

## Minutes of the BHGP Patient Participation Group Meeting held on Tuesday 15 Dec 2015

**Present:** Lorna Esterine, Michael Loosley, Malcolm Forbes, Gay Lee, Jackie Morley, Debbi Scholes, Peter Lennard, Dr Frances Wedgewood (introduction and representing the practice)

**Absent:** Anne Hetherington, Carolyn Weniz

**Action**

### Apologies

Ed Rosen, Wai Ha Lam

### Introductions

New member Peter Lennard introduced himself.

A question relating to flu immunisations arose and the practice explained that the national policy of only stipulated recipients receiving flu immunisations is determined by NHS committee. Jackie Morley will confirm whether or not a flu immunisation can be given if it is paid for.

**JM**

(see NB 1 at end of document)

### Practice feedback

Proposals were agreed regarding Christmas/New Year opening times.

Over the next few weeks, the practice is also making up for any lost opening times over the festive period. There is still no full time cover for Dr Blackwell but the practice have ad hoc locum cover.

Utilisation of the new Hub is up at 75%, however our attendance is down.

The practice's ratings on NHS Choices vary widely and have been better than they are at present. The practice believes that there is a 'troll' posting negative comments, as all comments appear to be in the same writing style. This results in BHGP's ratings being lower than they would otherwise be. PPG members were asked to have a look at the site if they have anything positive to say.

**ALL**

Utilisation of the Hub has increased, and, as a result, more appointments should be available at Brixton Hill GP.

The current computer records system does not make it possible for the surgery to access patient notes from the Hub and vice versa. Therefore patients need to give permission for Community Health Records to be shared. ML asked if there was a patient confidentiality issue here. Dr Wedgewood gave assurances that patients can opt out.

(Dr W left the meeting)

There is an on-going issue with contacting patients by email. Either details are wrong or patients have not provided email addresses. The PPG needs to produce a letter/email for all patients, in the first instance asking if they agree to being contacted at all. Other messages could include asking again whether patients wish to be involved in the PPG. It was strongly suggested that the only way to broaden the membership is to send out more 'tempting' email messages. It was agreed that we wouldn't be sending out any more emails until we have something useful and interesting to say.

### Matters arising

There is still a debate about what the PPG is actually for. Each meeting seems to be about increasing membership of the PPG but what for?

(see NB2 at end of document)

On the subject of emails, some people are not happy for their emails to be shared with a group and Peter Lennard has suggested the PPG sets up a Google group, which would resolve this issue. He has agreed to talk DS through the process of setting one up.

**PL/DS**

## PPG Update

The PPG Toolkit is now on the website

### Dates of Meetings for the first part of 2016

Meeting dates: Tues 16 Feb, Tues 12 April, Tues 14 June, Tues 9 August

(DS left the meeting)

### Possible future activities for Brixton Hill PPG:

After much discussion, we decided to look at the feasibility of having a discussion meeting about the pros and cons of **'7 day working'** as manifested in the 'The Hub' (see earlier point in these minutes) – the 4 centres in Lambeth where patients can get appointments if they want a weekend one, or if there are not enough available on weekdays at their own practice.

We decided that we would we would invite:

- \* the people on the wider PPG mailing list (especially encouraging those who have may have used the hub)
- \* a GP who works at the Hub,
- \* a GP from Brixton Hill (BH)
- \* if it's feasible, other BH patients who have used the hub

We were undecided about the venue (our usual room would probably not be big enough) – it was decided that the discussion would only be open to BHGPPPG. The view was expressed that the work of BHPPG should relate to its patients only, leaving joint working to the PPG network. If our local meeting worked well then we could recommend that other PPGs do the same thing.

We agreed that this discussion would be a potentially useful way for 'the grass roots' to feedback views to the CCG and the Prime Minister's Challenge Fund (who finance this initiative) about this aspect of the national policy of encouraging 7 day working. It would also be something positive that BHPPG could offer to patients.

Lorna to discuss this idea with Wai Ha and see whether it would be possible to use 336 for the meeting - either for BHPPG only or for a wider meeting.

LE/WH

Lorna would be willing to design/produce coloured posters for the practice to encourage Hub users to come – Debbi and Wai Ha might be able to help with this.

LE/WH/DS

*NB1 It was agreed in the Code of Conduct that personal issues would not be discussed in meetings. Therefore, DS would like to suggest that the PPG, together with the practice, produces a comprehensive list of FAQs covering issues such the flu immunisations, which could be provided to all patients.*

*NB2 On the subject of what the PPG is 'for', an email that was sent out after our last meeting may give some indication as to what patients want. According to the NAPP survey that was presented to the All Party Parliamentary Group on Primary Care and Public Health, 96% of respondents said that 'they are the person most responsible for sustaining and improving their health and self care.' Therefore, it would follow that this could be a important area for the PPG to be giving advice and information about, rather than just promoting membership of the PPG.*