

Bearsted Patient Participation Group

Notes from meeting Monday 15 April 2024 at 1100hrs at the surgery.

1. Welcome to those present.

Fiona Brown, Chris Dobson, Sue Henderson, Sue Jackson (Chair), Goff Norrington, Bill Shepherd, Tony Spice, Derek Stevenson.

2. Apologies.

Christine Shade

3. Minutes of the meeting 15th January 2024

The minutes of the previous meeting were approved and signed by the chair.

4. Matters Arising from 15th January 2024

Photographs of members on the website. Now complete although need a photo of Bill Shepherd and a notation to indicate Fiona Brown's membership.

Action 3.1: Chris to include this (comment on brightening up the waiting area) in the agenda for the joint meeting. **Complete** (although received a muted response at the meeting.)

Action 3.2: Chris to obtain the leaflets (Signposting and Youth Mental Health) from Jeannette as a start point for their review. **Complete**. (Goff has agreed to take both of the leaflets together with the Social prescribing leaflet to the PCN for consideration.)

Action 4.1: Sue J and Sue H to meet with the candidate and, if appropriate, invite her to join. **Complete**, Fiona has joined the committee.

Action 5.1: Chris to include this on the agenda for the joint meeting (Missed appointments). The age profile of no-shows would also be interesting. **Complete**. It was discussed at the joint meeting. For information the notes from that meeting are all included here:

The meeting discussed the current situation with no-show appointments. Steve noted that the number was down on the previous year and is approximately 2.5% of all face-to-face appointments versus 5% last year. There is no particular demographic to blame so a specifically targeted campaign is not appropriate.

It was agreed that an article could be submitted to The Bearsted Community Magazine and Fiona agreed to draft something. Steve would provide the statistics for inclusion.

Action 6.1: Fiona to draft the article with support from Steve re. the statistics and editorial support.

(Post meeting note. Our contact at the magazine has agreed this represents a suitable article but the submission closure date for the next edition is/was 1st March and so the article will need to go into the following edition.)

Action 7.1: All to publicise the Quiz Night. **Complete**, see below.

Action 10.1: Sue J to ask Sarah about multi-factor authentication in NHS systems.

Tony had looked further into this issue and we will fall under an exception if more than one person has access. There is a June deadline.

Action 4.1: Tony to arrange for an additional member to have access to the virtual group email system.

Action 10.2: Chris to ask Goff to re-circulate the presentation from Becki Thomas, Project Officer KCC Digital. **Complete** and circulated

Action 10.3: Chris to include as an agenda item for the joint meeting. **Complete** For information the notes from that meeting are reproduced here:

A presentation was given to the PPG Chairs' meeting about training to help people with IT

challenges so that they are not “left behind”. Would there be value in pursuing this? After discussion it was concluded that training was probably not the right solution to this particular issue. Dr Dolman noted that many who might be expected to be “left behind” were IT literate and quite happy to make submissions to the surgery via the internet. She also noted that in other situations a family member has helped. Steve noted that there is the iPad in reception and finally the receptionists are able to complete the triage form via the telephone for those who cannot use IT.

5. Feedback from Sue Jackson's meetings with Sarah.

Sue indicated that beyond the Did Not Attend (DNA) information relating to appointments there was not a great deal to update.

The discussion around the DNA stats centred on how the PPG might help to improve the situation although it was noted that they were actually better than recently-published national statistics, which indicated nearer 5% rather than the 3% experienced here. However members believed a campaign to improve the situation would still be worthwhile. Sue H noted that this was yet another area where the waiting room screen could be used to good effect. Fiona noted that some punitive response by the practice might help although it was noted that financial fines were not possible.

Fiona would progress with drafting an article for the community magazine.

Action 5.1: Fiona to draft and circulate the article

Action 5.2: Chris to contact the magazine editors to establish a potential word count.

Action 5.3: Sue J to discuss with Sarah the possibility of a poster in the waiting room especially if the awakening of the screen proves intractable.

But ultimately it was noted that the practice may not want to put effort into reducing a number that is already better than the national average.

The meeting also raised the issue of how the practice intends to deal with the departure of Steve Hodgson, Business Manager.

Action 5.4: Chris to include on the joint agenda.

Goff noted that Louise Twist would be taking over the financial aspects of running the PCN, currently part of Steve's role.

6. Feedback from CQC audit

Sue reported the audit as largely paper based with masses of documentation sent to the auditor. The report will not be available until the end of the month. Sue noted that Sarah had expressed some concern that, in the absence of feedback during the audit, there was no tentative understanding of how it may have gone.

The element involving PPG members appeared to have gone very well indeed with the auditor taking away ideas from our members for adoption within the auditor's own PPG.

7. Feedback from Chairs' meeting and PCN meetings

Goff had not been available for the previous meeting with the next one scheduled for 14th May. He would continue to circulate minutes when available (usually just a week before the following meeting). He noted there was not a great deal of ideas/ changes coming from the meeting but he would continue to update the committee.

There was a sharing of information about the role and operation of the PCN for the benefit of newer committee members. Essentially the network employs or pays for and disseminates services such as Social Prescribing, Physiotherapy and additional Paramedic services that might otherwise not be affordable at an individual practice level. The structure is of more benefit to the smaller practices in the network than it is to Bearsted. Goff noted that the contract for the PCN has been extended for another year with the same budget. The proposals around our leaflets were well received and Danni Hambrook had taken the one on Social Prescribing for review and updating. Goff noted the printing of the leaflet would probably be funded by the PCN but that he was retaining funding in the PPG accounts to pay if necessary.

As noted earlier Louise Twist will manage the finances and Hannah Warren of the Bearsted Practice is the Clinical Director.

Goff will circulate minutes of the meetings.

Action 7.1: Goff to circulate PCN meeting minutes.

8. Next steps for PPG

Chris had included this on the agenda because in previous years the PPG had operated with a reasonably defined plan whereas, since COVID, we had not had plans in place. He noted that he had raised this at the joint meeting but Steve had said that he would like to get involved with us on such a plan but that it did not reach the priority threshold. Dr Dolman had noted how valuable she found the signposting leaflets. It had been agreed these would be updated and Goff was progressing this.

A number of the newer members asked if there were national guidelines for PPGs. It was noted there is a national association but membership had been discussed in the past and, since there was a subscription charge, it had been seen as unnecessary. The Terms of Reference (TOR) to which we operate were initially drawn up to align with the original purpose for which PPGs were started and Chris believes they are still aligned.

He also noted that the PPG is operating in alignment with the TOR.

Chris noted there had been a number of quite significant successes over the years and this is why the relationship between the PPG and Practice is so good.

The main priority from the members related to improving communication because it is still felt that outside of clinical matters, the communication between the practice and its patients was not exceptional. The PPGs ability to communicate with patients directly is limited although the community Facebook pages have been utilised to good effect.

It was also noted that the practice had agreed to take over the publication of the newsletter since they would be able to have wider reach than the PPG Virtual Group. However nothing had happened!

Chris agreed to circulate the TOR once again and members would review and make suggestions.

Action 8.1: Chris to circulate the TOR once member.

Action 8.2: All to consider and make suggestions.

Action 8.3: Chris to include the newsletter on the agenda for the joint meeting.

9. Healthy Walking Update.

2nd April one walker fell. However follow-up confirmed no injuries of significance and so it need not be reported.

10. Finance Update.

Feedback from Quiz Night

The Quiz Night had been well attended with 11 tables. Goff thanked all involved in preparing on the night and to the two Sues for running the raffle. After costs the event netted £525. It was agreed the raffle raised a remarkable amount considering the quality and quantity of the prizes but for the next event it was agreed some funds would be invested in more and better prizes to respect the generosity of the attendees.

Steve Hodgson has agreed to reimburse the cost of the Public Liability Insurance from the PCN or Surgery budget, this will boost the PPG account by £164.40 giving a nett balance of £1,183.

Following the purchase of the staff coffee machine at a cost of c.£300 to £400 (Steve has been asked to chase up the purchase), our balance will drop to around £750 to £800.

We need to keep sufficient funds for leaflet printing should this be a PPG rather than PCN cost and a contingency of £200. This adds up to £500 leaving an immediate sum of £300 from the quiz night profits to donate to a local charity as announced at the quiz night.

The meeting agreed that Heart of Kent Hospice would receive the £300.

11. AOB

Chris now had all the contact details and would circulate them.

Action 11.1: Chris to circulate the details.

Goff noted he could not attend the proposed date for the AGM and asked if it could be changed. A date of 5th September was agreed provisionally.

12. Next Meetings:

Joint 2nd May at 1300hrs

PPG 22 July at 1100hrs

Joint 1st August at 1300hrs.

AGM 2024 5th September. (Provisional)

PPG 21 October at 1100hrs

Joint 7 November at 1300hrs

