**Monkspath Patient Participation Group (PPG) Meeting and AGM**

**13th June 2017 at the Surgery**

Note: ‘SG’ indicates a member of the PPG’s steering group.

**Present:** PPG members who attended and signed in were: Vic Lloyd SG, Linda Shapcott, Ian Evans, Hala Evans, Ginny Lassam-Jones, Grace Ingram, Eric Ingram, David Page, Alistair McLachlan SG, Jane Carthew, Jean ???, MS Priestly, P Croft, and Michael Evans SG.

**Apologies**: Tony Green SG, Martin Tolman SG, Ros Allso

**Opening Address:**

Vic Lloyd welcomed all those present. He explained that he was deputizing as Chair for the evening, because Tony Green, the current Chair, was out of the country.

Vic then set out the Agenda for the evening:

First there would be a presentation by Teresa Scragg on the Sustainability and Development Plan (STP) for our footprint area. This would be followed by the Annual General Meeting. Finally, Rachel, the Practice Manager, would give an outline of a few changes affecting the surgery.

**1) Teresa Scragg**, (Senior Commissioner for Older Peoples Services from Solihull Council).

Teresa outlined the background to the Government’s requiring the NHS England to examine ways to improve the delivery/effectiveness of medical and care treatment and to find ways of reducing the financial deficits. NHS England has outlined 44 “footprints”, between them covering the whole of England, with each footprint containing about the same population, and required the care and health agencies in each footprint to create and agree a Sustainability & Transformation Plan (STP).

Our footprint includes the areas of Solihull Clinical Commissioning Group (CCG) and two other CCGs in Birmingham. The STP included an intention to merge the three CCGs. The Plan for BSol (this footprint) was overseen by Mark Rogers, who was then Chief Executive of Birmingham City Council, and submitted in Oct of last year. It had been reviewed by NHS England and while some parts received a good rating the rest of the plan was rejected and needs to be re-drafted to give more scope for public engagement.

Since then the issue seems to have gone very quiet and there has been no sign yet of when meaningful public engagement will start.

A question and answer session then followed.

**2) THE ANNUAL GENERAL MEETING**

**Annual Report:**

In the absence of Tony Green, Vic Lloyd read the Steering Group’s Annual Report:

***“Steering Group’s Annual Report July 2016 to June 2017***

*Report dated 13 June 2017 prepared by Tony Green, PPG chair 2015-17, on behalf of the steering group, and presented by Vic Lloyd, vice-chair.*

*The PPG normally has six meetings each year, on the second Tuesday evening of every two months, starting in February. Its June meeting includes an annual general meeting (AGM) at which members elect or re-elect a steering group (SG). The SG is made up of ordinary patients who’ve volunteered to help plan the meetings, contribute ideas and suggestions, and sometimes stuff flyers through letterboxes to advertise the meeting if we think its main theme is likely to interest a lot of patients.*

*Many other PPGs are ‘closed’ in that they have a fixed – often small - number of members and their chair can keep the same role as long as they like, which can be for many years. When other patients ask to join that sort of PPG, they are told that it’s full. And a closed PPG won’t let other patients know what it’s doing, in case that makes them want to join.*

***We don’t do it like that****: We don’t believe that any small group of patients knows all the answers: we prefer to involve as many patients as possible, because all of us are wiser than each of us. So, as many of you know, we run an open PPG: any patient of this practice can join it by turning up to any of its meetings and/or by asking at any time to be added to its communications list, which numbers over 100. And we don’t allow anyone to remain chair “for life”. They must quit that role after two years, to enable someone else to do it and bring in new ideas and talent.*

*At the beginning of the year the SG members (in alphabetic order by family name) were Eddy Ankrett, Michael Evans, Tony Green (Chair), Ginny Lassam-Jones (Secretary), Vic Lloyd (Vice-Chair), Alistair McLachlan, David Perry, Jean Thomas, and Martin Tolman (Treasurer). During the year Eddy, Ginny and Jean left the Steering Group, so its current members are Michael, Tony, Vic, Alistair, David and Martin. We are always keen to welcome new SG members.*

*We act as a ‘critical friend’ to the Practice and believe the Practice does a great deal of good: we appreciate that the Practice Manager and sometimes also a GP attend our PPG meetings, and the Practice Manager is always welcome to attend the SG’s meetings as well. We are grateful for the wide range of help the PPG receives from GPs and surgery staff at all levels.*

 *We always try to get an expert speaker on a requested health topic but where no expert is available we do it. This year six out of nine presentations were prepared and delivered by patients, and three by experts.*

*The six topics covered by patients were* ***Lyme Disease*** *(Tony);* ***How to become a member of HEFT*** *(Sandra White);* ***Liver Disease*** *(Tony);* ***Antiphospholipid (“Sticky blood”) Syndrome*** *(Phil Godfrey – patient from another practice);* ***A new way of running meetings*** *(Alistair); and, because a top speaker had cancelled at the last minute, a hurriedly-prepared talk on the* ***Sustainability & Transformation Plan*** *(Tony on behalf of all steering group members).*

*The other three were by NHS or Care professionals:*

***Eye Problems & surgery*** *(Mr Ramesh Sivaraj, consultant eye surgeon;* ***Cardiac Arrest, CPR and use of Defibrillators*** *(Andy Jeynes, Community Response Manager, West Midlands Ambulance Service); and today* ***The Birmingham & Solihull Sustainability & Transformation Plan (BSol STP) & the feedback received on it from NHS England*** *(Teresa Scragg, Senior Commissioner for Older Peoples Services, Solihull MBC).*

*Copies of presentation slides are sent out with the draft notes/minutes, and both the slides and the approved notes/minutes are eventually put on the PPG web page on the Surgery’s website so anyone with Internet access can download them from there at any time.*

*We’ve just begun exploring whether and how best to set up our own PPG website, and will keep members informed as this develops.*

*Financial matters: Yet again we’ve had a perfect Treasurer, since our income, expenditure, reserves and debts exactly matched, at zero!*

*Our PPG has more patients attending our meetings than does any other PPG in Solihull. Our previous highest attendance record was 43 in 2015, but in February this year we had an estimated 50, which we could only fit in by holding the meeting in the reception waiting room. That concludes the Steering Group’s report.”*

**Constitution:**

There was a proposed amendment to the Constitution. This entailed relaxing the rule about the cap of two years on all Officers of the SG (Steering Group) - with the exception of the Chair, where the two year cap would continue. Also the bar whereby Officers could not stand for re-election after two years would also be withdrawn except in the case of the Chair, who would be eligible to stand again for the Chair, after a further two year break. These alterations were put to the floor and approved with one vote against and no abstentions.

This revised Constitution will therefore take immediate effect.

**Election of Officers:**

The Constitution provides for 10 elected SG members, with an option for the temporary co-option of additional SG members thereafter.

All SG members automatically stand down at the end of the year, but can stand for re-election.

 It was noted that:

1. Dave Perry had offered his resignation, due to family commitments.
2. The remaining 5 Officers all signified their willingness to stand again.
3. Sharon Wade had indicated her willingness to join the SG.
4. Ginny Lassom-Jones and Eddy Ankrett, previous SG members, had notified their willingness to re-join the Group.
5. It was put to the floor that these eight people be confirmed as members of the Steering Group. This was unanimously adopted. This Group will now, in a timely fashion, convene a meeting to elect the various Officers.

Vic also asked if there were any other volunteers who would like to join the SG. There were no takers.

**3) Rachel Critcher**, ( Practice Manager): Informed the meeting that a consortium of local GP practices in the Solihull area were exploring the possibilities to develop a loose partnership that might improve the quality of service available to the patients and reduce some duplication of costs. This partnership was designated The Solihull GP Alliance, or SGPA for short.

The changes that might result included the possibility of 7 day availability for appointments. However this would be achieved by the participating surgeries working a rota, whereby the doctor(s) on weekend call would reduce their weekday coverage. This availability would necessitate further travelling in some cases, for patients.

Another change was a review of the current systems of automatic prescription renewal for patients with chronic conditions. It seems that this waste a considerable amount of money in unnecessary dispensing of medication.

During the follow-up questions it was observed that in some ways this was a mini-pilot of what the STP was tackling.

**Close**: Vic again thanked everyone for attending and reminded them that if any members weren’t currently receiving emails from Monkspath PPG then they should leave their contact details. Vic also reminded everyone that the SG was still looking for two more members.

The meeting closed just before 8.30.

 Minutes taken by Alistair.