



Notes of Meeting held 16.9.14

Time: 7-8.30 pm

Venue: Deddington Surgery

Invitees:

Name	Attended 16.9.14		Attended 16.9.14
Ted Sutton	Y - Aynho	Ted Short	Y - Twyford
Anita Higham	A - Adderbury	Ken Norman	Y – Steeple Barton
Dave Lloyd Harris	Y – Lower Heyford	Paul O’Sullivan	
Barbara Harris	Y- Lower H	Brenda Cooper	
Peter Richardson	A	Veronica Lough-Scott	
Albert Humphries		Julie-Anne Howe	Y - Adderbury
John C Webb	Y - Adderbury	James Simmons	A - Deddington
Sue Johnson – Practice Manager	Y	Dr Mike D’Souza	Y
Melanie Watkins – Incoming Manager	Y		

1. **Welcome and Introductions** - took place
2. **Notes of last meeting** – minutes from the meeting on 3.06.14 were reviewed with the group and accepted as a correct record.
3. **Mission Statement - Review of suggested wording**

The Group thanked PR (in his absence) for proposing a suggested statement, and after discussion made the following changes:

1st para – take out the 2nd sentence.

2nd para – take out (see below ...) and insert – For 2014/15 the 3 areas will be

House-bound patients - Raising awareness with posters asking “Do you know anyone who is house-bound?” and ensuring the practice is aware of them so they can have the support they need. The whole PPG group could be asked to respond; there are lots of people who are house-bound who do have computer networks in place and information could be given to them via this, or via visits.

The surgery will be able to ensure the person:

- has a care plan in place and recorded on the surgery IT system as being house-bound,
- has crisis information provided,
- and perhaps the ‘message-in-a-bottle’ information for emergency crews.

These small things can ensure the care needed can be put in place quickly when needed.

Action ALL to speak with colleagues / family / friends / neighbours as appropriate.

Carers – raising awareness in the community that the carers role is important, and some support is available. This will involve speaking with friends and neighbours so they advise the surgery that they are Carers so this can be taken into account when:

- Asking patients to come into the surgery
- Making appointments where possible which don’t conflict with the carer role
- Checking if carers need breaks
- Ensuring that carers know what to do if an emergency occurs for themselves or their cared for one – this could be a notice on the fridge but ensures others know how to help

- Ensuring care plans are in place to support the cared for person so the Carers doesn't have to keep repeating information.

Action ALL to raise awareness with colleagues.

Prevention checks – encouraging patients and friend and colleagues to come to the surgery for check ups. For young people this could be sexual health checks, or things like addictions. Services for disabled people, or ethnic minorities could be raised in profile with local Banbury services highlighted. Older people could have a dementia focus with information available to raise the importance of diagnosis and therefore help and support.

3rd para – take out 2nd 'consist'. The group liked the phrase that 'The group's main purpose is to ensure that patients have a voice within the practice for the community' ... and would add that "as many villages as possible are to be represented".

Para 4 – take out 'change the demographics of the group to' as representation will be as broad as possible.

Para 5 – add that a PPG representative will be available whenever possible to represent the practice as the Public and Patient Forum. (note: at the moment this is believed to be Anita Higham – the day of the PPG meeting may need to be changed to allow her to attend both.)

Section on Specific Action Objectives – to come out as these are above for 2014/15.

4. Robot project

SJ updated the group on where the project had reached. See attached floor plan file for information on the layout of the new Dispensary which shows the main robot, and the separate Pharmaself machine. She also explained how the robot 'arm' is able to function all the time, collecting medication that is requested by patients during the daytime, and then overnight putting away and organising all the medication on the shelves within the robot. The new Pharmaself will be available for patients to collect their repeat medication at any time, accessible via a PIN number much like in banking for those who chose this method of collection. Those patients who did not want to use it could still attend the dispensary as usual to collect their tablets, and there will still be village deliveries. The robot is due to arrive on 20.10.14, and expected to be working by 17.11.14.

Some building disruption is expected as space is reallocated, and GPs will move rooms to limit noise disruption. When some of the room reconfiguration has been completed then the Notice Board planned by the PPG can be hung in the waiting room.

The robot will not be able to dispense controlled drugs or fridge items, but will help enormously with access out of hours, stock control and use by dates on medication.

A frequently asked questions guide would be available, and put up on the website. SJ will continue working at the surgery on the robot project to ensure the project is a success, and it is hoped that the whole project (which is the creation of the new Dispensary and then the transformation of the area where the old Dispensary is into new rooms) will be completed prior to Christmas.

If PPG members would like to volunteer to be available in the surgery as the project comes 'live' to explain to other surgery attendees how it works – this would be most welcome.

ACTION – volunteers to please advise SJ

5. Retirement of Practice Manager – Sue Johnson

SJ advised she will retire as the Practice Manager for Deddington at the end of October, but will remain in the practice until the robot project is completed. The Group thanked Sue for all her hard work and wished her well for the future.

The new Practice Manager is Melanie Watkins, and as she has been with the surgery for some time as Deputy Practice Manager, and performing IT duties, she is ideally placed to ensure a successful handover and continuity.

6. Invitation to North Oxfordshire Locality Steering Group meeting 16.12.14 @ 7.15 – Banbury Town Hall.

Mince pies will be available and free parking. The event is to encourage practice based PPG involvement in the wider Public & Patient Forum which represents practices, helping to support two way communication. All members are welcome.

7. AOB

A question was asked about whether a **Time & Motion study** was going on or is planned at the practice – it was not.

Projects going on within Oxfordshire Clinical Commissioning Group - JAH asked if anyone was interested in being involved in patient pathway redesign projects which were planned around – Dermatology, Ophthalmology, Cardiology & Gynaecology.

Patient involvement was voluntary however travel expenses could be claimed.

Involvement would include attending meetings in Oxford to present a patient view on services, or responding to some emailed proposals if this was more convenient.

Meeting dates had not been set but if you are interested please do contact

Julianne.howe@oxfordshireccg.nhs.uk, or call 075 000 96312 in office hours.

JAH also reminded the group they could join **Talking Health** if they wished to participate in the various patient consultations which the OCCG Communications Team undertakes. Patients can register on <http://www.oxfordshireccg.nhs.uk/get-involved/talking-health/> or email cscsu.talkinghealth@nhs.net and advise which services they are interested in, and when issues arise within these they will receive an email which is an invitation to give their views.

8. **Date of Next Meeting : Wednesday December 10th 2014, at 7pm.** Dr Ruddock will Chair the next meeting.