**BEDWORTH HEALTH CENTRE (BHC) GP SURGERY**

***MINUTES OF PATIENT PARTICIPATION GROUP (PPG) MEETING***

*Wednesday 24th August 2022 | 10.00am to 11.20am*

Main Hall, The Health Centre, High St., Bedworth, WARKS. CV12 8NQ

**Attendees**: Ross Chadwick (RC) – BHC IT & Project Lead (MINUTES) & PPG Secretary; Elizabeth Gilbey (EG) – BHC Practice Manager; Christine Jackson (CJ) – PPG Member; Jean Whitehead (JW) – PPG Member; Enid Lacey – Chair of PPG; Lynn Carrington (LC) – PPG Member; Anne Wilks (AW) – PPG Member; Gaynor Tallis (GT) – PPG Member; Denise Morrison (DM) – Prospective PPG Member

**Agenda items**:

1. Introduction of DM to members
2. Approval of minutes of 20.07.22 meeting
3. Actions following last meeting (review member comments regards PPG literature; review member comments regards PPG documentation (job descriptions); review feedback provided to members by RC regarding PPG suggestions for increasing uptake of child flu immunisations & cervical smears inc. AW & JW to update members on progress of child flu immunisation display)
4. Practice update (staffing changes)
5. Self-care campaign
6. Next meeting
7. Any other business

**Minutes**:

1. RC welcomed DM to meeting and all in attendance introduced themselves.
2. **Minutes of 20.07.22 meeting approved**.
3. RC advised the only comments he had received regards PPG promotion literature was from EL surrounding the leaflet – her suggested changes were circulated to members and **the leaflet containing these, approved**.

**ACTION: RC to ensure the approved leaflet was on display in surgery.**

**As no other comments had been received with regards to any other PPG promotional literature, these were approved by default.**

Only comments RC had received regards PPG documentation (job descriptions) were from EL:

* Her first query was what would happen when the Chair reached the end of their term and no-one was willing to take on the role of Chair, in the event that we did not have a Vice-Chair who could Chair temporarily. EG advised that it may be necessary to look again at recruiting new members who would also be willing to take on the role of Chair. Members queried whether a staff member could take on the role of Chair on a temporary basis. EG was not keen on this, given that the PPG was supposed to be a group for patients with staff representation / input and that it should be driven by patients, not staff. AW queried when the practice was two separate practices, how long the Chairs of the respective PPGs had sat for. Members asked why the Chair’s term was limited to three years. RC reminded members that the terms were an accumulation of what EG and RC had sourced from other practices and that the BHC PPG could agree their own. Members suggested that the Chair’s term be amended to reflect a maximum of three years, with the option of a further year’s extension with the agreement of the Chair and all members. **All agreed, so the job description for the role of BHC PPG Chair would be amended to reflect this and was approved**. Regardless of this change, in the event that we still did not have anyone willing to take on the role of Chair on a permanent basis, it was agreed that a Member would Chair on a temporary basis. RC suggested the role of Vice-Chair be revisited at the meeting after October’s meeting in the hope that either a) new members would have been recruited by that time who would be willing to take on the role; or b) existing members would be willing to take on the role. Members agreed. JW suggested that the organisation ‘HealthWatch’, as mentioned on the Warwickshire County Council (WCC) website, may be able to assist with the recruitment of new members. AW also suggested reaching out to two former members, to see whether they would be interested in re-joining the PPG. EG asked her to approach them informally, if she was to see them. **UPDATE: One of the former members is no longer a patient so would not be eligible to re-join.** LC and DM suggested having a stall at Bedworth Market to promote the PPG.
* Her second query surrounded what the ‘Nolan’ principles were. RC provided a print out from the government website explaining what they were. **Members approved the job description for the role of BHC PPG Member.**
* **As no comments had been received with regards to the job description for the role of BHC PPG Secretary, this was approved by default.**

EG fed back the Nursing team had agreed that when flu vaccination clinics are run at the weekend, the last hour will be allocated for child flu vaccinations. EG advised Nurses had confirmed there was no reason that child flu immunisation could not be given at the same time as routine child immunisations so if children were in attendance for those, the Nurses would give the child flu immunisation as part of that appointment, the patient did not need an additional appointment. AW and JW circulated the documentation they had made for a child flu immunisation display, to encourage uptake. A small amendment as suggested by RC was agreed and **the documentation approved.** AW, JW, EG, RC and Sara (BHC Reception Team Lead) were to get together after the meeting to discuss locations for this documentation to be displayed (**UPDATE: this has now been done**). EG was to check with the Community Health Services (CHS) Receptionist as to whether the free standing display in the building foyer could be used as a location for the display (**UPDATE:** **it can**). AW also provided some literature she had sourced surrounding child flu immunisations and asked that this was added to the website. **ACTION:** **RC to add AW’s literature to website.** Members asked that it was investigated whether pharmacies can give child flu vaccinations, as this may be a reason why our uptake had not reached the targeted level last year.

1. EG advised that Dr. Katie Hebbes will be joining the surgery in November. She currently works at The Grange Medical Centre in Nuneaton. She will be working three days a week (Wednesdays, Thursdays, and Fridays). She has an interest in palliative care.
2. EG explained the Community Pharmacy Consultation Service to members. This allows patients to be seen at a pharmacy, rather than a GP surgery, for minor ailments. AW asked whether Asif (BHC Clinical Pharmacist) could see patients as part of this; EG advised that this was not his role with us.
3. Next meeting: **Wednesday 19th October at 10.00am (via Zoom)**

AW advised she would not be participating in digital meetings due to technological limitations. EG offered the use of a room and computer at the Practice to allow AW to attend. AW declined this. JW advised she may also have difficulty attending digital meetings due to personal circumstances. LC expressed concern that if both AW and JW did not attend digital meetings, this would be two valuable members that would be absent for those meetings. EG and RC re-iterated the rationale for holding digital meetings as well as in-person meetings, that had been given at the 22nd June meeting. RC reiterated the commitment he had made at the previous meeting, to assist members who required help with attending a digital meeting.

1. GT asked whether GPs still carried out a visit to a bereaved relative of a patient, if the patient had passed recently, as this was done previously. EG responded that this wasn’t done routinely, but would be done if the relative requested it. EG advised that additionally, we are one of the only local practices who still conduct home visits (bereavement visits or otherwise). EG will raise at the weekly GP meeting and will feedback. **ACTION: EG to investigate bereavement visits with GPs and feedback to group.** EG also advised that she will investigate a bereavement pack.

EG asked whether any members had any grandchildren who would be willing to help with PPG matters. No members were forthcoming.

CLOSE