**WATLINGTON MEDICAL CENTRE**

**Patient Participation Group**

**Minutes of Meeting held on Tuesday 12th March 2024**

**Present:** Dr Nichol, Amy Rossiter (Clinical Care Coordinator)), Judith Leigh (Chair), Margaret Blackburn (Secretary, Minutes), Sue Calver (Treasurer), Andrew Burrell-Seward, Linda Cole, Brian Long, Jame Rose-Land

**Apologies/Absent**: Joanne Quayle, Joy Stevens, Annette Smith

The meeting was Chaired by Judith Leigh. She welcomed the new members to the Group.

In view of the number of new members, Dr Nichol went through the PPG Terms of Reference and general arrangements, stressing that the PPG is not a forum for complaints, as the surgery has an official channel for such matters.

**2.** **Minutes of the previous meeting 3rd October 2023**

As there were several new members present, Margaret summarised the minutes of the previous meeting, which were then agreed.

**3.** **Matters arising:**

**3. a, c-f: General points:** PPG minutes were now available on the website, and a comments box and noticeboard were in the waiting room. A leaflet promoting the PPG had been produced.

**3. g-k: Pharmacy:** Dr Nichol reported that scripts could be aligned, and that she would include this in her next report. The text message notifying patients that medication was ready for collection had been amended to cover possible unavailability of some items. Pharmacy staff had been asked to open the consulting room when it was not needed for consultations, especially in bad weather.

Brian Long asked if unavailability of medication was a general or local problem. As it was a general problem, he undertook to raise the problem in other forums that he attended as a Councillor.

***Action point****: Brian Long to raise the problems of unavailability of medication, when possible, in other committees.*

**3. b: PPG Terms of Reference:** Copies of the PPG Terms of Reference and Confidentiality Policy were tabled for attendees. Dr Nichol stressed the need for complete confidentiality in PPG members’ dealings with patients, and that no information can be disclosed about who members might see in the surgery or any discussions they might have or overhear.

If PPG members should notice any loopholes in the system they were encouraged to report it.

The members present then returned their signed Declaration Agreements.

Regarding membership of the PPG, the variety of representatives needed had been discussed, but not specifically geographic representation of the practice area. Once we had responses to the recruitment drive the situation could be assessed, as apart from geographic area there were several diverse groups using the surgery.

With reference to the recruitment drive, Judith set out the arrangements for the ‘Meet and Greet,’ which would be held on Friday 15th March, from about 9am-1pm. Judith, Sue and Margaret would be there, and anyone else who would like to come along would be very welcome. We would be outside the Pharmacy and Surgery, with small leaflets to hand out, and to chat anyone interested about the PPG, the intention being to raise awareness of the PPG, and hope to generate more interest.

***Action point****: Judith Leigh, Sue Calver, Margaret Blackburn and PPG members to attend the Meet and Greet.*

**4.** **Surgery Update**

Dr Nichol reported that Dr Wagg was back, and that the new nurse Lauren Cox was pregnant, and would be taking maternity leave in the summer. Andre Garcia was a new Nurse Practitioner, together with the existing Practitioners, Amanda Moss, who was also a partner in the practice, and Kirstie Mallet.

She explained that the Nurse Practitioners were not the same as the Physicians’ Associates that had been in the news recently. The practice had decided not to use Physicians’ Associates.

Pharmacy: the practice had obtained funding to install a machine to dispense medicine, which will happen in the next 6 months. Patients will receive messages with a code to use the machine, which will be available 24 hours a day. It will be installed in part of the reception area with external access. It will not be able to dispense fridge items or controlled drugs, which will still have to be collected from the Pharmacy. There will be CCTV cameras for security, and a tie in with online prescriptions. It will probably the first to be installed in West Norfolk, but these machines have been successful where they are in use.

It was suggested that the PPG might be able to assist people to use it in the early days.

**5.** **PPG Update.**

a. The bank account with HSBC was open, but no money had been deposited. There had been no money left in the old PPG account. Any money deposited would be from funds raised or donations, there would be no routine outgoing transactions.

Brina Long reported that the local Borough Councillor, Jim Bhondi, has a fund, and it might be possible to apply for a grant as a start.

b. Judith had prepared a small PPG leaflet to hand out.

c. Sue had started to identify contacts with other PPGs in the Fens and Brecks group of 6 surgeries that includes Watlington.

d. The WMC Facebook page is protected, in that no unauthorised posts can be added, but information regarding the PPG could be posted, via the Surgery.

e. Information about PPG activities are included in the Gossip, the Watlington magazine, next to the WMC article.

**6**. **Events**

a. **Meet and Greet**: Judith had given details bout the Meet and Greet arrangements earlier in the meeting.

b. **Small fund-raising event suggestions**: There were no current suggestions from the Surgery as to a wish list for PPG support, but the PPG could fund raise in anticipation.

There was a Borough Council local lottery, available to every non-profit organisation in the area, for every £1 spent on behalf of a nominated organisation, 50p goes to the organisation.

It was felt that it would be preferable to do something more community based in the first instance, to combine raising money and having social support and interaction at the same time, with a view to advertise and promote community well-being.

The monthly Rainbow Café held in the village hall would be an opportunity to have a stall to promote the PPG.

Dr Nichol suggested that walks for people would be ideal. Sue Calver said that she and her husband were qualified walk leaders, and we could start small, perhaps a 45-minute walk being the maximum at first.

It was agreed that this would be a useful initiative.

***Action Point****: Sue Calver to look into organising short social walks around Watlington.*

**7**. **AGM arrangements**

Item deferred to the next meeting.

**8. PPG feedback**

Car Park: There had been comments about lack of space in the car park. There were only 2 disabled bays. The CV notice could be removed to make the disabled bay clearer. The surgery needed space for extra people moving into the area.

There was space to extend the car park over the grassed area, which would need planning permission, and funding for the work to be carried out.

It might be possible to apply to the Community Infrastructure Levy Grant.

***Action point****: Practice and PPG to discuss this further.*

Physiotherapy: many exercise sheets were distributed, but no hands-on treatment.

***Action point****: Dr Nichol to look into this.*

Phone line at 8.30 a.m.: callers are getting a ‘number not available’ message.

*The Practice is looking at a different system for call handling.*

Judith had received a letter saying she was outside the practice catchment area and she is being removed. This was an error which had been rectified.

*It was hoped this was an isolated incident.*

East of England Cancer Screening Webinar: Judith reported that this had been very well done, and an interesting and worthwhile session.

Margaret reported that the Practice staff listing on the web page was out of date. Dr Nichol reported that she had also had this pointed out to her, but with a different discrepancy. The web page variants needed to be checked.

***Action point****: Amy Rossiter to check the web pages.*

It was clarified that the PPG could meet as a more informal group outside the official meetings and have a WhatsApp group if participants were willing to share their contact details.

It was stressed that no patient details could be shared or discussed.

***Action point****: Amy Rossiter, Judith Leigh, Sue Calver, Margaret Blackburn to check PPG members’ agreement to share contact details and take arrangements forward.*

**9. AOB**

Dr Nichol was planning to hike the Norfolk coast in May to support Macmillan, and was hoping for sponsorship.

[*Note: several sponsors signed up at the meeting.]*

Dr Nichol explained the situation with the politics of general practice. There was a 2% increase in funding proposed, which would equate to a pay decrease. The BMA deal with the GP contract, and are considering industrial action. GP partners themselves cannot take strike action, but it would be feasible for employees to be involved.

[<https://www.bma.org.uk/pay-and-contracts/contracts/gp-contract/gp-investment-in-england>]

Safe working in General Practice: The Practice must conform to the BMA employment contract conditions for employees, which state, for example, that the safe level of patient contacts per day is 25-28 patients. The current average is 37 patients per day.

[<https://www.bma.org.uk/advice-and-support/gp-practices/managing-workload/safe-working-in-general-practice>]

In answer to a query, it was clarified that the Practice has no plans for any health initiatives during the year, as at the moment it a case of “firefighting” with no extras possible.

**10. Date of next meeting**

The next meeting Tuesday 2nd July 2024 [To be confirmed]