

ELMWOOD FAMILY DOCTORS PATIENT PARTICIPATION GROUP

Minutes of the Patient Participation Group (representing Holmfirth & Meltham Sites) Tuesday 5th June 2018 7:00 p.m. at Holmfirth

Present: **Matthew Milburn (Chair), Dr James Morton, Jean Quarmby, Alan Barlow, Wyn Kemp, Rob Hodgson, Hayley Hartley**

No.	Item	Actions
1.	Apologies: Jane Lockwood	
2.	New Members: Rob Hodgson Introductions were made by all members of the group. Dr Morton also asked the members why they wanted to be part of the PPG and what they hoped to achieve. All agreed that they wanted to contribute something positive, encourage patients to take ownership of their own health and suggest ways in which to do this and improve the experience for all.	
3.	Matters Arising :	
	<p>3.1. The PPG's thoughts about their possible role in promoting the Practice Services and profile in the community and online: Dr Morton explained that if you were to Google us, we come up with a 2/2.5 star rating which we are NOT. This can impact on potential new employees and also potential new patients to the practice. Less patients = less funding. If PPG members hear a friend / neighbour commenting about the practice, encourage them to review us online. We don't want to look for feedback, we would prefer the process to be more organic, though we are going to send patients a text if they provide us with a positive comment on the telephone / desk with a direct link to where they could leave a review. The link for where you can leave feedback is https://www.nhs.uk/Services/GP/LeaveReview/DefaultView.aspx?id=44340</p> <p>3.2. Newsletter example from another surgery: Hayley brought along a newsletter a colleague had given her which had been received from another PPG group. The group agreed it looked good. Hayley had researched cost to print 100 = £27, 200 £44.</p> <p>3.3. Feedback from Jean re. PPG event at Huddersfield Town Hall: Jean advised there was a very good display from Waterloo practice who have a very active group. They use their group to raise funds and had produced a calendar of local photographs last year with the proceeds used to purchase some baby scales and a nurses trolley. We agreed that whilst fundraising was a good idea, we felt that any proceeds should be used to enhance the patient experience but not to purchase medical equipment.</p>	<p>Matthew to draft a newsletter for the next meeting and to discuss further</p>

4.	<p>PPG Promotion of Well-being through Community Events Board</p> <p>4.1. Title Banners had been obtained by Matthew to fit the noticeboard which were very professional and looked excellent. It was suggested that we also have a board at Meltham. Hayley would send dimensions to Matthew so that similar banners could be made</p> <p>4.2. GPs to promote to patients : Members asked that the GPs highlight that appropriate activities for patients under “social prescribing” are advertised on the board.</p> <p>4.3. Suitable material would be needed for the board and Members were encouraged to bring any that they could access from a variety of activities. . This can be laminated or if necessary, re-formatted by Practice staff for better display</p> <p>4.4. Letter from the PPG: it was suggested that a centrepiece of the board be a letter from the PPG advertising to patients that if they engaged more with activities in their local communities, they could reap the benefits of a healthier lifestyle, more social contact and increased well-being.</p> <p>4.5. Use of website: members suggested having an area of the Practice Website which explained the Philosophy of “self-care” and pursuing activities for better well-being. Following the meeting, feedback from the Practice senior management team suggested that the website has a PPG page under “patient info” that could have the following tabs:</p> <ul style="list-style-type: none"> • What is PPG (members, role, frequency of meetings and how to join)? • minutes of previous meetings • a community links page <p>PPG would prepare the content, updates to which would be agreed at each meeting and updated quarterly by Practice staff following each PPG meeting.</p>	<p>HH to send MVS board dimensions to Matthew</p> <p>HH to pass to TT</p> <p>Matthew to draft wording and send on</p> <p>HH to prepare website tabs and upload meeting minutes etc. after discussion at next meeting of how this is to look</p>
5.	Care Navigation – now known as Active Sign-posting	
	<p>5.1 David reported that EFD GPs want to have further discussion before embarking on this.</p> <p>5.2 Reception staff have completed on-line training and attended live training sessions run by the CCG.</p> <p>5.3 We are still awaiting information on the provision of more “pathways” to which patients can be directed. These</p>	

	<p>are likely to include:</p> <ul style="list-style-type: none"> • advice from clinical pharmacists who can deal with many medication-related issues, • direction to Opticians for all eye problems (opticians have equipment for first-line diagnosis which GPs lack and can refer direct to hospital Ophthalmology with more detailed information) • direction to physiotherapy services without the need to see a GP first <p>5.4 GHCCG are arranging a press release – still awaited.</p>	
6.	Retirements	
	Dr Bradley would be retiring at the end of June 2018 and Dr Akam would be retiring on 23 rd July. Posters would soon be up in waiting rooms and on the website. The GP partners will be discussing how to replace these two GPs – it is possible that instead of new GPs, the Practice might instead look to recruit advanced nurse practitioners, clinical pharmacists or a “Physio First” service (or a mixture).	
7.	Incoming Telephone Calls	
	Matthew suggested that if the Practice were to re-schedule its batch text messaging to the afternoon, patients would be more likely to phone with the resulting queries in the afternoon rather than the busy morning period.	HH to explore with PAs and Reception team what impact this would have
8.	Heating	
	David explained about the problems the Practice had been having with the heating ever since the new boilers were installed as part of the refurb. This was being actively pursued and a new firm had been appointed to solve the problems.	
9.	Uniforms	
	There was no strong feeling in favour of uniforms among PPG members. More popular was the suggestion that clearer name badges be used - which could be more easily read without peering intrusively at the receptionist!	MCM & HH to investigate new badges
10.	Patient Feedback	
	Les wanted to pass on positive feedback about how well the practice nurses had treated his wife on her recent visits	MCM to pass on to PN team
11.	Media reports of referral rationing	
	Les asked about a report he had read in a national newspaper about GPs allegedly being “paid not to refer patients to hospital”. David assured him that there was nothing like that going on in Greater Huddersfield and that initiatives to avoid inappropriate referrals, which would in turn save money much needed for other care, were often	

	misinterpreted by journalists who possessed a less than clear command of the facts.	
	Next Meeting 5th June 2018 at Holmfirth	