

# Draft minutes Annual General Meeting of Orton Bushfield

## Patient Participation Group (PPG) January 18<sup>th</sup> 2016

Attendees :-Mr & Mrs Peacock(NP/RP), Mr Leary(CL), Mr Copsey(TC), Mr & Mrs Black(RB/MB), Mr Johnson(TJ), Mrs Morris(CM), Ms Butcher(LB)Dr Marimuthu(Dr M)for part of the meeting

1. Apologies and Welcome: - Apologies from P. Copsey. New member TJ was welcomed to the meeting.
2. Minutes of the Last Meeting: - These were signed as a correct record. It was agreed that matters arising from the November minutes should be addressed at the end of the AGM if time allowed.
3. Nomination/Election of Officers for 2016:-MB stood down as chairman.

There were no volunteers for the post for 2016. MB was nominated, seconded and unanimously elected to serve in this post during 2016.

CL volunteered for the post of vice chairman with the proviso that he would not be prepared to deputise for MB at meetings other than the PPG. There were no other volunteers and CL was unanimously elected to serve in this post for 2016.

MB asked for assistance in taking PPG meeting notes, there were no volunteers but TC agreed to ask PC if she would take on this task. TC

*NOTE. Dr Marimuthu joined the meeting at a later time, thanked the PPG for all they had done to help the Practice in the past and confirmed that she was happy to support the officers who had been elected for this year. She indicated that there were likely to be several tasks over the coming year with which the Practice would appreciate help from the PPG.*

4. Progress with Surgery Refurbishment: - Notes of progress to date were circulated prior to the meeting. Concern was expressed by PPG members that the plans suggested by the Practice and PPG for reconfiguration of the main reception/waiting area appeared to have been abandoned by Propco with little discussion and no input from the PPG. CM and LB indicated that the original proposals had proved too costly and that moving the alarms, video security system, and all the I.T. and telephone equipment would have presented too much disruption. They felt the new proposals for public toilets to be enclosed in a "lobby" would address the problems identified by patients. It was suggested that even with the "lobby" Propco should be asked to install appropriate extractor fans to these facilities. (CM/LB to action this with builders.) A new room, created when the redundant reception desk was removed, would allow a private space for patient interviews with staff if needed. CM confirmed that some preliminary preparation work had already commenced but there was no specific timetable for completion of the present jobs or the start of the next phase of the work. The landlord wanted all the window replacements to happen at the same time—around Easter. There was discussion about which of this work was actually part of maintenance programme that should have been implemented over the last 20years and how much was really part of a new "capital build" programme. (*Dr Marimuthu joined the meeting during this discussion.*) It was agreed that MB would meet LB/CM within the next few days and prepare a note to Mr Perry outlining concerns about the refurbishment. MB/LB/CM

5. Review of Quality Care Commission (CQC) Report: - A summary of the main findings from this report was circulated prior to the meeting. Each of the points addressed in the report were discussed and Dr M commented on the specific findings. In some instances, relating to employment practices and incident/complaint monitoring, the CQC had wanted particular monitoring tools to be used rather than the ones already in use by the practice. Dr M confirmed that the Practice had made the necessary changes. There was extensive discussion on the steps being taken by the Practice to enable improved uptake of annual health checks for people with learning difficulties and uptake of cervical screening services. Concern was expressed that, however much time was spent to encourage people to attend the practice; it was not possible to make patients undertake these checks. The CQC would only take account of the numbers who finally did attend, not the amount of effort and time expended by the practice on trying to facilitate the activity. PPG members could not suggest any ways of improving this uptake that the Practice were not already attempting. Patient representatives commended the Practice on those several areas identified as "good" by the CQC.

The meeting was advised that the CQC would be reviewing the Practice again in March to monitor the progress made towards improving those areas of concern identified in initial report. This item will be included on the April Agenda for further discussion and a copy of the report would be put on the PPG notice board at that time. (*Dr Marimuthu left the meeting at this time.*)

6. Any Other Business: -

- a. Online services. LB is to report on progress with the practice website at the February meeting and a request was made to include information on the introduction of "Web GP " which is part of the Prime Minister's Challenge service change. There is a demonstration website to explain how the system works and if anyone is interested in viewing this MB can give details. LB/MB  
PPG members identified that there were problems accessing the repeat prescription service online. Further it was unacceptable that there were such significant difficulties in ever finding any available future GP appointments to book through the online service. CM indicated that the IT department had recently made changes to the system; the practice staff would investigate the problems to see what could be done to improve things. CM
- b. LCG reconfiguration. The LCG is to be reconfigured in April 2016 at which time new representatives for GPs, Practice Managers, and Nurses will be elected. The 2 Patient representatives will continue as members of the new board until such time as a new structure for the Patient Forum Groups have been agreed later in the year. The new LCG will cover all practices presently represented on both Borderline and Peterborough LCGs.
- c. Public Assembly Meetings. NP confirmed that he was now included on the list to be advised of future Public Assembly/Service Transformation meetings.
- d. DNA letters. A PPG member advised that he had unfortunately missed an appointment for a blood test but had contacted the surgery later the same day to explain and apologise. Despite having done this he had received a very strongly worded letter implying that he may be removed from the practice list. CM explained that their systems automatically generated such letters. While acknowledging that it was very important to try to reduce the number of missed appointments, it was agreed the system needed to be reviewed to allow differently worded letters to cover the circumstances associated with each DNA. CM/LB

**Other items not addressed at this meeting will be included in the agenda for February.**

7. Date of the next meeting:-

**8<sup>th</sup> February 2016 6pm**

