

## **Chillington Patient Participation Group**

### **Minutes of PPG Meeting**

**Wednesday 02/07/25 5.30pm at the Health Centre**

Present:

Marianne Bailey

Jade Greet (Practice Manager) - Teams

Philip Groves (Interim Vice Chair)

Francis Carnegy (Senior Partner)

Andie Day (Interim Chair)

Mike Treleaven (SCOF)

Kim Greening (Interim Recruiter)

***Not in attendance:*** Peter Breach and Amy Gunther

*Andie Day chaired the meeting, Jade Greet took minutes.*

#### **1. Welcome**

Andie welcomed all Committee members and introduced Mike Treleaven who joined us to talk about Start Circle of Friends (SCOF). Andie gained consent from all those present for the meeting to be recorded to help aid Jade with writing the minutes.

AGREED.

#### **2. Apologies**

Amy gave notice well in advance that she would be unable to attend in person due to family commitments but was hoping to join via Teams after 6 pm. Unfortunately, she was delayed and unable to join as planned.

Peter was not in attendance, and there may have been some confusion over the Teams invite. No formal apologies were received from him.

#### **3. Sign minutes**

The minutes of the previous meeting on 05/03/25 had been agreed previously and were signed.

#### **4. SCOF**

Mike Treleaven, Chairman of SCOF, attended to share an update on the charity's work and future plans.

SCOF was founded in 1992 as a registered charity supporting the health centre and has grown into a valued patient transport service. Over the years, it has funded various equipment for the surgery, including a significant £25,000 donation for the prescription dispensing machine two years ago.

SCOF currently has around 30 volunteer drivers who help patients get to medical appointments locally and further afield, with about half of journeys now going to Derriford and Torbay hospitals. They operate from an office at Stokenham Village Hall, staffed by two coordinators for two hours a day, five days a week. Previously, SCOF was based at the surgery but had to relocate when space was needed.

The charity is run by trustees and funded mainly through patient donations. Annual income is around £10,000, but running costs are closer to £20,000. Reserves could sustain them for about five years at the current rate.

SCOF does not set fixed charges for transport, relying on voluntary donations. However, with rising costs (about £2 per mile), they plan to introduce suggested donation guidance and look for supporters to help cover mileage expenses.

To improve visibility, SCOF is producing new leaflets and considering a “Friends of SCOF” group to raise community awareness. They have no website or social media yet but now accept card payments to make donations easier.

Upcoming fundraising includes a fete on the village green on 19th July. Mike encouraged patients to use Gift Aid to boost donations by 25% at no extra cost.

SCOF cannot provide transport for patients with significant access or mobility needs, as they are not insured for this. Only 7–8 drivers are currently available for longer journeys such as those to Derriford or Torbay.

Kim reported that a member of SCOF had asked her to look into the options for patients once SCOF could no longer support them due to increasing health needs. She has already made links with NHS Patient Transport. A possible patient information leaflet is being explored.

#### **Actions:**

- **Andie to forward details of grant-making organisations to Mike.**
- **Andie to connect Mike with the Dartmouth Caring grants contact.**
- **Mike to draft an article for the PPG newsletter.**
- **Andie to share digital updates on the PPG Facebook group.**

#### **5. Review actions**

Actions from the previous meeting were reviewed, and most have been completed.

- The newsletter is now being distributed via email. However, Jade noted that there is an issue with some patients’ email addresses not being verified, which means they are not receiving it. She will be reviewing all patient email records and verifying addresses to ensure the newsletter reaches everyone. **Action: Jade to complete**

- Full membership access to NAPP has been obtained, and Andie is forwarding updates as and when necessary.
- It was agreed at the last meeting that PPG meetings can be held via Teams if required. Jade will continue to send a Teams link for anyone who wishes to join remotely.
- It was AGREED that the item on patient consent will be removed, as Sue has now left the PPG and there was no desire within the group to pursue this further at this time.

## **6. Newsletter**

Sue has unfortunately left the PPG, and with her departure, the group has lost its newsletter editor. Since then, Andie has kindly taken on the task of producing the newsletter.

There were mixed views at the previous meeting regarding how frequently the newsletter should be issued. It was AGREED that the newsletter remains an important tool for promoting awareness and engagement within the practice community, but producing it monthly is a significant commitment for Andie.

It was therefore AGREED that the newsletter will move to a bi-monthly schedule.

**Action: Jade will send Andie a link to free editorial software to support the production process.**

It was suggested that other members might like to take turns writing and producing the newsletter; however, there were no volunteers at this time. Instead, it was AGREED that members will submit any suggested items for inclusion to Andie by the 20th of each month, with a view to publication around the 30th.

It was also AGREED that the newsletter should be kept to one or two sides of A4, and no longer.

## **7. Patient feedback**

Andie shared various items of patient feedback with the group:

- End-of-life care: Two patients separately shared negative experiences following bereavements, describing poor communication and lack of coordinated care. Neither patient had been supported by St Luke's, which seemed to make a difference in their experience. Both declined to take their concerns further formally, but Andie provided reassurance through conversations with them.
- Positive feedback:
  - One patient's family expressed gratitude for the professionalism and compassion shown by emergency services—including first responders,

ambulance crew, and the air ambulance—following the sudden death of a relative.

- Another patient shared positive feedback regarding antenatal care provided by the surgery, with appreciation expressed via a local parish council representative.
- Dispensary issues: Patients raised concerns about delays in receiving medication and lack of communication about when prescriptions were ready. This situation was largely due to significant staff sickness earlier in the year. Jade confirmed that waiting times have now improved significantly, with prescriptions currently being processed within three days. **Action: Jade to check with Gemma regarding the status of text message notifications from the dispensary.**
- Long-term conditions communication: One patient was distressed after receiving a text inviting her to book a review for a long-term condition (PCOS) she was not previously aware of. It was suggested the practice website include a page explaining what constitutes a long-term condition, which conditions might trigger a review, and what such checks involve.
- IV Lidocaine access: A patient has been struggling to access intravenous lidocaine treatment for pain management. Andie has supported the patient in drafting letters to the pain team. Thanks were expressed to Val Browning for her assistance as governor at Torbay Hospital. The issue appears to be due to service capacity constraints.
- Patient survey results:
  - A recent patient survey was sent to 2,585 patients, with 140 responses (a 5.4% response rate).
  - 57% of respondents had heard of the PPG, mainly through posters and leaflets at the practice (36%), the website (31%), and the newsletter (16.1%).
  - 22 people expressed interest in joining the PPG, and 51 requested updates, with 30 leaving contact details. Andie is maintaining a spreadsheet of these contacts.
  - One patient raised specific concerns regarding the dispensary; her details have been passed on for follow-up. **Action: Gemma to follow up on the patient survey complaint relating to the dispensary.**

- Survey feedback indicated patients want clearer information about the purpose of the PPG, opportunities to influence decisions (33%), online meetings (23%), and flexible meeting times.
- Future ideas and actions:
  - Consider producing a paper version of the Friends and Family Test feedback form for reception or display in leaflet holders. **Action: Jade to create paper copies for patient use.**
  - Marianne suggested having a dedicated space on the PPG noticeboard to display how patient feedback has been acted upon, helping demonstrate that the practice listens and responds to patient input.
  - Suggestion to explore group sessions or peer support activities, such as diabetic groups or well man clinics.
  - Plans to develop a PPG slide and an SCOF slide for the practice TV screen. **Action: A small group to develop the PPG slide.**
  - The PPG aims to conduct shorter, targeted surveys on specific topics, such as the dispensary. Andie will edit the survey and arrange distribution to patients.

## 8. PPG events

Awareness weeks were reported to have gone well overall. However, feedback from patients indicated some confusion, as patients thought Kim and Marianne were simply waiting in the dispensary queue rather than being available for conversations.

It was therefore AGREED that awareness weeks will continue, but in a less formal format. Instead of standing in person, the group will create informative displays from time to time to promote awareness and engagement.

## 9. Recruitment and roles

Following the recent patient survey, 22 people expressed an interest in joining the PPG. Andie will arrange for a smaller working group to review these contacts and determine how best to involve them.

It was AGREED that the PPG committee will remain limited to 12 members to ensure it stays manageable and effective. The group also wants to ensure it achieves a balanced mix of demographics among its members.

Andie highlighted that the PPG currently needs a secretary and invited volunteers; however, no one came forward at this time. **Action: Kim will take the lead on contacting all patients who have left their details and will specifically look for anyone with secretarial skills who might be interested in joining the committee.**

## **10. Informal meetings**

Andie will email the group to clarify which members are taking on specific tasks. Each subgroup will provide an update at the next meeting. **Action: Andie**

## **11. PPG AGM**

Shortage of time meant that, on this occasion, this item was deferred to the next meeting. **Action: Andie, next agenda**

## **12. Covid clinics**

Andie wished to discuss feedback regarding the Spring Booster campaign, but this was deferred due to shortage of time. **Action: Andie to include Spring Booster feedback on the next agenda.**

The Autumn COVID vaccination campaign is scheduled to begin in September, with a major Saturday clinic planned for October.

## **13. PPGuk GDPR document**

Shortage of time meant that, on this occasion, this item was deferred to the next meeting. **Action: Andie, next agenda**

## **14. Surgery update**

Dr Carnegy announced that Dr Darren Thomas will be leaving the practice at the end of August to take up a partnership in Paignton. The surgery does not plan to recruit to this post at this time.

Regarding cardiology services, the ICB (Integrated Care Board) will be undertaking a review of cardiology provision as a whole. The practice will provide updates as more information becomes available.

## **15. AOB**

No further items were raised.

**The next meeting was confirmed for 8<sup>th</sup> October 2025, 5.30 to 6.45pm.**

**The meeting closed at 6.55pm.**