

**ST PETER’S HILL SURGERY**

**Patient Participation Group**

**Inaugural Meeting Minutes – Wednesday 17th June 2015**

**In attendance:**

*Representing St Peter’s Hill Surgery:* Catherine Dickinson (Practice Manager), Sarah Jackson (Secretary)

*Patients:* Mr G Mensah, Mr S Roberts, Mrs D Hickey, Mrs S Lawrence, Mr K Rankin, Mrs C Tagg, Mrs D O’Connell, Mrs J Bennett

**Apologies:**

*Patients:* Mr S Hemming, Mr C Abbs, Mrs L Mason, Mrs M Hunter, Mr M Newham, Mrs K Shelbourn, Ms S Hayes

**1) Welcome**

Catherine Dickinson welcomed everyone to the inaugural meeting of St Peter’s Hill Surgery Patient Participation Group. She stated that the group would be a useful link between the surgery and its patients. Although herself and Sarah plan to be involved for the foreseeable future, she hoped that patients would “own it” for themselves. PPG’s are well established nationwide and there is a National Association for Patient Participation which the Group may wish to become allied to in the future. Sarah instigated an ‘ice-breaker’ activity to encourage everybody to introduce themselves to the group and give a brief indication of their interests in getting involved with the Group.

Catherine gave a brief introduction to St Peter’s Hill Surgery, informing the Group that the Surgery has just over 16,500 patients with 4 partners (Dr Parkin, Dr Pardoe, Dr Pilbeam and Dr Udom) and 2 full-time salaried GP’s (Dr Finlan and Dr Shelbourn). St Peter’s Hill is a Training Practice and there are usually 2 registrars working at the surgery and whilst they are qualified doctors, they are training to be GP’s. These doctors are regularly monitored by the training partners. Our current registrars are Dr Mogga and Dr Abarshi.

**2) What is a PPG?**

Sarah gave a background history of how Patient Participation Group’s began, explaining that they consist of a group of volunteer patients who often have an interest or passion for health services and who evolve to meet particular local needs. The groups can act as a route for patients to advise the Practice on what matters most to patients and identify solutions to problems. Sarah highlighted that every group is different and free to choose how to organise itself and where to focus its activities. Although a Chairperson was not appointed at this meeting, this is something that will be discussed at the next meeting. It was stressed that the Patient Participation Group must not be used by its members as a ‘complaints forum’ or ‘doctor’s fan club’. It was explained to the group that as of April 2015 it became a contractual agreement for all GP Practices in England to have a Patient Participation Group and now an estimated 75% of Practices in England have one, up a significant 35% from 2009.

**3) The Role of PPG’s**

Sarah discussed how other Practices have utilised their PPG’s:

* To advise the Practice on patient perspective
* Organise/promote health promotion events
* Running volunteer services/support groups (i.e. Heckington walking group)
* Carrying out research into the views of those who use the Practice
* Influencing the Practice/wider NHS to improve commissioning
* Fundraising to improve the services that are provided

Mr Roberts explained how his wife is a Parkinson’s sufferer and, although he is fortunate enough to be able to support her, he witnesses how others in the Parkinson’s community struggle with getting to and from hospital appointments that are often not as local as Grantham. This was discussed in the Group and it was agreed that a volunteer patient transport scheme would be a positive project to start on. This will be an agenda point at the next meeting for St Peter’s Hill representatives to feedback on the viability of such a scheme.

**4) Patient experiences**

Two patients within the Group have already had some experience with PPG’s in the past and they were invited to share their experiences with the Group. Mrs Hickey was part of her local Patient Participation Group when she lived in Bognor Regis where she helped her Practice raise significant sums of money for new equipment by organising coffee mornings and other local community events. She also helped set up a book sale within the Practice Reception where patients could pay a small donation for books and also bring in their own unwanted books. The funds raised from these sales also helped towards buying additional equipment for the Practice. Catherine is keen for the Group to try and carry out some fundraising for St Peter’s Hill and will discuss the idea of a ‘Wishlist’ with the partners in order to gage what equipment would be most beneficial for the Surgery in order to give the PPG something to aim for during their fundraising in the future.

Mr Rankin also shared his past experiences of a PPG. He explained how he battled and beat cancer a number of years back and he found it very reassuring to be able to turn to them for assistance in finding out information. This Group acted like a bridge between him and his Practice at the time, and he is keen to ‘give back’ and eventually set up his own counselling service for patients that might be going through a similar ordeal. This is something that will be discussed in more detail at the next meeting.

**5) The Patient Council**

Sarah explained to the Group that the South West Lincolnshire Clinical Commissioning Group are in the process of launching the Patient Council which will act as a forum for healthcare professionals and PPG representatives from each Practice to meet to discuss larger issues within the local area and give patients the opportunity to engage with those that are in authority and offer feedback and experiences. They ultimately want to obtain a bigger picture and want patient’s experiences of using their local health services. Sarah asked if anybody from the Group was interested in attending the first Patient Council meeting which was held on Wednesday 1st July at the Eden Hotel in Grantham. Although nobody came forward during the meeting, Mr Rankin was willing to attend on behalf of the PPG and he will feedback at the next meeting.

**6) Moving forward**

The Group will aim to meet 3 monthly but as it gathers momentum they may wish to meet more often without the supervision of Practice staff. The Group decided that their preferred method of communication between them and the Practice was via telephone and letter, this was agreed by Catherine and Sarah and they will ensure that this is sustained in the future. Group members felt that not enough people were aware of the concept of the PPG and that it would be a good idea for Reception staff to promote it more at the front desk and also around the Surgery. Catherine will raise this at the next Practice staff meeting and Sarah will ensure there is more accessible information available regarding the Group on the Surgery website and in the form of noticeboards/television screens in Reception. The Group also highlighted a need for a Practice newsletter which patients could pick up from Reception which on one side could inform them of ‘standard’ Practice information and on the other side could highlight new or forthcoming information such as new staff or the next PPG meeting date. Catherine and Sarah agreed that this was a good idea and Sarah will look into creating and implementing this.

**7) Any Other Business**

Catherine Dickinson thanked everyone for coming. It was positive that the members of the Group expressed the view that they were generally satisfied with the services they received at the Surgery.

We propose the next meeting date to be on …………….in the Boardroom at the Surgery. Agendas will be sent out 2 weeks prior to this giving Group members the opportunity to add their own agenda points for the meeting.

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