

Patient Participation Group AGM Minutes

Meeting held at VHC at 1pm on 04.04.2019

Present: Cath Verhoeven (Chair) Debs Main (Secretary), Bill Brown, Sue Clague, James Pam, Alan Wilson, Anne Hardy, Martin Rudge, Pat Dexter, Christine Roach, Roy Sells, Robin Taylor. Catherine Wallis, Tony Wright,

On Behalf of the practice: Catherine Gordon (Practice Manager), Dr Mawji.

Apologies: Muriel Weisz and Tryphena Anderson.

Agenda

1. **Ratification of Minutes:** the minutes for the meeting on 14.04.18 were ratified.
2. **Matters Arising:**
3. **Presentation of the PPG Annual Report.** Catherine Verhoeven, the PPG Chair, gave a report on the group's work over the last year. In her introduction she expressed how much the PPG appreciates Dr Mawji's commitment to being involved with the PPG at such a busy time.
A full copy of the PPG Annual Report is attached at the end of this document with comments made during the meeting in red italics.
4. **Presentation and Adoption of the 2019/2020 PPG Objectives.** The meeting also looked forward to the year ahead and agreed a range of objectives which included:- Widening the demographic of the PPG membership amongst underrepresented groups. Seeking better involvement, and therefore influence, of those classed as "virtual" members. Looking to extend the reach of the Practice Newsletter to potentially include pharmacies and other public buildings in the local area.
A full copy of the PPG Objectives for 2019 is attached at the end of this document with comments made during the meeting in red italics.
5. **Election of the PPG Chair and Secretary.** As no other nominations were received, Catherine Verhoeven as Chair and Debs Main as Secretary were reappointed for the forthcoming year by the group.

AOB

- Bill Brown gave his reflection on the progress made by PPG in the last 5 years and trust and liaison that has developed between the practice and the PPG. He thanked Dr Mawji for his involvement, especially for the time when there was no practice manager in post.
- Dr Mawji commented that he valued the PPG, especially in assisting the practice in seeing how it can do better and offer a better service for its patients.
- Dr Mawji gave an update on practice personnel: Dr Worsley is no longer a partner but will continue as a salaried GP, the practice will also be looking to recruit another doctor.

Next PPG Meeting: Thursday 4th July 2109 at 1pm at VHC

Victoria and Mapperley PPG Annual Report 04.04.2019

We have continued to meet monthly as an Action Group where our Practice Manager attends quarterly. As a full PPG we have met four times in the last year; Dr Mawji and Dr Elias attend these meetings along with the Practice Manager.

During the past year we welcomed our new practice manager, Catherine Gordon and temporary deputy manager Pam Husband. Catherine wasted no time in getting down to work. Since joining the practice, she has overseen the introduction of a new telephone system, anecdotal evidence suggests this has had a positive influence on making appointments. The Action Group plan to carry out research to check if this is supported.

The practice has also been developing a SMS Text messaging service to help communicate with patients. This was initially introduced as a service to help remind patients of appointments booked at the Practice and thus reduce missed appointments, but it also has the potential to reduce significantly the amount of telephone calls both to and from the practice for a host of routine issues including: vaccination reminders and appointment cancellations. An estimated 94% of UK households have access to a mobile phone but only a small % of our patients are signed up to use the service: there is a huge scope for improvement. SMS Text messaging has a huge potential to not only help reduce missed appointments at the Practice and make these appointments available to those that need them, but could also help to free up the telephone lines to deal with more urgent issues and improve communication. The PPG is continuing to help and support the Practice in raising awareness of this service and to actively encourage patients to sign up and use the facility.

We set ourselves six Objectives for 2018/19 and I will now update you on the progress made against each of these.

Objective 1: The PPG will organise a recruitment drive in waiting rooms at both surgeries to increase membership from the black, Asian and minority ethnic community from 11 to 20 patients and increase membership of younger patients under the age of 45. Where there is a vacancy in the Action Group, we will seek to recruit in a manner that more accurately reflects the practice demographics in terms of ethnicity and age.

James Pam and Bill Brown have been very busy in addressing this objective. Before recruitment there were 56 PPG members of which 5% (3) were under 45, there are now 113 members of which 15% (17) are under 45. Before recruitment 11% (6) of the PPG came from ethnic minority communities and this is now 12% (14). Whilst increasing the overall membership, it would appear our Objective fell short with regard to the ethnic minority numbers. This is due in part to the ethnicity not being recorded for some patients and demographic data not always being accurate. We need to be mindful of the need to employ a stringent recruitment process if we are to increase numbers from ethnic minority communities.

Meeting Comment: Catherine Gordon agreed to provide figures from the practice database to see how the PPPG data compares to the current practice demographics.

Objective 2: The PPG will attend network meetings, seek meetings with other PPGs and identify best practice that can be adopted within our PPG and/or recommended to the Practice. The measurement of the effectiveness of this objective will be through reports to PPG meetings.

Alan Wilson and Cath Verhoeven have attended public meetings on “Help to Shape Health and Social Care” where organisers were canvassing views on the best way forward. Alan has also attended the NAPP Annual Conference last June. Resulting from Alan’s feedback, Cath Verhoeven has made contact with local schools to recruit the younger age group onto to our PPG, targeting students looking at pursuing a career in Health and Social Care. Cath Verhoeven sits on the Peoples’ Council. In the main this has been an opportunity to update on progress on the restructuring of Health and Social Care. Originally the Peoples’ Council had planned to organise a PPG network meeting but with reorganisation this was put on the back burner. It is envisaged there may be PPG forums with representatives from individual PPGs coming together. The PPG representatives on the Peoples’ Council may also be involved at different levels of the new Integrated Care System. Sue Clague is now Lay Member for PPI (patient participation and involvement) for the Greater Nottingham Joint Commissioning Committee (a grouping of four CCGs City, Rushcliffe, Nottingham North and East, and Nottingham West) and will feedback to the PPG anything relevant and in the public domain discussed at CCG meetings. Alan Wilson and Deborah Main attended East Midlands Academic Health Science Network (EMAHSN) meeting in February 2019. In our efforts to engage with other PPGs Cath Verhoeven has made contact with Helen Limb, Greater Nottingham Engagement Officer, who is in the process of putting her in contact with some Rushcliffe practices to start a conversation about best practice.

Meeting Comment: Pat Dexter suggested Alzheimer's UK - Cath Verhoeven to follow up with Pat.

Objective 3: The PPG will extend the reach of the Practice Newsletter from its current waiting room and website access to include email distribution.

Thanks to our editor Deborah Main, the PPG, in conjunction with the practice has produced three excellent newsletters this year. Topics have ranged from updates about services and health to PPG business and the level of professionalism in this publication is high.

We now need to understand the impact and true distribution of this important piece of patient communication and, together with a commitment to carry on producing three newsletters in 19/20 we will work to ensure that the newsletter does what its title stands for i.e. disseminating relevant and interesting news to our patients.

Objective 4: In partnership with the practice, develop monthly health topics for display.

Patients and the Practice agree that the health promotion boards are looking the best they have been in a long time. Monthly changes to the Health Promotion boards was considered too frequent by the Practice and due to staffing issues, the Practice hasn’t been able to support this objective as much as it would like. Cath Verhoeven in consultation with the practice identified themes, sourced / developed materials and with Anne Hardy updated the Health Promotion boards.

Objective 5: In conjunction with the Practice develop, agree and undertake surveys of the patient populations' non clinical experience. This objective will be met by evidence of completed surveys which will be fed back to the PPG and the Practice.

Cath Verhoeven carried out an analysis of the recent IPSOS Mori poll GP Survey results which was impacted by the temporary influx of patients from a nearby practice. The results were fed back to the Practice. Whilst the clinical aspect of the Practice was generally good and on a par with others in the area, the administrative functions were less successful. However, with the introduction of the new telephone system more objective training can be provided; the manager can listen into calls and target the training. The system also allows the Practice to monitor demand and to train patients when to call; urgent calls up to 10:30 and non-urgent thereafter*. As a result of the new system the Practice is now aware that 62% of calls come in between 8 and 10am and part of the new deputy's role will be telephone duty at this time.

It is essential long-term medication is safe, appropriate and effective. On behalf of the Practice the PPG, conducted a survey to establish our patients' understanding of the medication review process with the aim being to help the practice improve the medication review process and the patients' engagement with the Practice**. Cath Verhoeven carried out an analysis of the survey and fed back to the Practice. Administration staff have had specialist repeat prescription training. This training has equipped the staff to confidently carry out the process of dealing with repeat prescription requests. The Practice is planning to have a repeat prescription Champion. The Champion and data manager will run monthly reports and manage reviews accordingly.

*Meeting Comment*DM to include in newsletter item regarding urgent calls to practice only up to 10:30am.*

***Medication Reviews can be done via telephone appointment depending on condition. It is advised the patients make an appointment for relevant tests (ie BP, lung function, blood tests) with a nurse or healthcare assistance prior to medication reviews.*

PPG to help to promote medication reviews in next newsletter.

Catherine Gordon Commented that, when appointed, it is intended that the new deputy practice manager will have a data manager element included in their role and they will run specialist reports for the admin team to target and contact specific patients for medication reviews.

Objective 6: On an annual basis the PPG will carry out a systematic review of the website content and feedback the results to Practice management.

Catherine Gordon (Practice manager) now manages the practice website and reported that a recent review showed around 400 hits in a 4-day period. She sees it as an important element in communicating with patients and agreed that it feels dated and needs a more up to date contemporary branding which is planned.

In the meantime, Alan Wilson and Deborah Main continue to review the website annually and feedback to Catherine.

Cath Verhoeven

PPG Chair

Victoria & Mapperley Patient Participation Group

Objectives April 2019/2020

1. Improve the demographic of the PPG Membership

Black, Asian and minority ethnic patients and those under the age of 45 are underrepresented within our PPG membership.

Objective: The PPG will continue to recruit membership from the Black, Asian and minority ethnic community in our contact with the patients and seek to increase membership from patients under the age of 45. Over the next 12 months the Action Group will review how best to include other underrepresented groups. Where there is a vacancy in the Action Group, we will seek to recruit in a manner that more accurately reflects the practice demographics.

Meeting Comments: Dr Mawji commented that the practice could support this valuable piece of work. A PPG member recommended NCVS as a source for a directory of minority groups.

2. Enhancing our engagement with Virtual Members

The majority of our PPG membership are virtual members.

Objective: The Action Group will seek ways of communicating more effectively with virtual members so their views can influence the PPG agenda.

3. Attendance at Network meetings

Effective Networking can inform best PPG practice.

Objective: The PPG will attend network meetings, seek meetings with other PPG's and identify best practice that can influence our PPG and the Practice. The measurement of the effectiveness of this objective will be through reports to PPG meetings.

Meeting Comments: Dr Mawji said that there will be significant changes with the Clinical Commissioning Groups (CCGs) in the coming year with the developing Nottingham & Notts Integrated Care System. Sue Clague is also involved in the CCG as Lay member for Patient and Public Involvement (NHS Nottingham City CCG and NHS Rushcliffe CCG). Both are valuable contacts who can help the PPG make contact and network with other groups at achieve this objective.

4. Produce a practice Newsletter

In partnership with the Practice the PPG has taken responsibility for the production of the Practice Newsletter. This joint venture relies on articles written by staff and patients. The Newsletter will be edited by the PPG secretary.

Objective: The PPG will extend the reach of the Practice Newsletter from its current waiting room, Practice website access and email distribution to potentially include pharmacies and other public places in the local area.

Meeting Comments: Catherine Gordon (Practice Manager) agreed to text a link for the practice website to patients via MJOG for patients to access the newsletter on line when it is next published.

5. Management of health focussed information in waiting rooms

The Practice identifies NHS Health priorities, publicity posters and information leaflets that are made available in waiting rooms.

Objective: The practice will provide Health Promotion resources and a member of the Action Group will be responsible for displaying them in waiting rooms.

*Meeting Comments: Catherine Gordon (Practice Manager) will order materials for the notice boards from the Public Health England website.
Dr Mawji suggested a future topic for the notice boards might be Advanced Decision Notices.*

6. Patient Experience

We wish to continue to develop our engagement with patients to assess their level of satisfaction in their non-clinical interaction with the surgery. This may include appointment systems, interaction with reception staff, access to public health information leaflets/posters and the patients experience of waiting for appointments.

Objective: In conjunction with the practice develop, agree and undertake surveys of the patient populations' non-clinical experience. This objective will be met by evidence of completed surveys which will be fed back to the PPG and the practice.

7. Practice Website Review

The practice would value the support of the PPG in ensuring that information on the practice website is accurate and up to date.

On an annual basis the PPG will carry out a systematic review of the website content and feedback the results to practice management.

Meeting Comments: Alan Wilson commented that a number of elements highlighted at the last review have not yet been corrected on the website. CG asked that the report is forwarded to her again for action.