



PPG Meeting
14th December 2017

Attendees: Humphrey Claxton (Chair), Caroline Stein, Vicki Ratchford, Alan Bottomley, Jennifer Bottomley, Nick Kusznir, Dr Claire Baker, Lyn Howe, Carolyn Steele, Julie Johnson (Minutes)

Apologies: Michele Grant, Hilary Fergusson

1. Apologies & Minutes of last meeting

Noted and minutes agreed as true record.

2. Matters Arising

3. Online Survey – Guest Speaker

Unfortunately the individual involved did not confirm his attendance despite several attempts to contact him.

4. New Surgery Update

Claire Baker reported that the practice has been contacted by a second developer who wants to develop the area of green belt land lying between the Co-op and the Royal Oak. The impetus to gain planning permission would be the provision of a new medical centre. Unfortunately the time line would be too long and communication between the Practice and the developer has been died off.

Meanwhile, the other plot of land behind the Lord Binning has been sold to the developer, Castlemeade. The Practice has a good relationship with the Project Manager and a time line of 2 years to complete the project has been identified. At present we have more than 5000 patients and with all the development in the villages this could rise to 6000. A new Medical Centre is urgently needed to meet to rising demand.

Setting up a training practice has had to be deferred for another year.

The District Valuer has agreed to the funding and given a 21 year lease. This is a fantastic result.

The developer has offered to build the community cafe for £115K. However, this does not include the fitting out of the space. This is to provide a facility to help with social isolation. A similar space has been created in Malpas with help from Health Watch and Age UK through Bright Life.

5. Community Café

Discussed how this can be taken forward in relation to funding. Lyn Howe led the discussion. It was suggested that The Wesley Centre in Chester could be visited to look at how it is set up and run.

Funding - £115K target. We need to identify a timeline and reach out to wider community to identify individuals in the wider community who may have the requisite skills to assist/lead the fundraising project. Michele Grant may have some contact and experience in this area.

Discussed potentially contacting larger companies in the area for pledges.

Lyn Howe volunteered to hold a meeting in the new year (early Feb) at her home to take some of the ideas forward.

6. Membership

Caroline Stein provided the report below following and allocate action from the last meeting:-

Following our last PPG Meeting in October we agreed there were three priority issues that needed to be addressed.

The first was Membership, which I volunteered to think about and report back to the committee today.

We need more members for many reasons; to increase the diversity of the committee, raise the awareness of the PPG to patients so we can gain more information to advise the practice on the patient perspective, more volunteers to help at practice led health promotion events, there is a need for greater communication with the wider patient body and feed in valuable ideas about taking the new surgery and community café forward. If the café plan goes ahead then we will need lots of members to volunteer to support, raise money and run the café.

I feel that once we have a fully operational communication channel with the patient database, raising awareness of the PPG will be so much easier. So I think prioritizing "communication" must be the first step.

When the plans for the new Medical Centre are moving forward, patients may be more willing to get involved. Can we use the information as a "carrot"?

Ideas:

1. E mail current patients with a short Newsletter explaining what we are about and inviting patient to join. Based on our current leaflet.

2. Make sure all new patient receive a leaflet in their welcome pack to the practice.

3. If we cannot, due to lack of space, put our banner in a prominent place in the waiting room then create a poster of a similar design to go in the waiting room notice board.

4. Position the new poster in prominent places around the village. For example Community Centre, Co-op, Junior School etc.

5. Place a short News item on the Kelsall Village website and in the local magazine, KADRAS and other local village magazines.

6. Once communication is improved then create a regular Newsletter that is sent to patients electronically and make it available in the practice for patient to read.

7. Information about the PPG on the practice-rolling screen and on prescriptions.

8. Social media

9. Target groups in the village personally, keep fit groups, Bridge groups, Mothers and toddlers, sports groups, WI, social club, churches etc. So they can spread the word through their databases.

10. Mail drop villagers

It was agreed by the committee that the following would be prioritised in terms of raising awareness about the PPG:-

- Email/newsletter to be created and sent out to patients
- Communicate to local groups

7. **Communication**

Julie Johnson and Vicki Ratchford met on 5th December where the following were discussed:-

- MJOG – This is the text messaging service which is being introduced into the Practice to provide appointment reminders, seasonal information (eg. Christmas Opening times, Flu clinics) and Friends and Family feedback. It was hoped that the facility would be up and running by the time of the PPG meeting, However there has been a recent IT upgrade at the Practice which has been followed by numerous IT issues, one of which being the inability at present to install MJOG. It is agreed that this facility, once up and running, should be very beneficial and will improve communication.
- Website – this is currently being updated by Dr Daniels' partner. There has also been a date identified in the new year for JJ and other office staff members to have some intensive training on the use and updating of the website. This will enable the site to be kept up to date on a more frequent basis which will again improve communication channels.
- TV Screen – this could be used to better effect to provide information to patients whilst in the waiting area, including PPG membership.
- Email – The PM at Bunbury is still looking into how this can be facilitated and will share with Kelsall once this has been agreed.
- Notice Boards – Julie has identified “champions” within the Practice to take responsibility for ensuring the notice boards are kept up to date with relevant and informative information.
- Short discussion on the possibility/appropriateness of online consultations.
- Other Practices have members of their PPG in attendance in the surgery waiting area to highlight initiatives such as e-Consult. The group did not feel this was something to take forward at Kelsall.

8. Feedback on Friends & Family

The number of returns received into the Practice since the last meeting is as follows:-

Sept

Very Likely	3
Likely	
Unlikely	
Extremely Unlikely	

Oct

Very Likely	7
Likely	
Unlikely	
Extremely Unlikely	

Nov

Very Likely	24
Likely	2
Unlikely	1
Extremely Unlikely	

No reason given

It is expected that these numbers will improve with the introduction of MJOG.

Where comments have been left the following issues were once again identified by patients:-

- Waiting time for appointments
- The need for a larger building
- Water Machine provision in waiting room
- Earlier appointments in the morning
- Ability to get through on the telephone
- Access to toilet (security issue)

In response to the issues with **appointments and earlier opening**, the Practice is introducing appointments from 7am on Monday mornings only. These appointments will be with either a GP, Practice Nurse or Health Care Assistant. The early clinics will commence on Monday 18th December 2017 and will run for a trial period to benchmark take up and missed appointments.

The **building** issue is ongoing as per previous agenda item.

Access to the toilet is in relation to patients having to request the security code for the door. For the safety of patients and staff members this is a Health and Safety requirement.

Telephones – we only have a certain number of incoming lines into the Practice at present – an alternative telephony system will be sourced for the new surgery.

9. Date of Next Meetings

- 1st March 2018
- 26th April 2018
- 12th July 2018

10. Any other Business

- **PPG Chairs meeting** – Alan Bottomley to attend in Humphrey Claxton's absence.
- **Dispensary Opening Hours** – The Practice is proposing to put back the morning opening time by one hour each day to 9am as well as closing the Dispensary between the hours of 1pm and 2pm daily. This is felt necessary for safety reasons and to allow the Dispensary Team protected time to ensure mistakes are kept to an absolute minimum. Discussed if there would be any issues with the early morning appointments for dispensing patients. The GP could dispense where necessary and this should not be an issue. We would be operating the same times as the local chemists. PPG were asked to their backing to this proposal and it was agreed by the committee. The Practice will give three months notice to inform patients to the changes to the opening times, with the expectation that this would come into operation from 1st April 2018.
- **Dispensary issues** – The Practice is currently experiencing major issues with our main supplier due to supply chain issues. This, coupled with a spike in the number of prescriptions being requested leading up to the Christmas holidays is putting a real strain on the Dispensing Team.
- Actions from the meeting will be sent out separately.