

Minutes Patient Participation Group (PPG)
Thursday 14 February - 12.30pm
(AMENDED - 20.02.13)

Attendees:

Staff:

Dr Atul Mehta - AM

Mrs Karen Lavin - KL

Patient Volunteers:

Mrs Helen Struthers - HS

Catherine Fitzgerald - CF

Janet Sorenson - JS

Mrs Linda Curtis - LC

Michael Simpson - MFS

Shelley Luthra - SL

Apologies:

Mrs Mavis Shipton - MS

Mrs Liz Francis - EF

Mrs Jaspreet Daisy Deol - JD

Actions from last PPG meeting:

*	Atul agreed to chair the meeting, but group felt that it should be a shared position. Atul agreed that a doctor would always be present at these PPG meetings.	
*	Introduction of two new PPG members. Shelley Luthra & Michael Simpson.	
*	AM updated all re; the progress of the British Red Cross Therapeutic Massage Service. Advised that patients will have to pay a small amount as Red Cross are now self-funding. Advised that doctors will be referring patients, but patients to also self-refer if they felt they needed this service.	
*	Group felt that the Red Cross scheme should be put on the Newsletter as well as information re; Alzheimer's Care Group to be put on the PPG Notice Board. More Alzheimer flyers to be brought in by HS	PPG Group HS
*	MFS asked what sort of quantities of Newsletter were taken by patients. KL advised 60 - 80 copies were done and left on front desk. Also on the Website.	

*	<p>Changes were suggested by the group for the Patient Survey. These changes to be agreed by LF, AM and TD before issued. Add question about whether patients found Newsletter informative.</p> <p>Practice needs to reduce A&E attendances. Patient Survey question re; which conditions would you attend A&E, this question is to educate patients, but SL advised that A&E attendance does not always mean that patient has gone to A&E first, it could mean that '111' was called first and they have suggested A&E.</p>	Dr's & LF
*	<p>MFS asked what the level of DNAs (Did Not Attend) were. AM answered saying for example in his morning surgery that day he had 3 DNAs! MFS said that Hillingdon Hospital have an automated system whereby patients get a phone call to remind them of the appointment. AM advised that this was not possible for us to do as we do not have enough mobile numbers and that patients do not keep us updated, as they are asked to do.</p> <p>AM said that he would explore the costs of SMS text messaging.</p> <p>AM advised that hospitals get paid for each appointment that is kept so it is in their best interest that patients attend appointments, hence the automated reminder service.</p> <p>DNA statistics to be put back on Notice Board once Newsletter completed with figures.</p>	AM/LF KL
*	<p>LC mentioned electronic appointment system, which we currently do not have. LC commented that she has experienced this and it is a very good service.</p> <p>LC also mentioned that she personally has made a couple of appointments, had to rebook them and original appointment had not been cancelled by Receptionist. An oversight by the Receptionist but LC suggested perhaps there should be something that can be put on EMIS system to flash if patient has more than 1 appointment pending.</p>	LF
*	<p>JS mentioned the Awareness Days. PPG to look at the website and to decide on what Awareness Day would be appropriate to do next.</p>	PPG

*	<p>CF mentioned when she came for her annual BP check & bloods, that she was surprised that Diane had left. She commented that Diane was excellent and that she would be missed.</p> <p>AM advised that phlebotomy was done at the hospital or at Oak Farm and we currently do not offer this blood service as it is very difficult to find a nurse who is skilled in all that Diane did.</p>	
*	<p>Mentioned re; prescriptions done online. LC & SL had both received prescriptions at chemists where not all items had been prescribed. AM commented that this could be for a number of reasons i.e., review date or perhaps item not on repeat. It was agreed by the group that communication should be sent to patients if prescription request changed by the Doctor.</p>	LF/Dr's
*	<p>Agreed that above should be discussed at Practice Meeting. AM advised that now only allowed to prescribe 1 month supply of tablets.</p> <p>Wastage of drugs was discussed by all - to be mentioned in the Newsletter. Discussed possibly asking patients to advise Dr's what they are not now taking on their repeat prescriptions and to educate all re; unwanted pills to reduce costs.</p> <p>JS has offered to do a drawing to go with this on the Newsletter.</p>	Dr's PPG
*	<p>Group suggested that a paragraph should be put in Newsletter of what the doctors can and cannot prescribe.</p>	LF/KL
*	<p>MS raised a comment to be discussed (now at the next meeting) - MS would be interested to hear more about the use of "Talking Therapies" with appropriate patients. She says that there has been considerable success in the Oxford Health Foundation Trust area and she would like to know if this is available to Hillingdon patients.</p>	MS to discuss at next meeting.

- **The next meeting - Wednesday 17 April - 4.30 p.m.**