Minutes of Mountwood PPG Meeting 20th March 2025

Present: Susan Smee; Stefan Sieradzki; Caroline Field; Jeremy Stern; John Grossman; Mary Egan; Shami Devani; Colin Berthelsen (chair)

Apologies; Jan Choopani; Ginny Nevill; Gerry Kurzon; Sharon Pink, Dr Liz Hermaszewska.

1. In the absence of Dr Liz and any updates being available, concern was raised about the ‘Patient Talks’ and where we were with the next presentation and onward bookings. The general feeling was that the PPG should be running the program and not Dr. Liz. The common factor appears to be when a new contact for the provision is found and they are in a position to offer presentations across a range of different topics and Dr Liz becomes involved any form of control is lost to the PPG.
2. Chair put forward thoughts about the current way the PPG were mandated regarding officers and members. Currently, the position of Chair; Deputy Chair; Secretary and Treasurer hold the positions of officers. However, the position of Treasurer is effectively defunct because PPGs are not meant to hold bank accounts or cash). If through fund raising exercises money is raised it should be handed over directly to the Practice

2a The new approach being that member who had the time, interest and

 skills, might consider taking-on responsibility for running (with or without other

 members) discreet areas of the regular PPG activities e.g. the patient

 presentations, finding speakers, liaising with the practice as to suitability of

 subject matter and date/time of presentation. On the day liaising with the

 speaker regarding their requirements for presentation aids and room set-up,

 plus ensuring sufficient support personnel are available to manage the event,

 taking into account the Health & Safety aspects and PPG recruitment

 possibilities (an outline attached to minutes). Jeremy asked various questions

 and requested further information be circulated. No one stepped forward at

 the meeting to take on such a task. Other areas include: -

2b Technical PPG marketing support liaising with Simon Roberts in his Practice

 support role for Mountwood, website & TV in waiting room. Other areas that

 could be included or kept separate are the PPG notice board in the waiting-

 room and the PPG pamphlets and other marketing material.

2c Recruitment of PPG new members is difficult with the data protection act and

 limited PPG / Practice budget, however, with the possibility of a new system

 based around email contact, this could provide an opportunity via the Practice

 to promote the PPG, However, from the last few years of history, patients

 interested in joining generally want more than just attending a monthly

 meeting i.e. they want to get actively involved – the patient talks being a prime

 example.

2d External information gathering to keep in touch with events outside of

 Mountwood, which can provide the opportunity to be proactive rather than

 entirely reactive. Sources include the NAPP and similar organisations which

 you join and they provide a better source of information that the NAPP

 nowadays. In addition you have ‘trade papers’ i.e. magazines that specialise

 in GP matters with limited non membership status and of course national

 press, plus www. Lastly, there is the Practice PPGs within the PCN that can

 sometimes provide information that is not readily available via other sources.

1. A.O.B.

3a The subject of Patient feedback was raised and the fact that formal

 complaints always went to the Practice Manager. However, as the PPG did

 not have their own email address there was no vehicle for patient concerns to

 be made known to the PPG. Sue mentioned that a friend in Essex had

 informed her that some patient complaints were handled by their PPG, which

 the chair thought would have been the exception rather than the rule as

 formal complaints could lead to loss of licence. However, it was generally

 agreed to be a pity that PPG were not able to receive direct patient contact

 and comment as PPG members via relatives, friends and neighbours do

 already get approached and it was deemed a missed opportunity for such

 contact with patients not to be available. The PPG could keep a list of patients

 comments and when say ten patients in a three-month window had the same

 concern, this information could be fed back into the practice. At present, apart

 from feedback from staff answering the telephone and receptionists on the

 front desk, it is unlikely that short of a largescale patient questionnaire being

 sent out, the depth of feeling on different issues would not get highlighted.

3b Jeremy asked about the Family & Friends and also the Telephone System

 Chair responded informing him that and the figures used to be given to the

 PPG monthly and included in meeting minutes and I (Colin) had suggested

 that the information was better placed on the Mountwood website as a lot

 more people look at the front page compared to the PPG Minutes which have

 to be sought out. As a ‘belt and braces’ solution I respectfully suggest that

 whosoever complies both the F&F data and that of the telephone system

 makes such data available to the PPG on a monthly basis as this will help

 ensure that up to date information is always available to patients.

The date of next meeting is 24th April 2025 @ 2.30pm.