeting on 5th June approved without amendment.

4) Matters arising:

PL distributed 2 papers outlining his vision of how a surgery version of ‘School

Improvement Plans’ can be made to work for the benefit of the practice and patients.

Split into 5 sections: Responsive & Well-led (JG), Caring (TG), Safe (MW), and Effective (JL). The concept is to request individual members to question - in detail - the PM’s responses

to a detailed breakdown of each section. The sections are those designated by the CQC,

so should go a long way towards an ‘Outstanding’ outcome at the next inspection, but more

importantly will be to the benefit of all concerned at Tower House. Over the course of the coming year, the 4 members above will have a number of meetings with the PM, to discuss and question the running of the practice, and hopefully give a short briefing at a PPG meeting to members. A medical background is not necessary, just an open mind and being prepared to question the reasoning behind decisions or future plans. In all it is intended that these meetings should be serious, but at the same time informal and friendly.

5) Practice update:

Dr. Hudson retired on 14th September, to be replaced by another male GP, Dr. Loach from Brading in 2 weeks time; and Dr. Beaumont has also left. This leaves the practice with fractionally less GP coverage than before, but steps are in hand to remedy this.

2 Reception staff have left the practice, but a replacement has already started and a second in 2 weeks time. The paramedic who was much involved with home visits has also left. Unfortunately, to use him on home visits proved to be impractical since he did not have a prescribing qualification.

The surgery is also in the process of having something of a make-over. Re-decorated, with new flooring and chairs being re-upholstered etc. Outside a lot of the greenery is to be cut back to the position it was in when the surgery was originally built.

**Enhanced Access to GP Services across the Isle of Wight:**

This service is intended to start at the end of this month, but is still very much at the planning stage due to the number of other surgeries involved. The provisional objective is

to offer surgery hours: 8 ~ 8, Monday ~ Friday and possibly 9 ~ 3 on Saturdays with Sundays yet to be decided. The hours that are additional to any given surgery’s normal programme

(as per this service) will be available to all across the Island; hence requiring would-be patients to travel to that surgery. Quite how this information is to be promulgated to the public has yet to be decided. It is also intended that the service should include a number

of appointments which do not require a GP presence, such as physiotherapy or sexual health etc. Pre-bookable appointments also available.

One important condition: In order to use this service, if at a surgery that is not your normal one, is that you must be prepared to allow your medical records to be accessed by the other

practice.

6) **Patient & Care Council**:

Details of exactly how this new Council will be expected to work have yet to be decided.

It is assumed that it operate on similar lines to the existing Patient Council, so an outline plan and the duties of that Council were distributed to members for consideration with

the Minutes of the previous meeting in June. Information on the new Council has been requested from the hospital, and as soon as it arrives it will be distributed to all members.

7) Questions and Issues from Members:

MW: What is the situation with the arrangement whereby certain GP referrals of patients to consultants can be ‘vetted’ by a panel?

PL replied that the system still exists and is in use; with decisions made by a local CCG panel primarily on necessity, suitability and specific cases or conditions.

DF: Why are there no toys available in the surgery waiting room for young children to play with?

PL replied, mainly due to infection control and the necessity to keep them clean (referring to the toys!)

TG: Highlighted a page, from the County Press dated July 28th, describing how the Hospice

is helping people with dementia. A Music Group, Carers’ Group, talks by an Admiral Nurse and the Hospice itself with its dementia friendly construction etc. are all available to those who need them.

BR: Questioned the process whereby results from QA treatment did not get to the surgery?

Also, how are they then to be passed on to St. Mary’s for follow-up consultations?

PL to investigate.

**A.O.B**:

Winter Wellness Day – Saturday 23d September – 0900 ~ 1600

GP’s and the Practice Manager on hand to answer questions

Tea, Coffee & Cakes

Nurse Practitioner talking about a Medical Centre in Africa

Flu jabs, and many sources of information regarding good health

The meeting closed at 1330.

**PLEASE NOTE: NEXT MEETING will be on MONDAY 27th NOVEMBER @ 1200~1330**

**IF ANYONE WOULD LIKE TO JOIN THE PATIENT PARTICIPATION GROUP**

**PLEASE TALK TO ONE OF THE RECEPTIONISTS OR CONTACT THE**

# PRACTICE MANAGER – YOU WILL BE MOST WELCOME