**Patient Participation Group Meeting Minutes**

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| **Date/Time** | 20th September 2018 5pm | **Venue** | Priory View, Meeting room |
| **Attendees PVMC** | Helen Walker (HW), Dr Carl Foster (CAF)  |
| **Attendees PPG** | Bob Dickson (BD), Sheila O’Connor (SO), Harry Shields (HS), Kevin Ashton (KA), Rebekah Rockwell (RR), David Lunnun (DL) |
| **Apologies** | Angela Yeoman (AY), Lillian Macfarlane (LM , Safdar Hussain (SH), Brian Brock (BB) |
| **Guests** | Joe Kent (JK) and Kelsey Trevethick (KT) – BARCA Leeds |

| **Item** | **Agenda Item** | **Action By** | **Action Date** |
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| 1 | **BARCA – Mental Health Services**JK explained that BARCA was a charitable organisation and one of the areas they were looking to develop was mental health services within GP Surgeries. They were looking to secure funding for up to 5 years and were interested in feedback from the PPG on what services they would find useful. Some discussion took place in summary the following services were mentioned:* Mental Health (MH) definition

         Support for carers         Service duplication         Extent of MH in society         Demand for services         IAPT says no         Referral information complexity         High need in New Wortley (Health inequalities report)         Coordinating work with other services         Complexity of navigating services         Joint working with Stocks Hill         CBT not appropriate for all conditions         Timely interventions better – long delays frustrating         Short term projects frustrating         Building up strong working relationships over time is beneficial         Meeting supportive of ambition to set up a service working closely with primary care at local levelCAF offered Priory View’s surgery space to support any services offered.**Action**: HW to send copy of Health Inequalities report to JK following meeting | HW | Immed |
| 1 | **Review of Previous Minutes**HW reviewed progress on actions from previous meeting. All actions were completed. |  |  |
| 2 | **Suggestion Box**HW had reviewed the suggestions posted in the Suggestion Box, as follows:1. Request for clock in waiting area – approved and waiting to be installed
2. Water fountain in waiting area – gaining pricing prior to final decision.
3. Improved Privacy around reception area for private conversations – New signs have been erected to advise patients that they can ask to have a conversation in a private room. Looking to create a “wait” area to prevent patients being too close to each other whilst a patient is talking to a receptionist.
4. Displaying number of Appointments not attended and applying a charge to anyone abusing the system.

Point 4 lead to discussion in the group. Appointment numbers missed are displayed in the surgery and warning letters are sent to patients that regularly do not attend (DNA) their appointment. The GPs review the list of patients that have DNA’d but consider the patients’ condition, often not attending is a consequence of their illness.KA mentioned it was difficult to get an appointment and he often had to wait a week. CAF advised that GP funding was cut from 12% to 6% of the total NHS funding, whilst increasing workload, and this has resulted in longer appointment waits. Priory View is generally better than other surgeries in the area for appointment availability as we are able to attract Doctors and employ more doctors in order to provide more appointments. |  |  |
| 3 | **Newsletter - Ideas**HW advised she was about to write Autumns newsletter and asked for ideas. Nothing was further discussed and no ideas were forthcoming. |  |  |
| 4 | **New Website**HW advised the new website was live. As time was running short in the meeting, HW had not time to demonstrate the website. HW requested that members provide any feedback on the site when they next use it. The site will be constantly updated with news and information. |  |  |
| 5 | **Building Refurbishment**HW mentioned that there were plans to refurbish areas of the building in line with improvements around Infection Control. Improvements being consider include:Upgrade of consulting rooms (improved sinks, flooring, chairs and couches)Improved Access – including electronic front doorsTV monitors – displaying patient information in waiting areasWater Dispensers – for patient use in waiting areaDL advised that access around the reception desk was often difficult with people blocking the access to the main waiting area when speaking to a receptionist.**Action**: HW will review the area and look at ways to improve access for all patients including wheelchair users.HW advised of the recent installation of a Patient BP Health Monitor situated in the ground floor waiting area. | HW | By next PPG Meeting |
| 6 | **AOB****Health Inequalities**BD had requested that a document entitled NW Health Inequalities 2018 be circulated to members prior to the meeting. This had been done. BD asked how Priory View approach the issue of health inequality.CAF advised that over the last 27 years, he had seen the area improve. He felt this issue was a government issue and the GP Surgery is asked to look at Social, Mental Health and Prevention in the local population. The edges are blurred and Priory View is still trying to understand it’s involvment. Examples were given of initiatives that Priory View had tried in the past that had threatened the viability of Priory View providing healthcare, such as when we provided drug addicts with clinics to provide methadone that lead to elderly patients not wanting to visit the practice and in turn an leading to increase in home visits for the doctors and a practice that was less accessible for other members of the community.Overall Priory View is trying to hold on to GPs being the centre point of contact to coordinate the health needs of their patients and referring patients to the most appropriate service.**Appointments**CAF was interested to understand what the group felt about supporting the practice in securing more GP, Nurse and Healthcare Assistant appointments during the week day. The patient group supported any initiative to increase appointments that would assist in patients getting appointments including BP, ECG tests done efficiently.A patient specific issue was raised and will be handled outside of the patient participation group to protect confidentiality. |  |  |
| 7 | **Next Meeting agreed:**We did not agreed the date and time for the next meeting however date for your diaries:**Thursday 13th December 2018 at 5pm** |  |  |