

Minutes of Glenlyn Medical Centre Patient Participation Group Meeting held on Tuesday 23 May 2017 at 6.30 pm, Giggs Hill Surgery, Thames Ditton

Present: David Roskams, Heather Chatwin, Carole Tyrrell (GMC), Susan Dennis, Heather Leport, Gillian Stewart, Phil Plunkett, Catherine Hazell, Wendy Wilson, Linda Alderwick, Rosie Hodgkinson, Paul Thompson, Rebecca Daddow, Katina Wilson (PPG).

Apologies: Karen Young, Derek Gage.

Introductions:

PPG members and staff members from GMC introduced themselves.

The PPG were extremely disappointed that there was not Partner representation at the meeting and wished for this to be minuted.

Update on new clinical staff joining the Glenlyn Team/Improving Patient Access:

David Roskams advised that the following new staff have been appointed:

- Mel Bott, Advanced Nurse Practitioner (ANP) – 3 July 2017 – full time
- Dr Francesca Cappelluto, GP – 5 July 2017 – 2 days per week
- Jane Robinson, Practice Nurse – 10 July 2017 – full time

David Roskams advised that the GP/ANPs are holding a meeting on the afternoon of 15 June 2017. The purpose of the meeting will be to investigate how to improve patient access and waiting times. DR agreed that he would feedback to the PPG group following the 15 June meeting.

Review of last meeting minutes/actions:

The minutes of the previous meeting were accepted with minor amendments.

Heather Chatwin advised on an action from the previous meeting regarding the messages on the Glenlyn and Giggs Hill telephones. Heather Chatwin had been in contact with the telephone companies and an engineer was coming on Thursday 25 May to Giggs to assess the option for changing the message. The PPG had recommended a change of wording for the telephone message and this will be implemented across both sites. It was hoped that messages would be changed across both sites by the end of next week. The changes would enable the receptionists to have the facility to press a button to change the message and advise patients when all the appointments had gone. It is hoped that by freeing up the telephone lines, it will be easier for patients to get through to receptionists to cancel appointments (thus reducing DNAs).

It was agreed that the Agenda for future PPG meetings should be circulated at least one week before the PPG meeting. Another suggestion was that questions for the PPG to address at meetings should be e mailed prior to meetings. It was reiterated that the PPG meetings were not a forum for individual complaints.

Approval of Final Terms of Reference and constitution:

Unfortunately, the final Terms of Reference and constitution had not reached all members. There appeared to be a number of e mail lists in circulation (one of which did not contain the complete e mail address list for PPG members). Heather Leport/Heather Chatwin/Karen Young to coordinate the distribution lists. It was agreed that Terms of Reference would be signed up to once everyone has had sight of the documents.

PPG web forum:

A low number of PPG members are signed up to the forum. Some members thought they may have difficulty using the forum site. Heather Chatwin demonstrated how to join up to the PPG forum page. Heather Leport commented that once members became familiar with the layout of the forum page it would be easier for them to use. It was decided that the forum would be monitored and assistance would be given to those who needed help getting started.

AOB, complaints, NHS Choices and other items

It was felt that the PPG meetings cannot move forward if we repeat discussions around lack of appointments, individual health issues, Patients who 'do not attend' (DNAs), GP ratios and Glenlyn/Giggs catchment areas. The issue of Glenlyn 'advertising' for new patients was raised. Heather Chatwin/David Roskams explained that patients register and leave the Practice and that to 'close the books' would be unfair on people moving into the Molesey and Thames Ditton areas. Following on from these discussions it was suggested that a briefing sheet be produced to advise new PPG members on the areas of concern that had already been discussed. If new members were given a briefing sheet upon arrival they would be able to see the priority issues which had been identified at previous PPG meetings. The meeting would then 'flow' without revisiting previously discussed issues.

The PPG noticeboards have arrived and will be put up in the waiting areas in both Glenlyn and Giggs.

There was a suggestion that the walls of the waiting rooms should be de-cluttered. It was agreed that this would be actioned but the group was advised that certain material must be on display. A further suggestion was that some information that was displayed on walls could be provided in a format that patients could take away, for example, in booklet format. This would be investigated.

There was consensus that the PPG should start having more direct involvement in the Practice. Heather Leport stated that the PPG need to be able to speak on behalf of the patients more. There was also discussion regarding how to make contact with a broader patient group (young families, etc). A suggestion for the PPG to meet with patients in waiting rooms to gather opinions was put forward again. It was reported that a piece of 'sign posting' work that had been suggested by Dr Kapoor as a PPG project at a previous PPG meeting was being produced nationally. It had, therefore, been felt inappropriate to try to produce our own Glenlyn document if one were in the process of being prepared.

Heather Leport reported that she had not had a response from the Facebook page owners regarding the request to remove the word 'Glenlyn' from the Facebook page. The issues of ownership need to be resolved. However, the dates of the PPG meetings were being posted on the Facebook page.

The PPG were disappointed that the Paediatric Clinic stopped at the end of March. A suggestion that the PPG write to the CCG to express their disappointment, as the clinic had been very popular with patients, was agreed.

A new PPG member, who works with Coalition for Collaborative Care, volunteered to meet with the PPG group separately to offer her expertise.

David Roskams advised that following the meeting with the clinicians on 15 June he would meet with the PPG and provide details of what had been decided. It was emphasised that the Practice wished to be transparent in their dealings with patients and the PPG.

David Roskams suggested that it might be useful for the PPG to have meetings with various clinicians. Perhaps GPs, ANPs and nurses could attend smaller PPG meetings and discuss issues with members.

Dates of Next Meetings:

The next quarterly meeting will be held on Thursday 14 September 2017 at 6.30. Heather Chatwin to check that one of the Partners can attend.

A meeting has also been booked for 1 June 2017 at 2 pm at Giggs Hill Surgery.

It was also agreed that a coffee morning be arranged to try to encourage mums/dads with young children to come along.

S: PPG meeting notes 23.05.2017/ct

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