**LIME GROVE MEDICAL CENTRE**

**PATIENT PARTICIPATION GROUP**

**MINUTES OF MEETING:**

**12th January 2016**

Present:

Frank Dickens (Chair)

Sue Burfoot

Tracey Arnold

Bob Windsor

John Tresadern

Margaret Updike

Hilary Essen

Jenny Powell

Chloe Arbury

Lesley Burrows

William Quinlan

Sarah Hampton - Addaction

Emily Foster- Admin

Wendy Sandner - Practice manager

Dr James Bathgate- GP

Apologies –

Peter Harthill

Beckie Ross

Antonia Hogan

**Welcome new member**

FD Welcomed 1 new member into the group.

**Sarah Hampton- Addaction**

FD introduced Sarah Hampton from addaction. SH gave a broad talk about addaction and what she and the service do to help patients around the Derbyshire area. The aim for her and the clients is to reduce their alcohol intake or even stop. Addaction work with GPs and Nurses to achieve this. She has one day a week here at LGMC being a Wednesday. This service can be used by self-referral or a GP referral.

**Flo**

FD Introduced Tracey Arnold one of the practice nurses from LGMC. TA gave a brief presentation about a new system that she will start to use called flo. This is a free text messaging service set up to help patients. This may include reminding a diabetic patient to take their blood sugar levels. TA then showed a small video showing how useful it is for 3 clients.

**Minutes of the last meeting / matter arising**

JT is happy to continue with the newsletter. Any Topics in regards to the newsletter please send to JT. FD mentioned not enough copies were made for the newsletter and suggested if reception could make more copies when low.

SB/JP wondered if female appointments could be released further. WS explained that they usually are as they are salaried GPs and have set days and times. WS explained the partners are trickier as they will fill in for any holidays; this means their days and times may vary. This is why we currently only have one month in advance.

**Health cuts**

HE asked if any further budget cuts would be made here at the surgery after hearing it on the news. JB explained that budget levels are under pressure at present but nothing has been cut recently. Cosmetic surgery and certain drugs have been cut but nothing recently.

BW asked if the budget got to its maximum, for example referrals, you would not be able to refer to a hospital. JB said in theory this would be correct but this has never happened yet. JB also mentioned all the partners have a meeting to discuss the budgets.

This then led to a discussion about the patient intake and if we would be able to have a cut-off point and accept no more new patients. WS/JB explained that this too can be put in place but must have a very good valid reason why and you have to apply to the CCG. It’s unlikely this would happen.

**Switchboard and appointments**

WS explained to the group that at the moment LGMC do have more GPs. This is due to winter pressures. This year it is running from November 2015 to March 2016. The partners have agreed to put a queuing system onto the phones. This is so patients know where they are and they can make a decision if they would like to wait.

WS explained the shortage of nurse appointments. This was due to TA being off for an operation she had. TA will be back at LGMC W/C the 18th January.

WS mentioned that LGMC is still a GP down. The surgery has advertised for another partner but unfortunately has had no success. The partners have agreed to advertise for another salaried GP after March.

**Committees, Groups and Authorities**

JT wondered if WS would be able to make a flowchart of the organisation of the NHS. FD mentioned a website link that explains it. FD will send to everyone via email.

**Missed appointments**

JT stated that 1131 appointments where missed in November. Suggestions were made to make a notice in reception so patients are aware that this is happening.

Flo could even possibly be used as a text message reminder. FD mentioned if reception could also let patients know how long the wait is for their appointment. EF will let reception know.

**CQC guidance for improvement**

Good is the outcome from the CQC inspection. WS explained to get outstanding she noticed at other practices they offer classes out of the Surgery hours but is run by the surgery. The discussion led to the self help support.

**65+ self-help measures and practice support**

HE mentioned the walking group that people may join. GPs can also refer them as well as a self-referral too. HE said when people filled in the form none had ticked referred by GP. WS said she will mention to the GPs that it is an option for them to use for patients.

The self-help groups could be a way to improve the CQC outcome. WS will look into setting up an evening or day at the surgery and invite organisations that could help patients. WS asked the group to come back with any thoughts for the next meeting.

**A.O.B**

WQ stated he had a problem with one of the pharmacies in Matlock and couldn’t get his medication right and was left a few days without. WS will call the pharmacy and will try to resolve the matter.

The group asked CA if she would be happy to research some issues/matters that would interest her age range for the newsletter.

WS will contact the mental health team at The Ritz and see if someone would be able to come and speak to the PPG in regards to mental health.

WS would like any PPG members to contact her if they would like a trail run of the Video consultations.

WS and FD to arrange next meeting in early march.