

Southmead Surgery

PPG Meeting

Monday 3rd December 2018, 18.30

Present: -

Kevin Blakemore, Chris Parry, Malcolm Simpson, John Burett, Keith Anthony, Carole Hope,
Anne King, Hilary Jones, Georgina McMasters, Tracey Keogh, Anne Home, Roger Home,(new
attendee)

Apologies: -

Tricia Weidner, Sandy Sell, Judy D’Arcy, Sue Hazell

Meeting Notes and Actions: -

Actions

1. The Chairman opened the meeting and everyone introduced themselves.
Welcome to new attendee Roger Home.

2. The action points from the previous meeting were reviewed.

The volunteer driver scheme is still operating successfully, (see minute 3.).

No feedback has been received from the surgery on “operation pushback”.
Kevin is to discuss with Sue Hazell.

KB/SH

The over-65s flu vaccine is now available in the surgery.

Information on the specialities of the surgery medical team, are still not
being made available. Kevin to discuss with Sue Hazell

KB/SH

No surgery representative was available for the meeting. It is essential
for the effectiveness of the PPG, that a surgery representative is present.
The surgery have indicated that a change of day for the PPG meetings
may be beneficial, (see minute 8.).

A meeting of the team undertaking the patient questionnaire will take place
this week. A preliminary report will be made to the next meeting.

MS/JD/AK

Kevin indicated that the surgery would support the concept of “drop-in” training
for patients wishing to understand how to get on-line with a patient access system.

Actions

The surgery has suggested that it takes place once per month, on the basis of pre-booked timings. A number of PPG members volunteered to help with this training.

Kevin is to meet with Sue to determine the content and structure for the training process. Initially this will be limited to the basic on-line access for making appointments and ordering repeat prescriptions. **KB/SH**

Once determined, the information will be circulated by the Secretary, at which time potential volunteers will be asked to make themselves known. **CP**

The general view was that the on-line access systems worked well for repeat prescriptions, but only for appointments if made well in advance. Immediate, or short term appointments were still better made by phone or by surgery visit.

The PPG website page maintenance process is still not determined. **KB/TK**

3. Whilst operating successfully, a number of concerns have been raised regarding the volunteer driver scheme.

Roger Home and Sandy Sell have been working to clarify a number of issues, and have produced a "standard operating procedure", that once complete will be circulated for comment.

For future volunteers undertaking the DBS clearance process, it was pointed out that photo-copies of i.d. documents are not acceptable, and that original documents have to be shown to the surgery person undertaking the application.

Whilst all volunteers had checked with their respective motor insurers that their cover allowed them to undertake this unpaid voluntary activity, it was not made explicitly clear that the cover extended to the passengers. Whilst it is likely to be OK, would all volunteer drivers please check this with their insurers. **All volunteer drivers**

One volunteer has experienced a patient who, on collection, was seriously unwell. In this eventuality, the driver should call an ambulance to attend the scene.

All volunteer drivers

In Sandy's absence, Kevin is preparing and circulating the rota. Until advised otherwise would all drivers submit their monthly availability to Kevin. It was also suggested that it would be useful for the surgery staff to know any days that non-rostered drivers would not be available to contact. However, a firm process for doing this is yet to be established.

Kevin will circulate a revised December rota. **KB**

4. Georgina reported that the CCG had seriously underestimated the problems relating to the recent change that meant that pharmacies were no longer able to initiate repeat prescription requests. The CCG had presumed that surgeries would pass this information on, but many had not done this effectively, (Southmead were an exception, as notices were posted well in advance).

As a result, the CCG is reviewing its communications processes.

However, the change appears to have been effective in its main aim of reducing wastage in out-of-date pharmaceuticals.

Actions

This change also highlights the importance of getting more patients onto one of the patient access systems.

5. Georgina also reported that in the Thames valley, an online CBT programme has been introduced to help people with sleeping disorders. It is free to use and has been approved by NICE.

It involves an on-line tutorial and individual assesment and provides practical advice on how to improve sleep patterns. It has a reported success rate of 70% in improving individuals sleep issues.

The link to this process is included in my covering email with these minutes. **CP**

6. It was requested that the carers information display in the waiting room be re-positioned as it was interfering with patient entry and access to reception. **SH**
7. It was reported that the notification of “which waiting room to use” was a real help to patients.
8. Following the request by the surgery to consider an alternative day for PPG meetings, it was determined that Tuesday evenings would be a possible alternative that worked for most, if not all, PPG attendees.
Kevin will discuss with Sue and advise on whether meetings on Tuesday evenings would be better in enabling a surgery representative to attend the meetings. **KB/SH**
9. The date and time of the next meeting is **18.30 on either Monday 4th, or Tuesday 5th February 2019**. Confirmation of the date will be advised. **KB/CP**