

**Patient Participation Group**  
**Thursday 8 December 2011**  
**MINUTES**

**Attendees:** Gwen Adams, Lorna Cottam, Julia Walkden, Janet Trickett, Paul Taylor, Marian Dunn, Karen Manciocchi.

**Apologies:** Robert Humphries, Joan Crabtree, Jean Kirby, James Baxendale

**Introduction**

GA welcomed everyone to the first Patient Participation Group (PPG) meeting. She explained the practice was now part of a Clinical Commissioning Group (CCG), and would become more involved in the commissioning of NHS services. This could mean creating a new service, or re-designing an existing one. With this in mind, the Practice is committed to seeking our service users (patients) views and opinions.

As the PPG is only just starting out the Practice is looking for different skills that patients could bring to the group, and asking for volunteers to help in different ways.

LC stated that the meeting had been advertised via the website and on posters within the surgery, but was concerned that patients may not have been aware of the meeting due to the poor response. PT felt that most patients may not be aware of the website, as he had only seen it in the last week. It was also felt that the notice boards are quite “jumbled” and the meeting posters may not have stood out.

**Patient expertise**

PT volunteered to help out with the website, and would also help set up and manage a facebook page for the practice. He is also able to offer advice for people with disabilities, and will come into practice to discuss how we could use this in the future.

MD volunteered to become a carer’s advocate. She will take over a notice board within the surgery dedicated to carer’s, and liase with the practice for all relevant carer information and campaigns.

KM stated that she knew of a patient who may be interested in taking responsibility for organising our other notice boards.

**Survey**

Each year the practice conducts a patient survey. The PCT want us to ask questions relating to “access”. The practice wants to focus the survey on how patients feel about access to appointments. The practice currently offers appointments up to 6 weeks in advance. Most of these appointments are available to book from the moment they are put on the system, but a few each day are embargoed. These embargoed appointments only become available “on the day”, and are ideally for patients who have become unwell over night. As more patients have become familiar with this system, it appears to staff that many of these “on the day” appointments are being taken by patients who are not happy

to wait for the next routine appointment with their GP. The next available routine appointment is often up to 10 days ahead. The practice will use the survey to find out how patients find and use the appointment system, with a view to changing the system to better suit patient expectation. A survey was agreed. This will be available to all patients shortly.

### **Ideas**

The following were suggestions that may be considered in the future

Always have one notice board available for a “current campaign”

Collect all patient’s email addresses

Volunteer drivers for patient transport

### **Next Steps**

The 2011 access survey will be made available for all patients, via the website and in surgery

PT will come into practice to discuss setting up a face book page

MD will come into practice to discuss a carer’s notice board and support group

A text message will be sent to all patients to advise them of our website

### **Next Meeting**

February 2012 – date to be confirmed.