

Jenner Health Centre

Patient Participation Group

Meeting Date : Tuesday 12 April 2011 at 7pm

Attendees:

- Dr Andrew Anderson
- Dr Adriaan van Biljon
- Simon Stitson (Practice Manager)
- Cindy DeShield
- Jackie Brisbane (NHS Cambridgeshire)
- Eric Howlett
- Penny Fisher
- Sheila White
- Jim Doherty
- Annette Glazier
- Margaret Fordham
- Dena Old
- William Old
- Paul Phillips
- Dee Laws
- Karen Burrill
- Sheila Burrill

Apologies:

- Linda Arbon
- Trudy Lapinskis
- Jim Carpenter
- John Dunham
- Marion Dunham

Minutes:

- Dr Anderson offered to chair the meeting and welcomed the attendees.
- Each member introduced themselves to the Group.
- Dr Anderson explained need to establish a structure for the Group and for patient representatives to lead the Group at some stage. In the meantime, and if the Group are happy, the Practice will lead initially or could look for an interim Chair while the Group gets to know each other.

Terms of Reference

- Draft Terms drawn from National Association of Patient Participation booklet circulated at last meeting, also available via Practice website and distributed with today's agenda.

- Group reviewed draft Terms of Reference – items discussed from this review included:-
 - PPG can be a patient advocate or assist in complaint resolution
 - Eric Howlett asked how PPG can represent or obtain views of the patient population. Dr Anderson advised that Michael Bacon (Chair of Borderline PPG) is keen for a project for the Group to start on and this is seen as key. He is looking at how the PPG gets to know what the patients want, what their grumbles are. Good joint working opportunity to devise and implement a common feedback survey across the locality with some questions specific to each Practice. Important to be able to benchmark the results of the common (shared) questions from the survey across the locality.
 - Dee Laws added that a working party had been started today to look at this at an earlier meeting – would be good to have 2-3 volunteers from Jenner PPG to support this. Patients could be approached ad-hoc within the surgery for feedback or could look to target particular patient groups. Patients would need to be advised of the PPG's role in canvassing their feedback. PPG could have name badges etc.
 - Paul Phillips added that PPG will become a magnet for feedback as patients become more aware of its role.
 - A comments box could be set-up in each Practice to collect Patient feedback.
 - Dr van Biljon added that happy for Pts to be given leaflets directing them to the PPG for feedback and happy to arrange a confidential room at the Practice to facilitate this – would be good to understand patient thoughts on access, approachability, waiting times, clinical decisions and outcomes.
 - Dee added that website designer is part of working group, Simon confirmed that PPG section is to be included in Borderline Cluster website. Information can also be displayed on a dedicated noticeboard in Practice that could be administered by the PPG.

Actions from Discussion

- Need to pull together a patient survey
- Working Group has been established through Borderline PPG to look at this – 3 reps from Jenner PPG to join.
- Karen Burrill, Jim Doherty and Annette Glazier volunteered to join the Working Group.
- Areas to focus on include some of the existing questions asked nationally, ability to benchmark Practices within locality, patterns of patient demand for appointments and contacting the Practice.
- Take up rate for Practice Surveys in the past has been markedly improved by offering a raffle prize.

Work Plan

- Group were asked to think about any areas or projects they would like to work on following our last meeting and for any ideas they had for forming and starting the Group.
- Jim Carpenter suggested writing to other PPG's around the country for their feedback and ideas. Group discussed. Decision to invite Peter Leaton from Yaxley PPG to our next meeting to talk to the Group – Simon will arrange.
- Trudy Lapinskis offered two ideas – one about asking Chemists to provide delivery drivers with handheld alcohol rubs to reduce risk of passing germs when delivering medication to vulnerable patients – Simon will feedback to local Chemists. Second idea was an offer from Trudy to visit local Care Homes and read/talk to local patients who do not have visiting relatives. Trudy also writes poetry which she could share with them. Group discussed and felt this was also a good idea, query though whether CRB clearance would be required. Simon will contact the local Care Homes to see whether they would have a need for this service.
- Dr Anderson added that short, medium and long-term objectives would form over time.
- Penny Fisher discussed how the Patient Survey could be distributed to patients – could be sent by letter, attached to prescriptions etc. Simon advised that mail-out costs would be high and would probably be best to look at other methods. Discovery Whittlesey magazine was felt a good route for raising awareness about survey and Group. Simon will draft an article to be included and circulate to the Group for feedback.

Frequency of Meetings

- Meetings to be held monthly – will stick with second Tuesday of the month.
- Next meeting will be on **Tuesday 10 May 2011 at 7pm** at Jenner Health Centre.
- Discussion about Quorum, initial thoughts would be for 50% of Group to be quorum but this can be decided when structure in place.
- Volunteers for the Chair and other positions will be sought after our next meeting, following visit from Peter Leaton. Those volunteering would be asked to submit written nomination with some information about them and why they are volunteering.

Feedback from Borderline Commissioning Cluster

- Dr Anderson fed back that the Cluster were looking at ways to benchmark referrals throughout the cluster. Current plan is to send anonymous copies of referral letters to NHS Peterborough who will collate data for Cluster. Also looking at a joint Prescribing plan for the Cluster.
- An interesting Public Health document has been produced for the Cluster which looks into the needs and challenges of providing health and social care services for the local population. Simon will e-mail a copy to the Group.