**NEETSIDE SURGERY**

**PATIENT PARTICIPATION GROUP**

**Minutes of the meeting held at the surgery on Monday 16th July 2012**

Present:

Melanie Chenoweth, John Goacher, Sue Lamble, Roger Moppett, David Whalley (Chair), Michael Wreford, Amanda Baker

Dr Michael Dowling was present for part of the meeting (having attended an emergency call from a patient)

1. The minutes of the meeting held on 16th April were approved.
2. The position of officers to the group were discussed. David Whalley agreed to continue as chair of the group. Other members did not feel they could take on responsibility to act as secretary at the present. David Whalley agreed to take minutes until such time as someone else would be able to take on the role. It was also agreed that it was not necessary for the group to have either a vice-chair or a treasurer at present.
3. A draft set of Terms of Reference were looked at. Following the discussion about officers, it was agreed to delete reference to vice-chair and treasurer. With this exception the Terms of Reference were agreed.
4. A Membership Agreement was distributed approved and signed by members.
5. There was a detailed discussion about the role of the PPG and the work programme. Members agreed that the PPG could play a part as part of the communications between the Practice and its patients. Group members could also help to be a channel for ideas and suggestions to help the practice in its aim to provide an excellent service for its patients.

Melanie Chenoweth explained that the surgery would be repeating the patient survey in the Autumn. The previous survey had included only questions from the national survey. For the survey to be conducted in the Autumn, the Practice was keen to include some questions which were relevant to Neetside. It was **agreed** that Melanie would provide all members with a copy of the last survey (by email or hard copy for those without email). Members would then try to provide Melanie with a few suggestions for additional questions. The PPG will look at these suggestions when they next meet.
6. There was a general discussion about suggestions for improvements. All members agreed that patients felt that the care at Neetside Practice is excellent and all spoke highly of both medical staff and support staff. Suggestions included:

	* 1. Opening the appointments telephone line at about 08.15. Opening at 08.30 (the present time) presents a challenge for parents taking young children to school. Melanie explained that emergency appointments would always be found for young children no matter what time the parent contacted the surgery, but agreed to look at the practicalities of changing the opening times for appointments.
		2. The possibility of an on-line appointment system was discussed. Other surgeries use such a system. Melanie agreed to investigate.
		3. Many patients dislike the 0844 telephone number used by the surgery. Melanie explained that the surgery currently has a contract for the telephone system until 2014. This includes the 0844 number. The cost to the patient using a landline should be only 4p per minute (although the cost for mobile telephones could be greater). The surgery makes no financial gain from the use of this number. Some telephone companies may be charging higher rates. In these cases the telephone companies are profiting from the call. It was agreed that an explanation of the current system would be in the next newsletter and patients encouraged to contact their telephone provider if they are charged more than 4p per minute for these calls. Melanie said the surgery is currently in discussions with the provider of the telephone system about adding an 01288 number to the telephone system. Initially the surgery had been quoted a very high cost for this, but when contacted recently the provider indicated that a local number might be added for no extra cost.
		4. The possibility of sending patients the Surgery Newsletter by email was discussed. Melanie explained that the surgery would be asking patients to update their mobile telephone number shortly since many numbers held at the surgery were no longer valid. It was suggested that the surgery should collect patient email addresses at the same time. Whilst this would not guarantee that all patients received the newsletter, it would enable it to be sent to a larger number of patients.
7. (at this point Dr Dowling returned to the meeting). Dr Dowling explained the development of the KCCG. It was agreed that the PPG would like to know at future meetings about how this new organisation impacted on the Neetside Practice and the extent to which it was an improvement on the PCT (which it replaces in April 2013).
8. The next meeting will be on Monday 24th September at 6.30pm.
9. The meeting finished at 7.55pm