**Limes Medical Centre**

**Patient Participation Group**

**Committee Meeting**

**3rd March 2014**

**Attendees**

Dr J Southcott

Jill Smith

Jane Martin

Allan Lloyd

Sue Sherman

Apologies

Andrea Swanson

Angela Hodges

Malcolm Hodges

Donna Cope

Chris Dowd

David Hoon

**Review and Discussion of minutes (13th January 2014)**

**Practice Noticeboards**

Dr Southcott advised that there was no formal rota for the practice notice boards to be changed. It has been agreed that the senior receptionist will be responsible for the notice boards and will review and change them on a quarterly basis.

**Well person screening results**

Dr Southcott advised that at the present time there was no general gathering of information and no request to do so from the CCG.

Dr Southcott discussed the screening tests with the practice GP’s and they have all agreed to add as standard urinalysis to the well person screening review. An amendment to the screening letter will advise patients of this test and request a sample to be brought to the appointment. If a patient has an abnormal urine result they will be asked to have a blood glucose test.

**CCG meeting 18th February**

Due to unforeseen events no one attended the last CCG meeting. The group requested that **Andrea Swanson** request the minutes from this meeting The group felt it maybe useful to E Mail the group to see if anyone could attend at short notice. Next CCG meeting is 15th April and we need to confirm that **Andrea Swanson** and **David Hoon** are still able to attend.

**National Association for Patient Participation (NAPP)**

Andrea Swanson submitted an overview for the group of NAPP. The group reviewed this and Dr Southcott felt it would be valuable for Limes Medical Practice to join at a cost of £60.00. Dr Southcott will ask Jackie Blackburn to arrange for the practice to join and then the group can share the information.

**Data Sharing of Patient information**

Dr Southcott was asked to clarify Limes Medical Practice’s position on data sharing. Dr Southcott supports sharing patients data as long as it is done safely and under strict guidelines. Information should be used for prevalence of disease/treatment. The group highlighted that they would not be comfortable with data sharing to private companies/insurance companies. At present the government have suspended the process for 6 months whilst further review takes place.

**Patient Survey update**

The survey has been completed and 200 responses received. The practice has correlated the information but needs to finalise the comment section. Dr Southcott will send the survey results to the group for review and acceptance before the end of March. The survey results will be posted on the practice web site and submitted to the CCG.

**AOB**

Allan Lloyd led a discussion with the group on integration of Health and wellbeing and Health and Social care being integrated with the CCG.

Allan asked Dr Southcott if Limes Medical Centre was run as a business? Dr Southcott confirmed this was the case but advised that the practice is not registered at government house. Allan suggested that the practice may wish to look into charitable status for the practice which would reduce business rates and allow more money available for the practice.

Dr Southcott attends a monthly meeting of the Clinical Commission delivery group. Lots of ideas are raised and discussed at these meetings but no real outcomes.

**Setting up a rambling group for the practice**

A discussion took place about a possibility of starting a rambling group for the practice Sue Sherman felt this would benefit patients/carers who could not join a walking group but would enjoy a gentle stroll and refreshments.

The group felt this was a good idea and we should put an article in the next newsletter asking for interested parties to contact reception. This would identify if such a group would be wanted and supported

**How can we grow the PPG Group?**

The group discussed the number of members on the group. We reviewed the constitution and identified that we need the minimum of 4 members at each meeting and the group should have a maximum of 20 members. Ideally we would like to add new members from all age groups. We could do another article in the next newsletter advising what the group is about and that new members are required. We discussed the possibility of attending a Health and Well being event to publicise the PPG group there was such and event held at the leisure centre in February.

**Parking at Lime Medical Centre**

Dr Southcott advised that the GP’s have discussed the parking issues and are considering allowing only the duty GP to park in the car park and for other GP’s to park elsewhere. The group discussed that the car park is a difficult one to manoeuvre and having more parking spaces available may cause issues with accidents and we felt that some attendees may park for their appointment then go shopping. The group felt it was known that you needed to park off site and this had always been the case. Dr Southcott will review the outcome of the parking question before any decisions are made.

**Longer Opening Hours**

Dr Southcott discussed that the practice needs to consider offering longer opening hours to facilitate working patients. It was identified that at last 110 patients per month do not attend appointments and this could be reduced this would allow more appointments for patients.

**Texting patients to remind them of their appointments**

Dr Southcott advised that each patient needs to sign a form with their correct mobile number to allow automated texting. The group felt texting a reminder would help reduce the missed appointments. Dr Southcott agreed to lead a campaign in April to try and sign up as many patients as possible across all GP appointments. This can then be reviewed to measure the success of this initiative.

**How can A and E visits be reduced**

Dr Southcott asked if we could think of any ways to reduce wasted visits to A and E?

Each A and E visit cost the surgery approximately £75.00 and 50% are unnecessary visits this includes walk in centres.

The on call GP phones patients back if they contact the surgery requiring an emergency visit and does a phone consultation.

The group asked if there was any educational literature available to help identify what/when services should be used?

Allan commented that this should be led from CCG and we could investigate if such literature is available to hand out to all patients that attend the surgery.

An article could be done for the newsletter and a poster could be displayed in the surgery.

**Patient sample results not sent to Chesterfield**

Jill Smith asked why samples taken at the surgery cannot have the results sent to Chesterfield. This is historic and samples are sent for analysis at Derby and there is an incompatibility issue with the computer systems sending results to Chesterfield. Dr Southcott advised that a patient could collect the results from the practice and take to their appointment unfortunately this would result in a paper copy of results and not allow them to be stored on the computer The sample could be taken to Blackwell surgery as this practice delivers samples to Chesterfield.

**PPG Constitution**

The group requested that all members receive a copy of the constitution and requested that Andrea Swanson group chair send this out.

**Next Meeting date**

**12th May 18.30 Limes Medical Centre**