**PPG Meeting**

*5th July 2023*

**Staff:**

Sharon Riley Senior Practice Manager (Issa @ Deepdale)

Ann-Marie Donaldson Nixon Practice Manager (Issa @ Fulwood)

Stephanie, Jayne and Kirsty (deputy managers across both sites)

**Patient representatives (Initials used for data protection)**

**Mrs J F**

**Mrs F D**

**Mr G G**

**Mrs M J**

**Mr C J**

**Miss B B**

**Mrs M F**

**Miss C B**

**Mrs V C**

**Mrs N C**

**Mr S K**

**Mr P W**

**Mrs E W**

**Apologies:** Mr M R

Mr F T

Mrs M D

Mrs H B

Ms J L

Ms R M

Mrs D M

**Minutes:**

* Review of last meeting minutes.
* Thank you for attending & Introductions

**Aims:**

Plan of rotation across sites and change of date and times to fit with our patient group.

We want this group to be led by the patients.

To get our patients more involved, community-based activities.

Recruitment of group chair - CF nominated.

Recruitment of committee members - JF, NC, MF, MJ

Code of conduct for meetings. Suggestions and feedback welcome, to be fed back to the partners and staff.

**News & Updates**

Intending on holding health open day in foyer, GP representatives, physio, other team members, stalls, and we would love to have representatives from the patient group. Looking at September/October.

Contacted numerous services for attendance PNE education, Bowel Screening etc.

Speak to Hindu community as they do the health day regularly.

Pain management to be invited.

Social prescribers also to attend.

We have just done a pilot on healthy eating with the Sahara for the Asian community, we are inviting them to attend the health open day.

**Introduction to pilot we are taking part in** – diagnosing suspected skin cancers using AI (12-month pilot scheme). Launching next week at Buckshaw, they will look after Chorley, we will look after just our patients initially. Triaged by reception, member of staff then offers appointment to fast track process so not waiting weeks for dermatology consultant. Derma scope, takes three pictures, sent to skin analytics. They will then mark if it is suspicious, and a 2-week rule will be processed. Cuts out waiting times and leads to a quicker diagnosis and treatment.

**New website** – any suggestions welcome – working progress. If you still get splat message please clear CACHE and retry. AM will re-send out link for website. Patient feedback for CQC will be on website, and we will be sending out invites for feedback via text to those that have consented also.

**Fulwood building** is still very much a working progress, new reception desk and seating downstairs. Pharmacy did not go ahead at Fulwood site, license was opposed by other local pharmacies. Space will now potentially be used for a dentist.

**Friends & Family feedback figures discussed**. We take feedback on board and make changes from this i.e., waiting room did not have enough chairs, we put out more chairs.

**Notification received for CQC inspection**. If anybody would like to attend, they do like to speak to patients. It will be at Deepdale the main inspection.

**Group suggestions & comments:**

**SK** - Group member fed back happy with the patient empowerment this is promoting, building patient knowledge of their own health. Presented daily mail article regarding diabetic cases. Diet research, build knowledge, empower the patients. 6 health checks on diabetes article used as an example of educating patients on their own health. BMI tip also shared, take a piece of string from toe to head, halve it then tie around waist, if it meets that is good, if not then you are carrying excess fat. Combating loneliness, exercise, reading, hobbies.

**NC** - Group member felt we need to draw the boundaries of patient responsibility for their own health and what is the practice’s responsibility. Surgery does their part, but patients have to do their part too. It’s not just physical, it is psychology and emotional also. There is a lot we can do to empower ourselves.

Group member asked how much space we have in terms of community garden. Ann-Marie explained that this would need to be taken to the landlord.

There is a big emphasis on staff wellbeing currently. Certainly, for reception staff who have the hardest job and do a really good job. It is good for them to get away and have a walk etc.

**NC** - Group member felt would need to be mindful having patients and staff mixing in community garden as staff would not be getting a break then as patients are likely to speak to them.

**SR** - Suggested a community pick your own, herbs etc. Patients can come and help themselves.

**JF** - Query raised on public liability. We are very conscious on health and safety rules so this will be done.

Previously we used to host a Christmas party for elderly patients that we knew were on their own. Sandwiches, cakes, tea etc. Helped introduce patients who then became friends, helped build the community feeling. Positive response from group for this.

**NC** - Calling screen raised as suggestion – explained we have trailed at Deepdale, without success, but new BMA guidance is now that clinicians come out and get their patients, well being for them to get them moving from their desks.

**NC** - Front desk lacks privacy – can overhear patient next to us when checking in etc. Can re-iterate to staff to remind patients to step back for privacy. Patients can also request to speak to the receptionist privately.

**NC** - Is there anyone representing patients who are parents with children. Asked to feedback how easy it is to facilitate appointments etc. Feedback was given regarding clinicians communicating with adults rather than children, and it is important to engage with the child. Recruitment of patients from this demographic to be looked into.

**NC** - Cervical screening stops at 65 but when you have a family history what support is in place? – Tends to be HPV infections that pose the risk, it’s not a genetic risk. If you have clinical symptoms that may indicate, you are at risk then the test can be requested.

**Online access** – if you already have access, as of October you will automatically be granted to retrospective access. Currently, you need permission from the practice, we have to review the record prior to granting access. This to ensure any information that may be harmful or upsetting to patients or information that may pose a safeguarding risk is hidden from view prior to access, parameters of this discussed.

**SK** - Introduction of group therapy to discuss pain management etc.

**Moving forward:**

Email to be sent to those on committee, we will then come up with a plan on what the group wants the meetings to contain moving forward.