

# CHANNEL VIEW PATIENT PARTICIPATION GROUP

15<sup>th</sup> Meeting held at 6.30 pm on 30<sup>th</sup> November 2017 at Channel View Surgery

**Present:** Helen Peirce (Chair), Martin Spearman (Deputy Chair), Frank Bond (Secretary), Dominic Geldard, Barry Stevens, Claire Conway, William Moyle.

## 1.0 Introductions and Apologies for Absence.

Apologies were received from: Bill Stanyon, and Sue Hedley.

The group were pleased to welcome Mr. W. Moyle - Assistant to the Practice Manager at Glendevon Surgery.

## 2.0 Minutes and Actions Arising from Previous Mtg: 12<sup>th</sup> October 2017

**The previous minutes had been circulated and agreed 16/10/17**

**2.1** Helen had produced the text to be circulated to our Virtual Group, but we have delayed sending this until the “virtual and possible attendees list”, and the “virtual group only list” has been updated with the new applications received at Bishopsteignton and at Chudleigh flu clinics.

**Action: Claire to update email lists so that Group can send out information.**

**2.2** Dominic had researched NHS and NAPP for a standard PPG new-members application form. Martin had mentioned it at the Coastal Meeting and they suggested the SDTCCG website as a source of information.

The actual questions we should ask to provide contact data, data protection permissions, and sufficient demographical information, were being considered.

Claire agreed to ask at the next SystemOne user group meeting for advice.

**Action: Claire to report back re Application details after SystemOne user group meeting.**

**2.3** Claire reported that Dr Carlie was meeting tonight with the other two town practice groups to discuss further plans to integrate and collocate with voluntary services, health & well being teams and community services.

**2.4** Martin had attended the Coastal Engagement meeting of 18th October.

## 3.0 Communications

Nil to report except action at Para 2.1

## 4.0 Feedback on current Issues from Practice and Patients.

The Practice had publicised the change to repeat prescriptions, which can no longer be ordered by third parties. Details are on the website.

## 5.0 Networking with other groups

**5.1 Coastal Engagement Group.** Martin had reported to the group that more clarity of the proposal for collocation was needed before staff or patients could be expected to comment. Martin had already received feedback from a member of the public which had been based on mis-informed rumour. The Estates Technology and Transformation Fund had funds for this collocation. There was discussion on the need for rehabilitation beds or what would happen to the empty floor at Teignmouth Hospital if beds are to be replaced.

Martin would continue to liaise with Volunteering in Health. The Coastal Group reported that ViH and the Alice Cross Centre had earned a Kite Mark from the CVS. They were working together with patients of 50+ and with the Wellbeing Co-ordination to improve hospital discharges. The Alice Cross reported that the Royal Voluntary service had created a film club, and that the “Memory Cafe”, now had increased attendances. However, they said that they would raise their concern over transport to classes, with new restrictions to local bus services.

Martin reported that the Coastal group had decided to invite new representation from the councils, housing, social services, and the Care home forum.

Helen and Frank indicated that they would be prepared to attend future meetings.

**Action: Martin to attend next Coastal meeting of 13th December.**

**5.2 MDT Project meeting** concerning patients with multiple and long term health problems. Barry had attended the meetings as a participant. Researchers at Plymouth University in association with Torbay and South Devon NHS Foundation Trust are looking at the operational integration and implementation of new Care Models to help with this situation. Funding had been made available to continue this work. Barry agreed to circulate a copy of the Patient Information sheet to those present.

**5.3 Local PPGs, and town meetings.** William from the Teign Estuary Medical Group (Glendevon and Riverside surgeries) told the group of his own groups PPG plans, and that with Dr Peter Galli they would be represented at the Coastal Engagement Group. With the collocation of Teignmouth services being discussed a joint PPG meeting might well be useful.

## **6.0 Forward Planning**

### **6.1 Terms of Reference review.**

The term and election of honorary officers was discussed with a proposal that: Honorary officers should be proposed and nominated by a majority from a quorum of the face to face PPG group members for a period of 12 months and with a maximum term of 3 consecutive years.

Apart from any other additions to the terms of reference, the following matters should be considered and discussed at the next meeting.

- a) Ground rules for recruiting more members, their roles, their behaviour, and resolution of any conflicts within the PPG.
- b) Matters to address in the coming year.

E.g. Studying local statistics and understanding what services are most needed, but not forgetting minority requirements.

Understanding and publicising the facilities which can be offered by the practice and what is possible by signposting or referral to local groups or charitable support.

**Action: Members to consider any amendments.**

### **6.2 Next Meeting**

New members that had indicated they might wish to participate at the meetings had been sent an invitation and agenda. It was agreed that we would vary the time and location of the next meeting, as this may make it easier for new members to attend.

**Date of Next PPG Meeting: 2 pm Thursday 18th January at Bishopsteignton Surgery.**

Frank Bond 7<sup>th</sup> December 2017