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 **Minutes of PATIENT PARTICIPATION GROUP Meeting MONDAY 28th November 2016**

1) The meeting opened at 1200 to introduce 3 representatives from Age UK who were present to

 discuss the role of Tower House as an ‘Age Friendly’ surgery within the Age Friendly Island plan.

 Present: Dennis Ford (Chair) DF, Joyce Lee JL, Patrick Legg (Practice Manager) PL,

 Dr. Michele Legg ML, Brenda Reeves BR, Elizabeth Sturton ES, Ronnie Waterman RW

2) Apologies from: Toni Goodley, Alfred Murdoch, Daniel Perriton, Karen Hull

3) Minutes of previous meeting on 8th September approved without amendment

7) AOB – DH Bid:

 Some months ago the Island put in a bid to NHS England for funding to produce a short film showing how we had progressed during the last 12 months regarding changes to the surgery.

 PPG members had put forward a number of suggestions to improve the surgery for older

 patients, which were subsequently promoted around the Island and to an evening meeting attended by all interested parties covering every aspect of Island care and help.

 The meeting today, with the 3 representatives, was to put the finishing touches to the original

 suggestions, with a view to producing a ‘toolkit’ for use around the rest of the country by way

 of a film to be put on the internet. Leading up to the toolkit itself with the resulting ideas, the

 film will show how really quite small and not necessarily expensive changes, put forward by patients rather than the staff, can make a significant difference to the patient experience.

4) Matters arising from Minutes:

 ‘Flu jabs’:

 This subject arose from a letter sent to some patients last year suggesting that they have their annual inoculation at the surgery, rather than elsewhere (see Section 6 Minutes, 8/09/16).

 PL repeated the reasons for sending those letters, but stressed that there was no motive behind

 it except for the benefit of the patient, and he was sorry if it had been misinterpreted in any way.

 ‘Fasting’ blood tests:

 ML explained that there can be very good medical reasons for fasting prior to certain tests.

 The explanation was quite complicated, so does not lend itself to being set out here, and can

 vary from patient to patient depending on the condition being investigated and the patient’s progress within that condition.

 Practice Survey Questions:

 PL produced a sample questionnaire, which is attached to these Minutes for all to comment on. Please do make your feelings known and send back to Patrick by early next year at the latest.

 You may feel that it is too long, too detailed, questions missing etc; but the practice is keen

 that the survey should reflect what WE think is important.

5) Practice update: One of our Nurse Practitioners has left, but another has since joined, keeping

 the practice fully staffed.

 System 1 is progressing, and is being rolled out across other Island surgeries.

 The practice has no knowledge of any plans or possible benefits regarding the proposed Haemodialysis Treatment Centre in the Industrial Estate over the road from the surgery.

 Also, proposals for weekend appointments on the Island by the end of 2017 are very much at the

 planning stage, but no information is available to suggest how they will be implemented.

 Beacon Service: No known changes to the services provided from the patients’ point of view.

6) Questions & Issues from Members:

 Reference the machine to test for bacterial infections, raised by RW, ML suggested that one of

 its drawbacks is the time taken for the results to emerge, which might make it more suitable

 for use in pharmacies. Also, there would almost certainly need to be a trial across a number of surgeries to ascertain its value as a diagnostic tool.

 Regarding the questions put forward by DF re GP’s taking up a prescription regime recommended

 by a consultant, ML explained that there was no simple yes/no answer to the 2 questions posed, and would vary very much with the condition being treated and the circumstances in each case.

 JL – Are aneurism tests available to women? ML replied that, though routinely offered to men

 at age 65, it can be requested by anyone and approved through their GP, if considered necessary.

7) AOB:

 The ‘Isle Find It’ survey had been circulated to members prior to the meeting. The few comments

 made were generally favourable; but did raise the question “How does one know what other facilities should be noted on the website?”

 The meeting closed at 1330

Lastly:

 You may remember that at the end of the meeting on September 8th I requested a vote by the

 PPG members present regarding their views on a Partial Booking system proposal put forward by St. Mary’s hospital. The result was 5 to 1 against the proposal. Your vote, and that of the Patient Council (also opposed), was conveyed to the authorities at St. Mary’s. However, at a recent meeting, it appears that NHS England has decided to go ahead with the concept starting with Chronic Pain, and possibly Ophthalmology to follow shortly!

**PLEASE NOTE: NEXT MEETING will be on THURSDAY 9th MARCH 2017 @ 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**