

## **Holly Tree Surgery (HTS)**

### **Patient Participation Group**

*“Working together for best practice”*

#### **Minutes and Action Points for meeting held: 19 February 2016**

##### **1. Introductions and apologies**

Present: Mayonne Coldicott, Michael Haddleton, Chris James (Practice Manager), Bob Jones, David Kirk (Chair), Rob Price (Doctor), Caroline Stancell (Secretary)

Apologies: Mandy Hartfree-Bright, Christine Pointer, Pam Shipp

##### **2. Minutes of meeting held on 18 September 2015**

The minutes were accepted without amendments

##### **3. Matters arising from meeting of PPG**

- 3.1. Mayonne Coldicott and Pam Shipp have both expressed a desire to leave the PPG. Efforts will be made to replace them prior to our next meeting (**D Kirk**)
- 3.2. Our Virtual VPPG has 148 email addresses. While this seems a small percentage of adult patients, it is a larger group than exists at any of the other Farnham practices. Still we would like to have a VPPG. We decided to take the following actions to increase group membership:
  - 3.2.1. Add a “Join the VPPG” tear off slip to the new patient form (**C James**)
  - 3.2.2. Add a note to the cover of the 2015/2016 Patient Survey Results explaining what the VPPG does, what is required of members, and asking people to join. (**C Stancell**)
  - 3.2.3. Add a question to the 2016/2017 Patient Survey asking people if they would like to join the VPPG (**C Stancell**)
  - 3.2.4. All these requests for involvement should state that VPPG members are only contacted 5-6 times per year through email and are asked to complete the patient survey once a year.

##### **4. 2016 Patient Survey Results**

- 4.1. The results were presented and discussed. We decided to make the following amendments to the Executive Summary.
  - 4.1.1. Add a note explaining that the graph legends showing 14/15 and 15/16 refer to the results from the Patient Surveys carried out in the 2014/2015 Financial Year and the 2015/2016 Financial Year. (**C Stancell**)
  - 4.1.2. Add a note saying that the vast majority of comments received were positive, and for the sake of brevity we have not included the individual comments. Contrary to this, however, in the name of improvement, where a patient gave a “poor” rating to an aspect of the Surgery, we have included the specific associated negative comment. (**C Stancell**)
- 4.2. No changes were made to the body of the report.
- 4.3. Chris and Rob felt that the survey document and the individual comments both positive and negative would be useful for discussions with surgery staff. The full list of comments should be put in a document so they can be used as needed (**C Stancell**).

4.4. The final report will be posted on the surgery website and be made available in the waiting room prior to 31 March 2016 (**C James**)

## 5. NEHF Vanguard Project

5.1. David explained the Vanguard Project

5.1.1. North East Hampshire and Farnham Clinical Commissioning Group is working on a 5 year strategic plan.

5.1.2. Healthcare and social care will become more integrated.

5.1.3. There is to be a shift of resources towards prevention and self-care

5.1.4. There is a move towards 24 hour access with less segregation between “in” and “out” of hours

5.1.5. Consultation with patients, communities and healthcare providers is at the core of the project

5.1.6. The Vanguard project is funded for 1 year and will test some new approaches to see what works and what fails.

5.1.7. One of the items to be tested is the idea of a Hub. Local practices will provide GP coverage for the Hub with the idea being that a patient who cannot get an urgent appointment with their own practice will be referred to the Hub. For many practices this may help to address the significant issue of patients not being able to get appointments at short notice. For Holly Tree Surgery patients, however, it provides no benefit to patients who can always see a Doctor on the day they want due to the walk-in system.

5.1.8. There are many things still not defined with the project due to further crystalize between now and June 2016.

5.2. It is unclear what role the PPG and VPPG should play in providing feedback to the Vanguard project. This should be discussed further at our next meeting (**D Kirk**)

## 6. Biannual General Meeting (BGM)

6.1. The next BGM should take place in October 2016. This will be an evening meeting followed by a PPG. We are targeting **Wednesday 5<sup>th</sup> October at 19:00** for the session, though this will be confirmed closer to the time.

## 7. Next PPG

The Next PPG meeting will be held in June. Please confirm tentative availability for Friday the 24<sup>th</sup> of June.