**The Cottage Surgery**

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**Patient Reference Group [PRG]**

**Minutes of the Meeting on Tuesday, 20.3.18 – 6.00pm at the Cottage Surgery**

1. **Attendance:** Present were Les Pole (Chairman), Claire Ayres, Marsha Blissett, Liz Shrives,

Karenna Galer-Coombes, Dr. Steve Clay (GP), David Harris (Assistant Practice Manager),
and Margaret Taylor (Secretary).
Apologies were received from Colin Brookes, Rod Hudson, Ann Irving and Sue Taylor.
The meeting welcomed Lucy Sheppard from the Clinical Research Network (CRN).

2. **Clinical Research Network**: Lucy Sheppard, a nurse researcher with the CRN, described the nature of

the network, the work it does and how patients and PPGs can be involved. The CRN East Midlands is one of 15 area CRNs covering the whole of England under the auspices of the National Institute for Health Research (NIHR). It delivers research across 30 different specialities and is funded by Government, Pharmaceutical companies and charities. CRN East Midlands is hosted by the University of Leicester NHS Trust and based at the Leicester Royal Infirmary. Health Research benefits patients, can help shape new practices and standards of care and is in the NHS constitution. Research is varied and includes medication trials and the development of new guidelines and care pathways. Patient involvement is completely voluntary and no patient confidentiality is breached. Trials can be initiated academically or commercially; CRN’s role is to work with surgeries to find volunteers.

In the discussion which followed we learned that the Cottage Surgery has been committed to involvement in research for some time, that the costs are covered by CRN and the invitation to participate comes via the surgery so that the researchers do not have identifiable personal details of patients. There are two types of study – in one, patients are recruited by advertisement and in the other suitable patients are identified by the practice and sent a letter asking if they wish to be involved. Contacts details for information or for signing up to studies include UK Clinical Trials Gateway at [www.ukctg.nihr.ac.uk/](http://www.ukctg.nihr.ac.uk/); Dementia research at [www.joindementiaresearch.nihr.ac.uk](http://www.joindementiaresearch.nihr.ac.uk)/, and for the sharing of experiences of involvement in research at crncc.comms@nihr.ac.uk or to read of others’ experiences at [www.crn.nihr.ac.uk/can-help/patients-carers-public/research-changed-my-life/](http://www.crn.nihr.ac.uk/can-help/patients-carers-public/research-changed-my-life/).

The meeting indicated its general encouragement for the research and thanked Lucy Sheppard.

3. **Minutes of the Meeting on 21.11.17**: The meeting accepted the secretary’s apology for the lateness of

 circulation of the minutes and, after clarification that the reservations expressed in item 9 about the NHS

 provision of wifi access for patients in all GP surgeries was on the grounds of the limited internet access

 and the costs to NHS, the minutes were approved.

4. **Treasurer’s Report:** There having been no financial activity the balance remains at £567.55.

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5. **Matters arising** not otherwise on the agenda:

a) Staff: We were glad to hear that a new GP has been appointed. She is Dr. Kishari Kulkarni. She will take two sessions, Monday and Thursday, at the Cottage Surgery and one Tuesday session at the Banks. The Secretary will send her an official welcome on behalf of the PPG.
b) South Charnwood PPG network: There has been no progress in setting up an ‘email network’ but we did receive notification about an awareness event organized by Quorn PPG on March 17th. Our PPG members living in Quorn had not seen notices about this.
c) Good Neighbours: Claire Ayres reported on the increasing activity of this scheme (report attached) and David Harris told the meeting that he spreads word about its value at every opportunity. Margaret Taylor suggested that contact with the Methodist church Friday open session might provide publicity and possibly volunteers.

6. **Access to Surgery and S106 money**: Brief mention was made of the publicity about possible building work and consequent Section 106 money. In the light of the uncertainty about this, the meeting expressed the hope that Ann Irving might keep us in touch.

 Dr. Clay told the meeting that there had been no change in regard to the Section 106 money already allocated by the council from previous building work. That money is still held by the NHS who are insisting on impossible conditions being met by the practice before they will hand it over. We agreed that, in the event of any future Section 106 money being allocated, the PPG could be involved in pressing the surgery’s case.

7. **Future actions for PPG**:

a) First Aid training: The meeting agreed to ask Sue Taylor to organize and lead another training session at a date convenient for her.
b) Awareness/education event: After some discussion it was agreed that, rather than hold an awareness event at the present time we would try to have a presence at the Woodhouse and Woodhouse Eaves May Day event.
c) Items for the surgery: There is an outside light at the entrance and it was felt that anything more might not be acceptable to the neighbours. David Harris was asked to consult Ann Irving about the type of carpet which might be suitable for the entrance.

8. **NHS local developments**: Margaret Taylor gave a brief report of the work in progress to improve the

pathway for patients undergoing an endoscopy. She also reported on the progress being made under Better Care Together/Sustainability Transference Plan to move services from secondary care to community hospitals, reassuring the PPG that patients would see a consultant there. Much has been achieved but more needs to be done. Dr. Clay and David Harris outlined the systems used for referrals and some of the difficulties faced.

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*NHS local developments – continued]*

The next WLCCG PPG Network meeting is on Wednesday April 11th. Margaret and possibly Ann Irving will be going but other PPG members were encouraged to go also if possible

9. **Patients’ feedback**: PPG members had heard many greatly appreciative comments about the care

given by all members of the surgery team. David Harris asked that people be encouraged to go on line to NHS Choices and communicate how good they think the Cottage Surgery is.

10. **Any Other Business**: a) In response to a question from Karenna asking about the referral of patients

 to cardiac exercise sessions, Dr. Clay said that he does make such referrals.

Margaret recommended that PPG members look at the LPT Yellow Book containing contributions from patients with mental health problems and also that they view the information in the on-line notes ‘In Touch with the WLCCG’.

11. **Next meeting**: The next meeting of the PPG will be on Tuesday June 12th at 6.00 pm at the surgery.

 Margaret Taylor (Secretary) 21.3.18