

**Sunbury Health Centre  
Patient Participation Group (PPG)**

**Minutes of the meeting held on  
Thursday 14 July 2015  
At Sunbury Health Centre (SHC)**

**Present:** Wendy Doyle (WD), Richard Fryer (RF), Dr Dave Gill (DG), Polly Healy (PH), Diana Huntingford (DH, Minutes), Neil Huntingford (NH, Chair), Dorothy Linter (DL) and Paul Thompson (PT, Vice Chair).

**1. Apologies for absence:** Brian Catt (BC), Roz Dominic de Lord (RD) and Jackie Sheehan (JS).

**2. Minutes from the last meeting (19 May 2015)**

It was agreed that the minutes were an accurate record of the previous meeting.

**3. Be a voice in the community**

- **Recruiting new members** to better reflect the local community - the way forward  
The group discussed who we wanted to recruit i.e. young mothers/fathers and patients who have an ethnic minority background and tried to ascertain why it was proving to difficult to attract members from these communities. NH commented that at a CCG meeting he had recently attended he discovered that other PPGs were also experiencing similar recruitment difficulties. DG did add that the local demography did not have large numbers of young people and ethnic groups when compared to other areas close by e.g. Hounslow. It was agreed that in September we will try the following initiatives to recruit new members:
  - Local Primary Schools Book Bag - leaflet drop
  - Contact governing bodies of the local secondary schools
  - Invite students studying Health & Social Care courses to attend meetings.*Action: DH to ensure this is on the agenda of the meeting in September.*
- **PPG meetings from September '15**
  - Frequency of core meetings - it was agreed to hold these meetings on a six weekly cycle.
  - Timing of meetings - it was agreed to keep to the time of 3.30 pm for core meetings, acknowledging that this may prevent the PPG attracting young mothers/fathers.
  - Proposed dates September '15 - July '16 - these were discussed, the dates for the core meetings were agreed and it was decided not to hold Open Meetings during half terms.  
*Action: DH to revise the dates for the Open Meetings and to send out the final dates for all meetings with the minutes from this meeting.*
- **Feedback from recent CCG (Clinical Commissioning Group) meeting**  
NH commented on the poor organisation of the meeting. Whilst the

audience received eleven presentations they were consecutive and there were no opportunities for discussion. The importance of interacting with Carers was stressed at the meeting and it was agreed that we ought to consider recruiting a carer to the PPG if possible.

Action: *PT offered to find out if there is a local Carers' Group.*

'Locality Hubs' were also discussed at the CCG meeting and DG reassured the meeting that SHC was fully involved in these developments, Dr Varma is the representative who attends CCG meetings.

It was felt that, disappointingly, the meeting will probably have limited impact on the work of SHC PPG.

- **Revised hours of opening for the Reception**

The meeting was delighted to hear from RF that the reception is now open all day.

Action: *RF to update information about opening hours on the website.*

#### 4. Provide support and challenge

- **Update from Dr Gill**

Personnel - DG confirmed that the three new receptionists have all settled in well and as a consequence JS is having more time to 'manage' and review internal systems with a view to improving efficiency.

Two nurses have been recruited and will take up their posts in September/October. One of the nurses will replace Sister Pearce, who is retiring, and the other nurse is an increase in capacity (although accommodation for her will be a challenge!).

DG reminded the meeting that there are two new doctors starting in August. The meeting was very pleased to learn that the Foundation Doctor initiative has been very successful and consequently when Dr Smyth's placement comes to an end in August she will be replaced by a new Foundation Doctor. Nurse Budkiewicz has taken on the role of Nurse Manager and Sasha Thurgood is now RF's support assistant, both appointments are enabling RF to have more time for his role.

Kay Paice and Caroline Watson have been appointed senior receptionists which involves supervisory responsibilities and consequently JS has more time to devote to her role.

The new Health Care Assistant (HCA), Michelle Marriot, is now holding three clinics a week and could have more if the accommodation allowed it.

Premises - DG reported that he and RF had that day attended a very encouraging meeting with NHS Property Services. The outcome of the meeting is that NHS Property Services will, within the next few weeks, conduct their own 'Development Appraisal'. This will then negate the need to wait for the funding for the original feasibility study to be agreed. The findings of the appraisal should then be acted upon promptly by NHS Property Services. Various solutions to the need for additional space were also discussed at the meeting.

PT asked if there had been any meetings involving NHS Property Services

and local councillors.

Action: *DG to update Cllr Evans on the matters discussed at the meeting.*

- **The role of the Practice Manager**

RF has reviewed the role of the Practice Manager, previously held by Varsha Mandalia, and he has decided that the role will be replaced with:

- A new part-time finance role, to include a responsibility for efficiencies, will be employed;
- A full-time position responsible for data and IT.

RF explained that payroll and pensions will be outsourced.

Action: *RF and PH to produce a personnel structure chart for the next Open Meeting to clarify roles and responsibilities.*

- **The use of volunteers - the way forward**

NH feedback on the research BC had undertaken with regard to this matter. RF explained that the NHS inspection framework highlights the importance of 'being safe' therefore he asked that the use of volunteers be 'put on hold' until he was confident that all staff are up-to-date with the requirements of the framework.

It was agreed to keep this suggestion 'live' since it did come from an Open Meeting.

Action: *PH to investigate the feasibility of SHC using volunteers who have previously been 'checked' by charity organisations. PH to also clarify at what level volunteers can help without requiring checks.*

- **Attending Spelthorne's Overview & Scrutiny (OSC) meeting**

PT explained the potential benefits for SHC by attending a meeting of Spelthorne's OSC. DG agreed that it would be a very good idea to attend such a meeting to highlight the unique challenges being faced at SHC and to reinforce the duty of the council to consider the implications on local infrastructure when new developments are approved.

Action: *DH to find out the dates and times of the meetings.*

## 5. Help disseminate information

- **Electronic prescriptions**

- The way forward with providing IT training - RF shared his frustrations that the WiFi infrastructure is still not in place to enable this training to be put in place.

Action: *DH to ensure this remains an agenda item for future meetings.*

- 'Meeting and Greeting' - learning from the good practice of another PPG - NH explained how another PPG was using its members to explain to patients, queuing at the surgery, the benefits of using electronic prescriptions and then sign them up for the system. It was agreed that this could be very successful at SHC and might even negate the need for IT training.

Action: *RF to investigate further the documentation needed to enrol for electronic prescriptions and discuss with reception staff the*

*practicalities of this initiative. DH to put this item on the agenda for the September meeting.*

#### **6. Develop a communications strategy**

- **Activities on our website** - PH tabled information on the use of the website in the last month. There appears to have an upsurge in interest since the Open Meeting - which the meeting agreed was very encouraging.
- **Frequency of SHC newsletter** - It was agreed that this is a very important means of communicating with patients and that the frequency of the newsletters will be finalised in September. DG thanked PH for her support with the formatting of the newsletter, which she agreed to continue to provide.
- **Advertising PPG Open Meetings** - to be finalised in the September meeting.

#### **7. Improving the physical environment**

- **Painting of the Waiting Room notice boards** - the date to undertake this will be agreed at the September meeting.

#### **8. Action Points of the last meeting (not covered in the agenda)**

The only Action Point not covered by the agenda was the feedback from RF regarding the good practice of other health centres to support patients who have a hearing impairment. RF reported that he now had a contact and that he will provide details at the next PPG meeting.