

Aldborough Surgery Patient Participation Group

Minutes of the meeting held at 6.00 pm on the 22nd August, 2012 at Aldborough Surgery

Present: Dr. Mark Fleming, Nita Good (Secretary) Julie Grey (Practice Manager), Gail Hartshorne, Josephine Holladay, Barry Neate, Christina Neate, Alex Reid (Assistant Practice Manager), Pat Rice, John Shrive (Vice-Chair), Heather Spiller, Jim Spiller, David Waine, Peter Wedge (Chair), Gill Wilton.

Apologies for absence from: Gary Frary, Rochelle Mortimer Massingham, Dee Shaw (Treasurer), Yvonne Tiffany.

Minutes of last meeting: Minutes of the last meeting (Tuesday 3rd, July 2012) were agreed, with a change of 'Village Care website' to 'Aldborough Village website' (see 'Practice Leaflet' item).

Matters Arising:

Display area: Nothing has been decided, but Pat Rice suggested that a free wall near the dispensary could be used to display art work.

NHS 111: Dee Shaw had spoken to Peter about the proposed NHS111, but since there had been no further developments or meetings for some months, there was nothing to report.

With regard to this service Mark Fleming commented that there had been an intentional delay in the full implementation of the NHS 111 number in England from April to October 2013, because medical personnel had expressed concern that the NHS services could come under strain, and that there was not enough time being allocated for other areas to learn lessons from the pilot sites. In Norfolk, Yarmouth is already in service and our area is tentatively scheduled for this October. The free one-stop number is for patients with urgent, but not life-threatening symptoms. It will also act as an out-of-hour service, giving patients instructions about where to go for medical help or advice, and this will depend on where the patient is registered..

Practice Manager's Report:

New Staff: Julie Grey introduced Alex Reid as the new Assistant Practice Manager and spoke of her considerable experience working in secondary health care, which included working at both the Cromer Hospital and the Norfolk and Norwich University Hospital.

Julie also mentioned that there are two male apprentices, one working in the dispensary department and the other in administration. Both will be in the surgery for one year and during that time will continue to work on their National Vocational Qualifications. They will therefore leave the surgery with further qualifications and very good work experience.

Systmonline: This is going well. Patients have registered a large number of telephone and email addresses in order to make appointments and receive appointment reminders from the surgery. The results from the online questionnaire have been very positive about the new system.

Communications: The proposed large flat screen for the patient waiting area has been approved. It will run five or six presentations which have yet to be written. Julie suggested that it might be helpful if the group had some input regarding the topics for the presentations. The screen will be mute and will have relevant information 'running' along the bottom, i.e. a doctor whose appointments are behind schedule. This system should be in service by Christmas.

Flu Clinics: These will commence on Saturday October 6th and Julie would like as many patients as possible to make appointments for that particular day. The flu clinics will end before Christmas. Information regarding the clinics will be advertised in local and community newspapers and magazines.

Noticeboards: There is one by the main entrance. A new board will be placed in the main entrance porch, this will contain information and leaflets. A new sign will be purchased for the dispensary end saying 'Aldborough Dispensary' and a new noticeboard will be purchased for the dispensary entrance.

Boundary Changes: This is a government initiative to give people more choice regarding which surgery they wish to attend. The Aldborough Surgery's current boundaries encompass Sheringham, Kelling, Cawston, Buxton, and North Walsham, the new boundaries will be slightly extended to include Holt, Brandiston, Stratton Strawless and Trunch. Eventually patients in the area will be free to apply to join the surgery of their choice.

General Practice Assessment Questionnaire (GPAQ): Julie showed us the final versions of the now renamed 'Aldborough Surgery - Patient Questionnaires'. Questions on both surveys are identical with one relating to an appointment with a doctor and the other with a nurse. The questionnaires will be available in the surgery during November and December. They will also be available online and therefore have the capacity to reflect the opinions of a much larger patient body. Julie suggested that it would be most helpful if some volunteers could be in the reception area to help patients fill in the surveys during November and December. Christina Neate offered to organise a rota of volunteers. Julie suggested that this rota could also cover the integrated care system (chronic disease clinics), with volunteers being available to answer questions and help patients adjust to the new system. This would also provide a good opportunity for volunteers to inform patients about the creation and purpose of the PPG. In this regard it was suggested that the flat screen proposed for the reception area could also be used to transmit information about the group's existence and purpose.

Patient Conference on September 27, 2012 from 9.30 am to 12.30 pm at the Aylsham Care Trust Centre. The topic for the conference will be to ask patients to comment on the Clinical Commissioning Group's intentions, in particular around areas like orthopaedics. Julie asked that members let her know if they wish to attend.

Aldborough PPG Constitution: Peter Wedge asked if the group had any suggestions or objections to the draft constitution. Christina suggested that the word challenge under Aims: #2 might be perceived as aggressive. After discussion it was agreed that it was fair and should stand. The rest of the points were approved. Peter said that he would like to see the constitution formally adopted at the next AGM in May 2013 and until then we will operate within its boundaries.

Action Plan:

- 1 *Agree a constitution* -this has been done
- 2 *identify a committee representing a wider group of patients* – this creates more of a challenge and the group has to find ways of reaching and including a wider patient body. There were suggestions that we could use press releases, Facebook, and disseminate information about the PPG at local community activities such as 'jellies' or yoga classes.
- 3 *create a data base of interested patients* – Jim Spiller agreed to work with Gary Frary, who has had experience working with other practices on this matter.
- 4 *join NAPP* – Peter raised the issue of the £50.00 fee needed to join NAPP and received an

assurance that this cost would be met by the surgery. On the question of other expenses, that might be incurred by the PGG on behalf of the practice, Julie said that they would be considered on an individual basis.

5 *hold at least two other open meetings for patients* – it was agreed that the first one should be held in October or November and that it should be as interesting and innovative as possible in order to attract a diverse audience. Various topics were suggested, including one that explains how NHS 111 will work, what services are available when the surgery is closed, and how to use the defibrillator at the Spa; another involved the question of taking responsibility for one's own health and could involve general fitness, nutrition and exercise. Peter suggested that a second open meeting be planned for the New Year but that the first should focus on out-of-hours services and how patients should access them. It was agreed that this should be taken forward by a sub-group comprising Mark Fleming, Gill Wilton and Peter Wedge.

6 *seek ways to establish the views of patients generally and to fulfil the aims expressed in the constitution.* It was generally agreed that to do this effectively we had to reach a larger patient population (see Action Plan 2 & 3).

Which members would like to be on the Interim committee (i.e. until the AGM next May)? In addition to the officers (Peter Wedge, John Shrive, Nita Good, Dee Shaw), the following agreed to be interim members: Gill Wilton, Jim Spiller, and Barry Neate. The remainder of the group expressed a willingness to help in any way possible, but would prefer not to be on the Committee. Pat Rice would like to continue in her role of art advisor. Rochelle Mortimer Massingham sent Peter a letter expressing her willingness to contribute to an event or project in the future, but not as a Committee member.

Any other business? Heather Spiller had volunteered to help with the Under 1 Group but so far none of the volunteers has been contacted. Julie informed us that the group had been cancelled owing to the withdrawal of funding.

Mark mentioned that he will continue to teach fourth year medical students from UEA in obstetrics, gynaecology and paediatrics at the surgery on nine Mondays from September, with a further nine sessions after Christmas.

Date of next meeting: The interim committee will meet sometime during the week of October 19th to 24th. Nita will contact the members to agree a date.