

MINUTES OF THE LUPSET HEALTH CENTRE PATIENT PARTICIPATION GROUP (PPG) HELD
ON MONDAY 21ST NOVEMBER 2011 AT 1.45PM

Present: 13 members present and listed in attendance sheet and recorded in minutes

Apologies: 5 members apologies duly noted

Item	Description	Action
1	The Chair welcomed everyone and thanked them for coming. He explained that he had tried to contact the patient who had disengaged once again but he was unsuccessful. It was agreed that she should be removed from the PPG and one of the 'virtual members' invited to attend in her place.	Chair to contact next virtual member to see if she is interested in joining the group.
2	<p><u>Minutes from the last meeting and any matters arising</u></p> <p>2.1 It was agreed that the minutes were a true reflection of the last meeting and the Chair went through all the matters arising. The operations manager mentioned that in the abridged practice leaflet paragraph 1.1 was incorrect and the time an appointment can be booked is 8am to 6.30pm.</p> <p>2.2 The Chair stated that he had written a letter to the departing member regretfully accepting his resignation and thanking him for his time on the PPG.</p> <p>2.3 FAQS</p> <p>The Chair went through the list of FAQs by subject and it was agreed that there are no more to be added just now. The Chair stated that this is a 'living document' and an FAQ can be added as and when it arises.</p> <p>2.4 Practice Leaflet</p> <p>The Chair stated that the shortened leaflet had been passed to the Primary Care Trust Contracts Branch who had stated that the Health Centre is contractually obliged to still give out the full leaflet. After a short discussion it was agreed that the abridged leaflet would still be used as it is a handy guide that can be kept close at hand to supplement the full leaflet.</p> <p>2.5 Youth Parliament</p> <p>The Chair has emailed the Youth Worker who deals with the Youth Parliament and given her a number of options to gather information. He awaits her reply.</p> <p>2.6 Young Mums, schools</p>	<p>The Chair to amend the shortened patient leaflet.</p> <p>The Chair to publish FAQs on website. All to pass any other FAQs to him.</p> <p>The Chair to produce the shortened guide for distribution to new patients as well as the full guide.</p>

<p>2.7</p> <p>2.8</p> <p>2.9</p>	<p>NHS public Development Worker explained that the young parents are more than happy to complete surveys, which she would coordinate.</p> <p>On Line Booking</p> <p>Member has condensed on line booking form to one or two pages. The Chair asked if this could be sent electronically for distribution with the minutes.</p> <p>PPG List</p> <p>The Chair has now done this in an excel spreadsheet.</p> <p>PPG advert</p> <p>The advert for PPG members was discussed. It was agreed that whilst this was a good advert, it would not be used now as we have sufficient members. NHS public Development Worker did ask if she could use it for her recruitment.</p>	<p>The Chair to provide NHS public Development Worker with surveys.</p> <p>Staff to start using new forms.</p> <p>The Chair to photocopy for NHS public Development Worker to collect.</p>
<p>3</p> <p>3.1</p> <p>3.2</p>	<p><u>Update on initial work strands</u></p> <p>Patient Leaflet</p> <p>This was discussed under matters arising. However someone did add that some patients are not bothered with all of this and just want to see the GP. It was agreed that whilst there are patients like this we must continue to cater for all types of patient and the leaflet is contractual.</p> <p>He then mentioned that some patients he has spoken to are disappointed with the hospital referral system and the length of time it takes from referral to appointment in the hospital.</p> <p>Practice Website</p> <p>The NHS public Development Worker briefed on the work done by Snapethorpe Primary School, who produced a very comprehensive report. The boys and girls suggested ideas themselves and navigated through the website to find certain things (such as how to book an appointment). The report was very complimentary but did say that the text may be too small for those with eyesight problems.</p> <p>As an aside she mentioned that some of the younger patients do feel frightened and intimidated when coming to the doctors (not necessarily Lupset). They thought that a dedicated play area would help. We already have a new play area here, so it was agreed that the Chair would educate staff on making the younger patients feel more at ease.</p>	<p>The Chair suggested that this should be fed back to the PCT via the Patient Network Group</p> <p>The Chair has already briefed this to the web designer who is working on it.</p> <p>The Chair to email all staff.</p>

<p>3.3</p> <p>3.4</p> <p>3.5</p> <p>3.6</p>	<p>She also mentioned the following website points:</p> <ul style="list-style-type: none"> • Some duplication of pages. • The carer’s form could be hyperlinked to the website. • Information should be added to the how to register at the practice page to include what proof of identity is required. <p>The group agreed that a certificate should be issued to the participants as a show of appreciation.</p> <p>The volunteer then briefed on his work on the website. He had printed all 77 pages of the website to better compare page by page. He too stated that there was a lot of duplication and some pages only had minimal information. He felt that the web designer may have taken “a lot of liberties” in the design. It was agreed that the Chair and he should meet to work on this further.</p> <p>Higher seats with arms</p> <p>These were now in place in the waiting room.</p> <p>Practice Survey</p> <p>This was discussed at length and the following was agreed:</p> <ul style="list-style-type: none"> • We would not employ an “interview” technique, but would merely hand out the surveys to a cross selection of patients and monitor their return. • The Pilot would run this week with PPG members coming in to distribute the surveys. • The following volunteered to come in and hand out surveys: <ul style="list-style-type: none"> ○ Tuesday pm – ○ Wednesday am – ○ Wednesday pm – ○ Thursday am – ○ Friday am – ○ Friday pm – ○ Wednesday of next week –. <p>The Chair thanked everyone for their input and assistance on this important piece of work. AFTERNOTE: If any other members wish to come to the practice to assist in the survey please contact either the Chair or Ops Manager.</p> <p>Capturing under represented patient voices. This ongoing work was covered in matters arising.</p>	<p>The Chair and NHS public Development Worker to work on this.</p> <p>The Chair and the volunteer to meet on 22 Nov to go through website. The Chair to feedback to website designer.</p> <p>All involved.</p> <p>AFTERNOTE: The pilot scheme of 30 patients did not identify any new questions and therefore Q10 has been changed to read “any other comments or issues you would like to bring to our attention”.</p> <p>All willing volunteers</p>
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4	<p>Department of Health Cold Weather Plan.</p> <p>The Chair briefed on the initiative to have a central graduated plan for cold weather. The aim is to identify vulnerable groups and offer as much support as possible through community groups, carers and families. It was agreed that it would be difficult to highlight those most at risk and the onus may have to lie with the individual to notify us.</p> <p>The NHS public Development Worker stated that St George's does have some cards which are used to signpost those at risk to the relevant agencies (Fire Brigade, Benefits Agency etc). It was agreed that The Chair would brief all staff to look out for those most at risk and put alerts on the TV screens. She would supply some of the cards for the reception staff.</p>	NHS public Development Worker to supply referral cards and The Chair to educate staff and patients.
5.	<p>Patient Suggestions</p> <p>The patient suggestions were discussed and the following points raised:</p> <ul style="list-style-type: none"> • Hand hygiene signs would be produced encouraging but not mandating the use of the gels. The Chair to look at secure gel dispensers. • Hearing aids could not be distributed by the Health Centre but patients can request these from PGH by post. • Agreed that booking Nurses' appointments was not appropriate by the internet due to the diversity of the appointments available. • It was agreed that a water cooler for drinking water should not be provided for use in the waiting room. <p>A member mentioned about the Nurse Practitioner (NP). He thought that she provided a great service, but felt that initially patients were not aware of what she could provide. This was demonstrated when he overheard a couple discussing the NP. He questioned them on this after their appointment with her and found their opinion changed as they said they thought she had been wonderful.</p> <p>The Chair stated that he was pleased the PPG members were actively involving other patients in discussions during visits to the Surgery and encouraged all to continue this.</p>	<p>The Chair to enquire and to contact patient.</p> <p>The Chair to contact patient</p> <p>All</p>
6.	<p>AOB</p>	
6.1	<p>The Chair briefed that a new member of staff is now working part time alongside him to assist him in developing the operational business of the Health Centre. Some patients may well come into contact with him.</p>	
6.2	<p>The Chair asked if all members could use their influence</p>	All

	on external groups and committees to raise awareness of Carbon Monoxide poisoning.	
6.3	The Chair stated that the Royal British Legion (RBL) has a funding stream that it can use to fund initiatives in the community. Whilst predominantly focused on ex-servicemen and their dependants others could also benefit. If anyone has any ideas please feed to Lesley Wagstaff in St. Georges or feedback to The Chair.	All
6.4	The LINK patient focus group has already done some work on patient-centred issues and wants suggestions for its next strand of work. The email listing the suggested areas is an Appendix 1.	
6.5	The Ops Manager explained the procedure for booking an appointment 2 weeks in advance. Only a proportion of appointments are opened up to pre-book on a daily basis, in order to save some for book on the day. However if a GP has said that he/she would like to see you within 2 weeks please show the GP slip to reception who will endeavour to book an appointment for you.	All
6.6	A member mentioned the email from another about patients who are hard of hearing. It was agreed that the onus is on the patient to request that the staff should speak slowly and clearly but not necessarily loudly – and should keep this up throughout the whole of the conversation.	The Chair to brief all staff.
6.7	Another member mentioned that the new non-emergency contact number for the Police is now in force. It is 101 and this should be used routinely.	All
6.8	Another mentioned that he would be out of action from the 12 Dec following surgery. It was agreed to keep his place on the group open until his return.	
6.9	Someone mentioned an experience she had recently at Pinderfields when she had eye treatment. She felt a lack of staff made it difficult for her, particularly in view of her treatment to her eyes. The Chair suggested she contact the Patient Advice and Liaison Service (PALS) in the Hospital via the Webstie, or PALS in the PCT.	
6.10	She also mentioned a Channel 4 website that she had found from The Food Hospital on the TV. This linked to NHS choices which she asked about. The Chair and NHS public Development Worker confirmed this is a legitimate NHS site and is a very good source of information. It can be accessed via www.nhs.uk .	All
6.11	One member cannot attend the next PCT Patient Network Group so another has kindly volunteered to stand in. He will send the deputising member the details. PPE officer to note.	Both members

6.12	A member suggested minimising the use of bold and underlining words to cut down on the use of toner.	
7.	<u>Date and time of the next meeting</u> Date of next meeting is scheduled for Wednesday 21 December at 1.45pm with refreshments from 1.30. The Chair to bring mince pies.....	

Appendix 1

From: NHS public Development Worker
Sent: Tue 15/11/2011 14:31
Subject: Wakefield Neighbourhood Network

Hello

At the recent network meeting, I mentioned that the Wakefield LINK (Local Involvement Network for Health and Social Care) is consulting with local people, asking what you think they should be focusing on next. There are already task groups looking at

- Hospital appointment systems
- Mental health crisis help
- Out of hours doctors services
- Quality accounts of local health trusts
- Residential care

They would like us to tell them what their next focus should be and the choices are as follows:

1. services for people with a disability
2. services for people with learning disabilities
3. services for people with mental health conditions
4. services for people with sensory impairment
5. services for people with long term illness
6. services from your doctor
7. social care services
8. hospital services
9. ambulance services
10. services from your dentist
11. services at the walk in centre
12. out of hours service

If you would like to have your say on what the LINK should be focusing on, you can either e-mail me back with your comments or contact the link directly. You can telephone them on 01924 374188 or e-mail them at wakefieldlink@shaw-trust.org.uk. If you would like to know more, their website is www.wakefieldlink.co.uk

Thank you

NHS public Development Worker