

Ainsdale Medical Centre

Patient Participation Group Thursday 16th November 2017

AGENDA

1. Welcome and Apologies
2. Minutes of the last meeting
3. Matters arising from the minutes
4. Aims and Objectives for the coming year
5. Electronic and Social Media
6. Constitution Review
7. Dates for future meetings
8. Any Other Business

Guest Speaker: Justine Shenton from Sefton Pensioners Advocacy Service

Present

Chair: Helen Graham

Practice Clinical representative: Doctor S K Bennett, Dr CM Nugent

Practice Administration: Paul Ashby

Present: Roy Connell, Paul Ellis, Roger Grand, Roger Exley, Barbara Jones, Joan Duckworth

Apologies: Ken Lowe Ian Watson, David Waugh

1. Welcome and Apologies

The Chair welcomed everyone for her first meeting as Chair.

[during the course of the meeting we were joined by three members of the public who were here to attend the 7pm talk by Justine – they were welcomed to listen to the PPG meeting. All three were members of the PPG at Ainsdale Village Surgery]

Apologies were noted as shown above.

RC asked about the survey data from the flu clinics. PA replied to say the data has been crunched into a spreadsheet and he is half way through formatting it in a digestible format. He will complete within the week and distribute round to the group.

2. Minutes of the last meeting

The minutes have been belatedly put on the website along with associated attachments - apart from the high level objectives page which will be posted in the next few days. PA committed to produce the minutes more timely in future and notify the group when they are on the website.

The minutes from the AGM were circulated and accepted as a true record – noting that the group had little notice to read them on this occasion.

3. Matters arising from the minutes

RC asked about the survey data from the flu clinics. PA replied to say the data has been crunched into a spreadsheet and he is half way through formatting it in a digestible format. He will complete within the week and distribute round to the group.

4. Aims and Objectives for the coming year

- Patient Feedback – collection and interpretation
- Promote good health through awareness/education and the development of relationships with local community organisations that can help our patients
- Monitor developments in local and national healthcare provision

Also added at AGM

- Extend the group to be more representative of our overall patient population
- Increase use of social media to engage patients and others

5. Discussion on the 3 high level objectives

Gathering feedback from patients:

Need to look at specific clinics and times of day e.g. evenings to try and gain access to unrepresented population groups. Paul mentioned that the midwife visits on a Monday morning and baby immunisation clinics are mainly on a Tuesday.

Evening clinics are good for meeting working-age patients. Aside from this there are no specific clinics as, for example, diabetic reviews are dispersed across the nurses' general appointments.

It was felt that all of the group could play a part in getting feedback but David and Roy will lead on creating an action plan to take us into the New Year and beyond.

The purpose of coming to the surgery was to primarily get feedback but if this activity resulted in identifying new members then this would be a welcome bonus.

Promote good health:

There was lots of discussion around this. The talk later from Justine and other planned talks are a good example of this activity meeting our high level objectives.

BJ suggested talks from practice staff about their roles would be interesting and SKB further mentioned the GPs and trainee doctors who come to the practice and GPs with special interests. PA welcomed this suggestion and said that some of these could be done in the form of a 'day in the life' articles that we could publish on the website.

RG suggested a brainstorming session(s) similar to the one we held on DNAs earlier this year to include patients and staff to try and find new ways to reach patients with health awareness messages and information.

BJ suggested that Reception staff could tell patients more about what services are available. Paul said this was a great suggestion and is something we are working on already. It's a new direction in primary called **care navigation** and has enormous scope to connect patients up with organisations and services that can help them.

PA highlighted that one of the Reception team, Jill, is developing this side of the team and has recently attended the SPAC Older Persons forum as well as attending the flu clinic health fair with the Alzheimer's association.

Paul said that we had recently discovered the [Sefton VCF directory](#) which is a searchable directory of local services and organisations in Sefton . (VCF – Voluntary Community and Faith)

Action HG to look at the directory to get some ideas of future speakers

Joan rightly asked that we don't use acronyms and initials without explaining what they mean.

Monitor developments in local and national healthcare provision

Agreed we would continue to develop our connection with Healthwatch via the Champions meetings.

A few of the group present had received a flyer through their letter box or via magazines/TV advertising from **Now Healthcare** who are offering free GP services via video conference. It was agreed that it was confusing and potentially controversial. It was felt that patients registering with this service would have their registration with their current GP terminated without realising it. PA was not aware of Now Healthcare but had been aware of a similar service in London that was formally commissioned by the NHS – there are question marks about whether this is the case with Now Healthcare.

RG said the practice should issue a communication saying that patients registration at our surgery was not affected by this and Ainsdale Medical Centre were 'business as usual'. Paul felt this was potentially difficult from a legal point of view but agreed that we need to have a clear statement of guidance for reception to use if patients did come to ask about the leaflet.

SKB explained that services like this take away funding from the GPs in traditional practices as the patients who migrate to these services are typically young and in good health but GPs are funded on an average per patient per year. This explains why it is a politically sensitive situation.

Paul Ellis volunteered to ask the C.C.G.as a patient where Now Healthcare fitted into the overall provision of services – are they officially commissioned to provide primary care services for example?

PA and SKB would update the group on other external developments at each meeting and other members of the group have great insight as well.

6. Electronic and Social Media

HG discussed the work she has been doing with PE to extend the reach of our social media channels, The Facebook and Twitter accounts are now connected together and linked to the PPG website home page as a news feed. This is a communication channel with enormous potential.

Action HG and PE to look at how we can capitalise on the use of Social Media to reach out to other patients.

7. Dates for future meetings

- Thursday 4th January 2018
- Thursday 19th April 2018
- Thursday 28th June 2018 (changed from Thursday 5th July 2018 in original proposed list)
- Thursday 27th September 2018 (AGM)
- Thursday 22nd November 2018

Future dates for 2018 proposed as above and had been circulated with the agenda. On DW's request via email to the Chair the July date has been moved back to late June. All the other dates were agreed. PA said the flu clinics would be on Wednesday 19th and Wednesday 26th September 2018. We kept the option to add in an extra meeting prior to the flu clinics specifically to plan attendance and activity at the health fair.

8. Any Other Business

- Roy asked about some sort of Christmas tree/lights at the surgery this year as it stood out as exceptionally gloomy last year when the rest of the village was lit up by the Civic Society. PA reassured RC that this was being discussed and actioned by the Partners.
- Paul announced that Penny Bailey our Nurse Practitioner had left the practice on Wednesday to pursue interests outside of nursing. We wish her well. Work is underway to replace her as soon as possible.
- Paul also highlighted the artwork on the waiting room walls. The paintings were courtesy of Ainsdale Painting for Pleasure which is a social group that meets every Wednesday at St Johns Church. The purpose of the displays is to brighten up the waiting rooms which they certainly do but also to promote the work of the group and attract new members. There are posters adjacent to the art work with a contact number for the group. The works are for sale.
- Roger asked about the use of SMS messaging to gather Friends and Family feedback. PA said it had been turned on and **was** working but that survey requests are sent out in batches. No patient will be asked more than once in a thirty day period. It is a pilot scheme and we will review at the end of the year to see if it is adding value to the feedback gathering work we do.
- RG also suggested that the SMS system could be used to gather feedback of different sorts outside of the F&F process in the future. PA said it was a very powerful and flexible system and RGs idea was an excellent one worth following up.
- The meeting was called to a close by the Chair.

Guest Speaker: Justine Shenton from Sefton Pensioners Advocacy Service

- Justine Shenton from Sefton Pensioners Advocacy Service (SPAC) gave a talk on her work and the scope of the organisation. It was an excellent and informative talk. Most people were unaware of the existence of SPAC and the discussion that followed generated lots of excellent ideas to develop our relationship.
- Justine left posters and leaflets for the surgery and also highlighted an Older peoples forum at Lord Street West on December 1st (Friday) at 10:30 which is a meeting with Damian Moore our local MP. Attendance is open to anyone.