



Saturday 25th January 2025; 9.15am – 10.30am Helme Chase Surgery, Upstairs Waiting Room

Chair: Philip, David, Patient Group Members Minutes: Dawn Bonham (DB), Debra Jones (DJ)

Present: Dawn Bonham (DB), Debra Jones (DJ), Victoria Taylor (VT), Donna Reed (DR), & 18

Apologies: patient group members

	Preliminary Business			
1)	Welcome & Introductions	As above		
2)	Apologies for Absence	As above		
3)	Minutes of the	Agreed		
	previous meeting			
	dated 19 th October			
	Actions from Previous Minutes			
	Action	Notes	Update	Action
4a)	Medication/Dispensing	This has been raised with Partners/Managers and the Dispensing team. The process is being	DB & DJ noted that we	Completed
	post discharge	checked so that medication gets dealt with in a timely way. Discharges are often sent	are monitoring for	
		electronically but sometimes the hospital secretarial team are a bit slower than a patient would	future & useful to	
		expect	have specific cases to look at.	
b)	Issues around timely	This was around a specific case which was investigated and the matter concluded.	DJ noted that the	Completed
	reporting of		matter had been dealt	
	investigations		with, with the	
			relevant patient	
5a)	Short Guide to talk to	DB thanked patient group for their help, patients shared that they found it very helpful.	Finalised, now on	Completed
	your Care Navigator	Patients commented that they preferred the A3 format of the newsletter.	website/social	
			media/newsletter	
		Patient Group Member would like some printed copies to share.	DR to investigate.	





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5b)	Leaves/leaf blower and flu/covid parking Standing Items	DJ shared that staffing a leaf blower would be a struggle. Practice have purchased a salt dispenser which is great. DJ likes the suggestion of having marshals for parking during covid/flu clinics and will consider it for next year if it can be staffed. Patients highlighted that advertising for PCN covid/flu clinics at J36 doesn't make reference to the fact that its for eligible patients only.	DJ will share feedback with PCN	Completed
	Item	Notes	Action	Responsible
6)	Practice Update	 Staffing: 70 members of staff on payroll currently although not all FTE. Patient list size approx. 17,500 which remains pretty static. 30-35,000 patients across Kendal. PC shared 'year in numbers' graphic completed and shared by the practice to illustrate work Telephone number & system changes Settling in, 2 months in and going fairly well. Patients are getting used to the new number, Few snagging issues experienced but mostly around technical equipment. New 'call back' feature has been well received. Patient shared that it hasn't prompted recently. 	DB to investigate	VT to investigate
		 Appointments Update DJ shared that practice have invested in some new software 'bubbles' for the Care Navigator team. Designed to standardise care and help the team, will help with training. Ensures pathway should be the same regardless of which Care Navigator a patient speaks to. Rolling out soon. In March, practice will be starting a new triage system with a GP sat alongside the care Navigators in the phones room. GP will take the call if needed and can assist if needed. Will be starting to have more clinicians in on a Monday, our busiest day. 	Update at next meeting	DJ/VT to update at next meeting





7)	Patient Feedback	 The I Want Great Care report for December was shared with the PPG – DB noted that 'not having enough appointments' is a common theme. Members of the practice team reflected on how useful the feedback is, and that it is always shared with those involved. Negative feedback is productive. A member of the patient group shared that Urgent Treatment Centre have 'grumbled' when having to fit patients in to remove stitches. DJ shared that the practice did respond to similar feedback months ago and added more of those appointment types. Patients reflected that similar 'grumbles' have been experienced with blood tests. DJ shared that there is a Community Diagnostics Centre at Heysham which is designed to help GP Practices, a new centre at WGH is just scanning at the moment but there are more services to come in the future. 		
	Main Agenda Items Inter		1	
8a)	AGM – New PPG Format – Core Group – Signing CD	 DB reflected that there is an initiative to make PPGs more formal and include things like confidentiality agreements for core group members, following CQC guidance. DB thanked PC on behalf of the practice 	VT to email patient to confirm that they have signed the agreement.	
8b)	New chair	• PC handed over to the new chair, DS.		
	appointment	• DS introduced himself and the group welcomed him.		
	Items Raised by Patient Group Members			
			Action	
9a)	Closure of wards at WGH	• DJ noted that the practice have no control or involvement, and no advanced information.		
9b)	Litter	• Bin outside HC entrance is emptied by the cleaning team each evening. Acknowledged it is used by visitors to the surgery, Kinta House and Well Pharmacy, and members of the		



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9c) 9d) 9e)	Parking Blood Donation First Contact Physio at Helme Chase?	 public. DJ acknowledged the practice is not a closed site and cannot govern its use any more than we do. Group acknowledged car park is busy and a bottle neck can form. Car park is used by visitors to the surgery, Kinta House, Well Pharmacy, and members of the public. Disabled parking bays are offered, staff car parking is limited and monitored. Have explored shared spaces with other Kendal practices before, but didn't get further. Acknowledged practice used to receive blood donation advertising materials. VT to investigate, advertise in waiting areas and on social media. DJ shared that currently there is no capacity/room space at Helme Chase to accommodate First Contact Physio's. 	VT to advertise	
Concl	uding Business			
			Action	
10	AOB and Closing remarks	 Group thanked PC and DS Minutes will be circulated once VT returns to the business and gets caught up 	VT to circulate minutes	
Next	Meeting			