Notes of Whitwick Patient Participation Group

 **Thursday 2nd. March 2pm at Whitwick Health Centre**

**NEXT MEETING: THURSDAY 15th June 2017, 2pm Health Education room**

Present: Roy Hill Paul Siddals Sarah Chalmers Bob Reddington

Karin Siddals Peter Walker Mirabel Wilton John Wilton

Celia Foskett Lou Carter Jenny Toal

Stuart Shepherd & Linda (Hospice Hope)

1. ***Apologies:*** Mike Kirkham, Hugh Perkins,

***2. Notes of last meeting 1 December 2016 & matters arising.***

* VASL Carers’ Clinic. Funding for this has been withdrawn by the CCG so it will no longer run.
* NIHRC Clinical research. Having raised awareness, it was decided not to pursue this further.

3. ***Practice news.*** Sarah Chalmers is our new Practice Manager and is currently working 28 hours over 4 days. A proposed merger with the Dr Lewis & Patel’s Practice will not happen in the immediate future. Dr Hepplewhite is retiring in the summer. There are plans to appoint a new salaried GP, initially for 4 sessions a week, with a view to a possible partnership. Nurse Jane is leaving in 2 weeks’ time and the practice is looking to replace her with a nurse with advanced prescribing skills.

**4. *Hospice Hope***. Stuart outlined their history since the closure of Staunton Harold Hospice. Their present projects include support cafes in Whitwick, Ibstock and Ashby. A new day centre is opening in April at Griffydam from 10.30 to 3.30 on Mondays & Thursdays to provide alternative therapies, relaxation, listeners and lunch. They are aiming particularly to bridge the gap between diagnosis and treatment for over 18s. Patients can be referred by GPs, MacMillan, Loros or themselves. They need volunteer drivers, listeners and general help. **Action: Paul to give Mel Arnold’s email address to Stuart for Hope House to approach the Federation (Done). Sarah to ask Anna Ingle to invite Stuart to the next Practice managers meeting (Done).**

***5. Patient survey.*** The patient satisfaction survey carried out in December produced unreliable ratings. Mike and Jenny’s research showed that some ratings were inaccurately recorded as a result of either interface input issues or flaws in the “Survey Monkey” algorithms.  The construction of the survey also has some flaws and a small number of paper responses came from patients of the other surgery.   Owing to the unreliability of the survey, it should **not**be entered on the practice web site.  The text comments need to be analysed and further understood in the context of the questions and the constant negative NHS news bulletins.  **Action: Jenny will analyse the text comments from this survey.**

**6. *Wider patient involvement for PPG***. The practice would like to re-run the survey in the summer with a greater input from the PPG. It was suggested that the survey be shorter and more focused with PPG volunteers coming into the waiting room and helping patients to complete the paper versions, whilst ensuring that they were registered with our practice. Jenny volunteered to analyse the results. **Action: Jenny to draft a new survey form and circulate to the group in May for comments, with final version to be agreed at out next meeting.**

PPG members were asked to talk to patients in the waiting room about the PPG and the practice, when they had the chance. **Action: PPG members to discuss PPG and practice with patients at every opportunity.**

**7*. Patients who did not attend (DNAs).*** The level of DNAs is 5%, which is 450 appointments a month @ £43/appointment. The practice is adopting a 3 strikes and you’re out policy unle**ss t**here is a significant mitigating circumstance.  **Action: Sarah to investigate ways to get more patients opting into text reminders for appointments.**

***8. Practice Appraisal.* Roy and Paul to attend on 20th March. Sarah to forward Paul’s latest copy of PPG’s self-appraisal and objectives to CCG (see item 12)**

*9.* ***Draft Sustainability and Transformation Plan (STP).*** This is Leicester, Leicestershire and Rutland NHS’s plan to devolve more patient care from acute hospitals to GPs and community hospitals. The Leicester General will stop being an acute hospital. For the STP to succeed, it will require more effective social care. Concern was expressed that funding may not facilitate this and that increasing demand will make this ever more difficult. The next public meeting to discuss the STP will be 6.00pm Thursday 30th March at the Lyric Rooms Ashby. To book see <http://www.westleicestershireccg.nhs.uk/STPevents>. To view the STP see [www.bettercareleicester.nhs.uk](http://www.bettercareleicester.nhs.uk)

***10. Diabetes Health Education event.*** It was agreed to hold an open diabetes education evening for Whitwick and Thringstone. This will include a short presentation on what diabetes is, how to avoid it if you are pre diabetic, and how to manage type 2 and type 1 diabetes; and then a longer question and answer session. **Action: Paul to find a speaker from UHL and arrange a date and venue. (Done, 7 – 9pm, 6 July at Park Hall Whitwick)**

**All to help with publicity.**

***11. Articles in local publications. “***Close-knit” no longer functions. The Thringstone Bauble is quarterly. The new Community Voice is monthly with a deadline of the 20th of the month. **Action: Sarah to liaise with Karin and Lou to produce to 250-300 words by 10th of each month for Community Voice, and Roy to produce a paragraph for the Bauble. Roy’s article on “what to do if you are ill” can be a starter.**

***12. PPG Self-Appraisal and Objectives 2017.* Action: Paul to update 2017 objectives as agreed today and send with self-appraisal to Sarah to put on website and submit to CCG as our part of the practice appraisal (done)**

***13. Locality PPG.***  Federation funding from the CCG ceases this April, after which it will be self funding

***14. Inter-practice Referral.*** This is now working for Muscular Skeletal joint injections with patients referred to a choice of local doctors specialising in different joint injections. Inter-practice referral for dermatology is to be developed next, followed by gynaecology (coils and implants).

***15. West Leicestershire PPG Network.*** Notes and presentations of the last excellent meeting have been circulated. Date of next meeting is 27th April at NSPCC Beaumont Leys to which all are invited.

***16. Loughborough Urgent Care Centre (LUCC).***  From 1st April this will be administered by DHU (Derby Health United). The LUCC will open 24/7 and a doctor will be on duty from 7am- 1am. They have X-ray facilities and access to hospital beds if necessary so patients are encouraged to use the LUCC rather than A&E. The “bounce-back” charge to GPs for patients visiting the centre during GP’s opening hours has been abolished. The 111 and doctors out of hours contract will also be with DHU. The Federation is subcontracted to DHU to provide out of hours doctors, so this will be done by local GPs. Jenny is going to the LUCC PEG meeting on April 2nd**. Action: Jenny to circulate minutes when available (2 weeks after meeting).**

**17. *Defibrillators.*** These are available in The Meadows and Thringstone Co-op. One will soon be added to Whitwick Co-op. A public training session will be on Friday 17th March at 2pm at Thringstone Co-op.

18. ***Screen in the Waiting Room.***  Paul has sent Sarah details of how Newbold Verdon provides quality health education videos in their waiting room. This may require a separate screen**. Action. Sarah to investigate.**

**19. DATE OF NEXT MEETING** Thursday 15th June 2pm in Health Education Room. **Action. Sarah to book room.** (Apologies from Bob and Celia)