

## Broadway and Ingol Patient Participation Group (PPG)

Minutes of meeting held at Broadway Surgery 6<sup>th</sup> Dec 1400hrs

CCG = *Clinical Commissioning Group* – PVC = *Patient Voice Committee*

NAPP = *National Association for Patient Participation*

### **Attendance**

Key (Pr = Practice Staff, B = Broadway Patient, I =Ingol Patient, V = Visitor)

Present		Present		Apologies
Dr Nosheen Awan (NA)	Pr	Paul Haydock (PH)	I	
Diane Bailey (DB)	Pr	Terry Mattinson (TM)	B	
Walter Barnes (WB)	B	David Noblett (DN)	V	
Walter French (WF)	B	Rebecca Stafford (RS)	CCG	
Jane Grogan (JG)	Pr	Dr Melanie Walsh (MW)	Pr	

**TM** acted as Chair & welcomed those present. He said the group has to decide on the positions of Chair & Secretary of the group. Part of the raison d'être of the group was to support the Doctors & Staff. This is an informal meeting re-establishing a PPG. The PPG needs to do something regarding closure of Pharmacies

**MW** looked to the PPG to disseminate information about the practice. For example- For patients to be seen on the day they may need to go to another site. Education of patients is vital so they are able to choose the appropriate service for their medical problem viz Pharmacy, GP or A&E.

**PH** told the meeting he was new to the PPG & did not know members of the group. He asked if there was a purpose for the meeting? **JG** saw the PPG as a new group & part of the purpose was to encourage different people to join.

**PH** felt the notice boards needed sorting out, especially at Ingol & suggested the use of Facebook to advertise the PPG.

**DN** is presently the Lay Member for Patient and Public Involvement at the Greater Preston CCG. He has been involved with the Longton Health Centre PPG since its inception in 2011.

David told us about the Longton PPG & gave a summary of the roll of a PPG as he saw it. Longton PPG have various pages on the Health Centre web site, in particular a "Contact the Patient Group" page to enable patients & others to leave comments (Not complaints for which there are other avenues). The group has a "Terms of Reference" page setting out Membership information plus Aims & Objectives together with "Rules of Procedure".

A quarterly newsletter is produced by the PPG with items of interest to patients. It is an important part of the PPG. It contains things to do in Longton also covering issues faced by patients. It is hoped to run a Cardiopulmonary Resuscitation (CPR) course at the Health Centre for practice patients.

As diabetes is very high on the health agenda the subject is of concern to the PPG. The "Desmond<sup>2</sup> team", from *Lancashire Care NHS Trust* & based at the Minerva Centre, Preston North End, are to have a session at the Longton Health Centre, which is a Diabetic Hub for the care of people with diabetes.

**MW** explained that the Hub related to a health care structure likened to a hub & spokes of a wheel.

**DN** The local *Diabetes UK*<sup>1</sup> Support Group has been involved in one of the PPG meetings & their contact details are posted in the newsletter. The local Alzheimer's Society<sup>3</sup> has a monthly presence at the Health Centre as do *N-compass*<sup>4</sup>. It is hoped to have a mini Health Mela at Longton Health Centre.

A *Virtual Group* (Using email & Facebook) is an essential part of the PPG to allow many of those who are unable or choose not to attend meetings to engage with the Practice & PPG.

*Healthwatch*<sup>5</sup> & *Care Quality Commission*<sup>6</sup> are organisations who wish to hear the views of patients & will engage with the PPG.

The PPG is consulted by the Practice & have been involved at the Health Centre in disseminating information:-

1. Cytology
2. Changes to prescribing
3. Bowel cancer screening

A *Car Transport Scheme* has been set up which is run through *Preston Community Transport (PCT)* A person wishing to use the scheme telephones PCT to arrange transport. **TH** Longton is a community; we need to look at this for our practices.

**DN** Solvent misuse is an issue in local schools & the PPG liaise with the schools on this. The PPG should try to be proactive in what it does if it wants to change things.

#### **Agenda 5** *Moving Forward* “How to attract more people to be involved with the PPG”

**MW** The meeting is a start to forming a PPG; this is the first response. **DH** the PPG should be representative of the practice population e.g. Age – Sex – Ethnicity. People do not need to attend meetings – just be there for consultation. Building up a truly representative group is a slow job. **MW** Suggested a notice board outside the practice building. **TH** Advertise PPG on the Practice Facebook page. **MW** The practice Facebook page is of the “one way” type but a banner could be used to advertise the PPG

**PH** Whilst this is a start we are far from representative of the practice population. **NA** Nosheen suggested a small leaflet would be a good way of advertising for new members of the group. **JG** The practice needs to make efforts to obtain the email addresses of more patients. **MW** More likely to recruit people in their 60s & 70s to be involved in face to face meetings; young people are not good attendees of meetings. **RS** felt difficult for patients to understand Quality & Outcomes; they need to see the “bigger picture”. **DN** suggested education by the GPs, perhaps an article in the newsletter “A day in the life of a GP” would help with understanding.

#### **Agenda 3** Practice Survey

**MW** Ongoing, no deadline for finalising. Leaflets available in surgeries. Emailed leaflet to participating patients.

#### **Other business**

**DH** suggested the PPG set meetings quarterly **JG** felt we needed a meeting sooner to facilitate the establishment of the PPG.

**TM** With the Practice spread over 2 sites it must be ensured both are treated equally to indicate they of equal importance. People without email must also be catered for; telephone or letter. It is important the re-establishment of the PPG is disseminated widely amongst the practice patient population. **JG** has kindly agreed to email people on the practice’s email list. Leaflets regarding the PPG need to be placed in the surgery waiting rooms to inform those not on email or those who do not look at the practices web site.

The meeting room at Broadway is rather small for meetings **MW** Suggested a spare room at Ingol Surgery would be a better size.

***Next meeting Tuesday 31<sup>st</sup> Jan 17 2pm Venue Ingol Health Centre, Back Room***

- 1) Diabetes UK is a large nationwide charity for those affected by diabetes
- 2) Desmond is an acronym - Diabetes Education and Self Management for Ongoing and Diagnosed – and is an education facility about diabetes.
- 3) Alzheimer’s Society: UK’s leading dementia support and research charity for people living with dementia, their families and carers – Local: Derby House, Lytham Road, Preston PR2 8JE, Tel 01772 788700
- 4) n-compass northwest - Established in 2009, a not-for profit organisation; Aim - improve the lives of vulnerable people across the region.
- 5) Healthwatch :The public voice for health and social care - Healthwatch Lancashire, Lancashire Business Park, Leyland House, Unit 2, Wing 3, Centurion Way, Leyland, Preston, PR26 6TY Tel: 01524 239100
- 6) The Care Quality Commission - The independent regulator of health and social care in England