

**MINUTES OF THE LUPSET HEALTH CENTRE PATIENT PARTICIPATION  
GROUP (PPG) HELD ON MONDAY 16<sup>TH</sup> MAY AT 2pm.**

Present: 12 attendees listed on attendance sheet and published on formal minutes.

Apologies: 5 apologies noted.

Item	Discussion	Action
1	<p>The interim chair thanked everyone for attending and showing an interest in becoming members of the Lupset Health Centre Patient Participation Group (PPG)</p>	
2	<p>The public engagement officer of Wakefield District PCT outlined the purpose of the first meeting following on from successes in similar ventures with other practices; namely to set up a PPG to assist both the Health Centre and its Commissioning Consortium. 27 out of the 40 GP practices in the Wakefield District now have PPGs.</p> <p>She outlined the recent proposed changes to the NHS which would give GPs more power to buy ‘health care’ from both NHS and non-NHS providers and stated that patient experience and participation in this process are very important.</p> <p>The PPG would assist the practice staff by listening to patient experiences and then looking collectively forward as the voice of the practice over the coming year. This could be done by looking at priorities (possibly by surveying patients) and identifying some initial ‘quick wins’.</p>	
3	<p>She then asked each patient what their expectations of the group would be and how they felt they could assist:</p> <p>One said that he would like to see better communications between the surgery and its patients.</p> <p>Another agreed, but warned against “information overload”, which can be counter-productive.</p> <p>One then said that she could bring a younger person’s perspective and suggested that a regular newsletter may be a good way of passing information. She also suggested that a list of Frequently Asked Questions (FAQs) would be</p>	

<p>very helpful.</p> <p>Another suggested that she may be the voice of the older generation, one perhaps who does not fully understand the technical developments of modern GP practices. She also mentioned tackling patients who Did Not Attend (DNA) appointments.</p> <p>Another offered a voice of caution stating that all patients are individuals and some are more receptive to change and information than others. He went on to say that concrete information that can influence practice processes should be identified.</p> <p>Another agreed that communications is of the utmost importance. He said that as he is a frequent visitor to the practice he can feedback the “voice of the waiting room”.</p> <p>A female member stated that he believes in the NHS and will come to the table forgetting personal issues and act for the collective benefit of all patients. He suggested that if other GP practices are well developed then we should ask them to share their knowledge and experiences. There then followed a discussion about a suggestion box in the waiting room. The interim chair stated that the practice has a book, but it was agreed that a box is more confidential and encourages more people to give opinions.</p> <p>Another suggested that communication between primary care (ie GPs) and secondary care (ie hospitals and specialists) could be improved. Also patients would like to know what services are outsourced into the community. Susan also said that where possible abbreviations must be expanded as patients often do not understand (or know them as something else).</p> <p>The patient and public engagement member then suggested that the one thing that the patients have implied that they can bring but not explicitly stated is their own experience as a patient.</p> <p>The chair then said that is looking forward to working with all the patients on the above lines of work but is also interested in patient involvement in the commissioning of new services. This may entail patients working with small groups with other like-minded practices. He said that the</p>	<p>Dave to look at procuring a suggestion box.</p>
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	<p>group may not always be able to bring about a completely successful resolution, but would try to do so wherever possible.</p> <p>Finally the Operations Manager suggested that feedback can be of a positive nature as well as negative, and this is very well received by staff often doing a very difficult job.</p>	
4	<p>The public engagement officer then handed out a leaflet on PPGs to all those attending. She also mentioned that there is a PPG network group where other patients can share experiences and knowledge. These are held once a quarter and she will pass on the date of the next planned meeting.</p> <p>She also mentioned the other work that is going on across the district, such as patient access surveys and the community group mapping exercise.</p>	<p>Public engagement officer to notify the chair who will then pass the information to the PPG members.</p>
5	<p>The chair was asked about the building extension and confirmed that it would provide an additional 6 treatment/consulting rooms when completed in July. Whilst there are no plans to employ extra GPs he stated that the surgery has recruited a Nurse Practitioner, who will provide additional appointments to see patients with minor injuries and ailments. It is hoped this would decrease the workload on the GPs.</p>	
6	<p>It was suggested that the next meeting should be held on Tuesday 14<sup>th</sup> June again at 1.45 pm for a 2pm start. It would be held in the conference room at Lupset Health Centre. Those wishing to attend can let the chair know be either calling the surgery and leaving a message, letting reception know or emailing him.</p>	