

# Broomleys Surgery

Patient Participation Group meeting

Minutes

**Date:** Monday 14<sup>th</sup> August 2017

**Time:** 6:00 – 7:00

**Venue:** Waiting Room

**Attendees:** Sandra Bassett; Gordon Smith; Gracie Smith; Nancy Sheldon; Colin Statham; Diedre Dickinson;

**For the practice:** Becki Sharpe; Pauline Beall; Alison Hall; Karen Thorpe HCA; Lisa Manley - Local Area Co-Ordinator; Dr Stuart Scrivens

**Apologies:** Dr Suboohi Rahman

Item	Item	Action	Owner
1.	<p>Welcome and Introduction</p> <p>Becki welcomed everyone to the PPG meeting and thanked everyone in attendance for taking the time to come along and join in.</p> <p>Welcome any new members (first meeting)</p> <p>Becki welcomed all those who were attending their first meeting and gave a brief explanation about how the PPG works, explaining that we are an inclusive group and welcome members of all ages, cultures, ethnicity and backgrounds. All opinions are welcome and we look forward to what the future holds both for the PPG group and the Practice.</p>	Information	BS (5 mins)
2.	<p>Lisa Manley – Public Health Services with the Coalville area only</p> <p>LM explained that she offers 1 to 1 support and to build confidence to patients within her local area of Coalville. LM explained that the Local Co-Ordinator is based on a 12 month contract and has been made permanent due to growing demand for the services. She offers non-medical and social needs and advised that if the query or need is medical that she would refer the patient to their GP. She works separately to Social Services/Social Care as she works under the county council public health, health and wellbeing whereas Social Services are under health and communities. It's about giving a helping hand to those in need.</p> <p>LM also mentioned that Long Lane has recently set up a coffee morning within the surgery and it is working really well. PB commented that this is something that we will be implementing a coffee morning at Broomley's as it will provide a group allowing patients to build relationships with other patients as well as with the</p>	Information and Discussion	LM (20 mins)

	<p>surgery. GS commented that this is good idea and a good way in which to bring the community together. It was decided that it would be held on a Friday at 10.30am for an hour each week held at the surgery. PB explained that she wants to maintain traditional values but within a modern environment. LM stated that Age UK also holds a coffee morning at the library.</p> <p>SS asked about our patients that live outside her local area and LM stated that with time the area would expand to other areas, this will be looked at later in the year. It's all about gaining local knowledge so that expanding the services can be undertaken.</p>		
3.	<p>Patient Question Time – an opportunity for patients to raise any questions to the practice team</p> <p>DD and GS asked about where the practice can or do advertise? PB and AH mentioned that we now have a Facebook page for those who have access to the internet but also LM mentioned that the Coalville Times offer a free advertising service that we could use so as well as advertising within the surgery for those patients that don't have access to the internet as not to exclude them. We also advertise through posters within the surgery and on our website.</p> <p>What do we cover as a Surgery? PB stated that we are patient focused and that we need help to move forward as we want to make a difference to our patients and the local community. It was mentioned that if we don't aim high we don't get. It's not a one person approach we have a vision and work as a team to obtain that vision. We are working on a 3-5 year project to get the surgery to where we want to be. PB also mentioned that vision and trust are key to changing our strategies and implement new ideas and processes to make our surgery more efficient and patient focused. We have new staff, ideas and services that we are implementing – not all of which are NHS funded.</p> <p>PPG members asked about funding and our budgets. SS explained that our budget doesn't cover everything and its finding areas in which we can find other sources of income and to minimise our outgoings to sustain the business side of the surgery. All of the money made is put back into the practice to help patients.</p> <p>Some practices are going under trying to retain medical staff. AH mentioned that our Flu campaign is also a stream of income in that we get paid for every flu vaccination we give to our eligible patients. It was explained that we have to order in the vaccinations ahead of the clinics so we have to base the order on the clinics we put on and the possibility of filling them, for every vaccine given else where we lose the income for</p>	Discussion	(20 mins)

	<p>that vaccine we waste. Last year we only had 8 left. GS and DD mentioned that they hadn't realised that there was such an impact on the practice by going elsewhere for their flu vaccination; they stated that general awareness should be given to all patients providing general knowledge and awareness. AH went on to mention that we pay so much per flu vaccine and we have to order in bulk and if we have to send any back then we only get a percentage back of what we paid.</p> <p>NS asked if we give flu vaccinations to those who are not eligible – AH explained that we have approximately 8,000 patients and around 25% of those patients are eligible for a flu vaccine, if however our eligible patients have all had their flu vaccine and we have some left over – yes we could possibly give to other patients.</p> <p>GS asked about what the current boundaries are for when registering with the practice. SS and AH said that they can vary as we have recently tightened our catchment area and some boundaries may overlap with other surgeries but each having their own catchment area. SS stated that those who now live outside our catchment area and we already a patient at the surgery before the boundaries changed have been allowed to remain a patient with us, AH went on to explain that if a patient moves outside our catchment area will have to re-register with a local surgery when they move.</p>		
4.	<p><b>Karen Thorpe – HCA</b>  We have 1 HCA that is trained in Paediatric Bloods as well as doing Hearing tests, ear syringing etc. PB explained – if we can offer these services in-house we will, which means patients don't need to travel or wait for hospital appointments. It's about finding a balance. Some of the clinics we offer are small clinics and only held on certain days.</p> <p><b>Dr S Scrivens</b>  SS mentioned that we are encouraging everyone to eventually go EPS as it frees up doctors time allowing more patient contact.  PB mentioned that one of our focus points is customer service – that every contact matters, and by greeting every patient with empathy and a smile goes a long way. As a surgery we have adopted the 'can do' approach and where possible we aim to give all patients a choice enhancing patient experience. It was also mentioned that it is important that patients take ownership of their own health. We aim to treat every patient with dignity and respect, any negative contact we may encounter or receive negative feedback, our goal is to turn it into a learning experience and to use it to aid our approach and turn it into a positive outcome. Various members</p>	Information	

	<p>mentioned the NHS being in the news a lot regarding cuts to funding – they stated that this may cause a state of panic, as it may tap into local services.</p> <p>The patients in attendance to the meeting asked about our GP's as they stated that we seem to have a lot of locum doctors. PB and SS stated that Dr Scrivens is a sole practitioner of Broomleys Surgery and that the locums we do have are classed as long term locums. Its due to the fact that we don't have other salaried GPs at Broomleys so they are not partners of the practice, having said that it was explained that we do have a stable team at the surgery and in order for GPs to become salaried and a partner it would be a possibility in the future but PB and SS expressed that the GPs that did this would have to fit in with our ethos at Broomleys Surgery. We believe that patients are not just numbers and that it is important that any GP joining our team must match our needs as well as the surgery matching their needs, motivated, unique and inviting.</p> <p>PB went on to talk about CQC and explained that our visit is pending and we are aiming to achieve high as we are caring, we refer appropriately and don't just 'hand out prescriptions', we care about our patients and we want this to show in our day to day duties.</p>		
5.	<p><b>Flu Campaign</b></p> <p>BS explained that we now have flu clinics on the system and that we are in the process of ringing all of our eligible patients to book them in for their flu vaccination. It was mentioned that previously letters were sent out but due to it being ahead of the clinics and letters can be lost or misplaced we are telephoning patients to book them in for their flu vaccinations, by doing this we are also building relationships between the patients and the surgery. LM mentioned about advertising our flu campaign in the Coalville Times. NS said that they only really hear about the flu clinics are when they come in to the surgery and not everyone always visits the surgery on a regular basis, therefore unable to always know what is happening.</p> <p>It was mentioned about the clinics on offer – patients asked if they can't attend the clinics would they still be able to get their flu vaccination. Yes they would both AH and PB explained that if they are passing by the surgery during the flu season we usually do our best to fit them in.</p> <p>As a surgery we are looking at putting on a Saturday morning clinic for the flu vaccines and any help from the PPG group would be greatly appreciated by helping us to organise the morning and to direct patients where they need to go. More information on this will follow and any further updates including clinic confirmation, date and time of clinic.</p>	Information	KT, PB, BS (5 mins)

6.	Date and Time of next Meeting	Information	(5 mins)