



Patient Participation Group Meeting.

Tuesday 12th March 2019. 1.00pm

Conference Room, Glossop

Present:

Chairperson LA, JO, SH, GA, JA, VM, HT, HB, IE, WA, CE, SS, Dr ZH

Apologies: TB, RH, AM.

Agenda:

1 .Minutes from 12 February meeting read.

2. Approved by JO and HB

3. Matters Arising: none

4.Treasurer's Report:

JA reported no change.

5.Report from Partners' Meeting:

The CQC inspection took place recently but formal feedback will not be available until 4 weeks after the date; informal feedback suggested no significant concerns and the role of the PPG members who attended was appreciated. LA and JA had met Alison Bowler, Practice Manager prior to the CQC meeting and this had been positive, it is planned that AB will attend the June PPG meeting for further discussion, including the waiting room at Glossop. **LA to invite Alison Bowler to Formal Meeting in May**

It was agreed that TW's attendance at the last PPG to discuss problems with prescribing had been very helpful as concerns had been aired and the system explained.

6. Patient Neighbourhood Group:

Both IE and SH now attend this; IE reported on the recent meeting where the Breathing event, planned for 13th April, was discussed. There had been a request for all surgeries to text all patients who might benefit from it; Simmondley was the only surgery to agree to send texts. **Dr ZH agreed to discuss this with the partners.**

Charlotte Leonhardsen from The Bureau had attended the PNG; she was concerned that she had had no come back from Manor about our involvement in the recruitment of

Connectors for Social Prescribing; she had also reported that the Bureau had been granted money in relation to Social Prescribing. The neglect of this issue at Manor was probably due to preparations for CQC absorbing people's time and attention. **DR ZH to look into this issue** IE also reported on the plans to train surgery admin staff in patient communication; currently, this is at the "train the trainer" stage. Plans for (future) neighbourhood GP services were also discussed, including the awareness that Glossop's split of Health and Social Care funding between Tameside and Derbyshire continued to present its own challenges, particularly in terms of less provision for Glossop.

7. Clive's Film:

This was shown, with Dr ZH thanking CE for his work in making an effective and professional video. Discussion focussed on developing an accompanying leaflet with all the contact details and the technicalities of adding further information as and when it is required. The current TVs in the two surgeries pose different problems in terms of running the video and it was agreed that these needed consideration. **HT and Dr ZH agreed to have the video shown at the next admin staff meeting and partners' meeting respectively. CE to produce leaflet for patients with info about activities shown on film. Dr ZH and CE to look at technicalities of getting film up and running in both surgeries**

There was further discussion about the soundtrack of the video, with HR (not present today) having raised her concerns about sensory overload. It was suggested that a note could be placed by the monitor advising discussion with staff to reduce the volume if it was problematic. **LA to produce notice**

CE explained that as he had donated the film there was no cost for it and he was happy for the video to be distributed to other surgeries within the area.

8. Survey: Online Access

The recent drives to increase this have proved successful, including getting adolescents (who have their own email addresses) to register. Thanks to the PPG members who assisted on the event days in February.

Discussion ensued in terms of maximising useful results from a survey, in particular establishing not only what the barriers to using the system are, but what patients find useful about it. The government target (30% online) has, it appears, been achieved, following the recent drive, but further use of the system would be even better. It was noted that a quite large group of patients, namely the healthy younger and middle aged who rarely use GP services, are unlikely to be registered as they will not see benefits because of their infrequent usage. **JA to consider questions for survey**

9. Newsletter:

JA said that he had sufficient material to use for the Spring edition (see minutes from Feb). WA will forward to him additional information she had seen regarding the Derbyshire "Live Life Better" website for inclusion. **WA to deal with this.**

10. PPG Letters:

A request that letters addressed to PPG members, delivered to the surgeries, are not opened but left for the addressee.

11. AOB:

a) HB requested that the PPG was not suggested to patients making complaints, as a route to resolving these. There is a clear and defined route for formal complaints and the PPG is a separate entity. **HT and Dr ZH to report back to admin staff and medical practitioners respectively**

b) GA drew attention to a proposal, recently reported in the Glossop Chronicle (possibly under discussion with Derbyshire CC and Tameside & Glossop CCG) that the site of the old Glossopdale school is used to provide a new health centre and elderly care provision; this is in light of the loss of the Shire Hill facilities and recognition that the money from its sale should be available for a replacement service. There was discussion about the benefits, the feasibility and the desirability of ensuring that Glossop's services were not further reduced.

NB: GA has kindly circulated the information regarding this to PPG members.

a) LA informed the meeting that Andy Millican will provide further poems from his poetry group on the theme of summer; it was agreed that the poetry display needed attention as it seems to be invisible –under other items. **LA to contact Andy**

Next Meetings:

Informal: Monday 25th March, 2.30pm at Hadfield.

Formal: Tuesday 9th April, 1.00 pm at Hadfield.