
PATIENT PARTICIPATION GROUP MEETING

Thursday 15th March 2018

Western Elms Surgery – 7.00pm

1.	Present: Alan, Susan, Murray, Deborah, Alice, Andrew G, Rick, Lisa, Dr Oji Apologies: Murray, Moya, Christine, Marilyn, Hazel	
2.	Minutes of last meeting and matters arising <ul style="list-style-type: none">Minutes of previous meeting were approved and adopted.Matters arising are on the agenda for this meeting	
3.	Financial <ul style="list-style-type: none">Account balance £2539.05	
4.	<p>Surgery News</p> <ul style="list-style-type: none">CQC Inspection The surgery has received the final outcome and has been rated GOOD. Lisa had appealed on a number of issues however they had not accepted the appeal. The PPG congratulated the practice and wanted to affirm that the practice is really good.Extension Update There had been a delay due to an additional funding request still being with NHSE. We are due to receive the outcome of this very soon. The surgery had applied as one of the contractors could do the work in 35 weeks and the other was 52. Clearly it was better for all if the shorter contract could be procured. The surgery was sorry that this was causing uncertainty with appointments and the availability to pre-book but wanted to be ready to go as soon as we had received confirmation. Two weeks are available at the moment and this will continue on a rolling rota. The on the day team would be bigger to deal with the demand and when we finally have the dates there will be pre-bookable appointments at the weekends when all the Partners will be working. Continuity of care was discussed. The surgery couldn't guarantee this but would try to facilitate it wherever possible. In terms of demand WES would manage this; the patients who needed continuity clinically would be looked after appropriately. Telephone calls would support this. The paramedics would continue to do the home visiting and this was going to be expanded. It was a big decision to grow the surgery however with the growth in list size it is necessary to be able to employ more clinicians. This would reduce list sizes to individual GPs allowing for better continuity with a bigger workforce. RS said that he always received a smile when he came in – the staff at WES bend over backwards to help the patients. What will happen to patients who have acupuncture? These things will have to be managed at weekends when there are more rooms available. What about patients who have allergies to builders dust? We will try to make sure that there is as little of this as possible however with every will in the world this is likely to be a problem. One of the reasons why WES had opted for the shorter contractors. We will try and minimise the risk.	

	<ul style="list-style-type: none"> • Clinical System The surgery will be moving from Vision to EMIS on 3rd May 2018. This is a huge job and will also cause some disruption to appointments along the way. WES has diarised this now so that the impact will only be once and when everything is back to normal; we should not have any further disruption. There will be a period of downtime and manual working in the week preceding the switch over. Managing the integrity of the data being transferred is paramount. During that time there will be no online services so the pharmacists have asked that everyone order two months of medication prior to this. On line services will be moved so patients will need to re-register. We will be advising patients of this and assisting where possible in the setting up of new accounts but ultimately there will be a point where patients cannot log in any more. The surgery will then be encouraging patients to use online services as much as possible. Having one clinical system across WES, Circuit Lane and Tilehurst (Potteries) surgeries will enable us to work collaboratively and share the 7 day working due to start in October 2018. WES would welcome all the support possible from the PPG in what was going to be a difficult few months. • Circuit Lane Following discussion of collaborative working, the WES team were asked if Circuit Lane was still in special measures. LT advised that they were and that they were waiting for their most recent CQC reports to be published. AP asked what action was going to be taken. LT advised that there were plans being discussed currently which would support CL and also protect WES patients from the continued growth. 	
5.	PPG News / Issues <ul style="list-style-type: none"> • Future meetings LT was concerned that we would not be able to have meetings in the waiting room with the works coming up. AP had asked a contact at the Oddfellows Hall to see if we could look to hire that. They had agreed. What did the PPG think about this? All agreed that it was worth exploring. Was there anywhere else we could meet? Need to look at parking. 	
6.	Patient Voice update <ul style="list-style-type: none"> • HM had sent apologies – she had attended the last PV meeting. • They had discussed the 70th anniversary of the NHS and were looking for suggestions as to how we could celebrate this? 	
7.	AOB <ul style="list-style-type: none"> • What is the RBH doing about another 20k homes – ultimately maternity will be affected. To invite Steve McManus, Chief Exec to speak. • Get Western Elms running – Dr Oji referred to the posters up about joining the Reading Park run. Staff were participating and patients would be welcome to join too. There are also other runs / walks at Dinton Pastures and Thatcham Nature Reserve. 	
8.	Next meeting: 25 th April 2018 – venue to be confirmed.	