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|  **PPG Minutes** |
| **Meeting Date** | Monday 28th January 2019 |
| **Present** | J Green, S Otty, A GillmanSmith, J Jacklin, L Watson, G Lamb, D Crossley, D Bell, R Walker, R Aubrey, T Mackie(observer and potential member), A Nation, I Skidmore  |
| **Apologies** | L Boon |
| **Agenda Item** |  **Notes** |  **Action** |
| **Minutes** | Minutes of the meeting of 19th November 2018 were approved |  |
| **Matters Arising** | GL noted that if we need to contact POwHER she can facilitate this.At the CCG get together Practice Runs were discussed. JG has details if interested.  |  |
| **Performance Audit** | SO, RA and JJ were thanked for an excellent document. This should go on the Practice website page. It provides a clear picture of what has been achieved and where the challenges remain.The vPPG needs to be used more effectively, asking it questions about things that can be changed. We agreed that this should be a topic for the next meeting.The main challenges are effective two way communication with the medical staff and also with the wider patient population. It would be useful to have a picture of the demographics of the vPPG, can this be done without data protection problems? | DCAllDC/SO |
| **Communication** | A Practice Survey was discussed. This would need to have focused questions, be anonymous and the PPG would have to commit to responding to it. “You said. We did”We will have a table in the waiting room on 28th February, 11.30 to 13,30 staffed by Ann Sara and Jan. Focus first on the role of PPG and on the Flow ChartOther members of the PPG need to commit to doing their share. The next table might focus on the work that the staff of the surgery do (Date?) | A GS SO JJAll |
| **Magazine Articles** | The March article will be on hay fever. | SO |
| **Long Term Conditions** | RW attended a workshop on these, 10 patients plus CCG. GL and DB are also interested in this. If there is any report from this meeting RW will circulate it. (Done, slides and paper)A plan relating to prevention and management is scheduled for 2020. It was noted that there are some patients who need management plans for more than one condition.Topics discussed included IT systems and sharing records, social prescribing and personal health budgets |  |
| **Care Navigation** | Currently the Practice is not involved in this. |  |
| **AGM** | This is scheduled for 7pm on Monday 25th February. JG will be stepping down as Chair and in the absence of other volunteers IS proposed himself as the next Chair. This will require a new secretary GL expressed interest.  |  |
| **Street Market** | We have run a quiz for the last two years and need to revamp it. We also need new focus and information we can distribute other than just at the stall. (Aortic Aneurysm last year)Ideas are needed. | ANAll |
| **AOB** | Primary Care Networks are being introduced, the objective being to create efficiencies in services such as District Nursing and phlebotomy. NAPP bulletin suggests these should be in place by April 2019.A GS suggested that we should aim to have visiting speakers at PPG for example St Johns and First Aid, Long Term Care.A refresher course on defibrillator (AED) use will be arranged. IS noted that with Barclays closing the AED there may have to be moved and alternative sites are being investigated. |  |
| **Date of next meeting** | 11th March, to be confirmed. |  |
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