

## Strachur Patient Participation Group Draft Minutes of Meeting held on 3 March 2014 in Dal-na-craig Surgery

**1. Present:** Heather Grier- St Catherines and Chair

Anne MacLachlan - Practice Manager -Strachur Medical  
Practice

Dr R Coull, Principal

Ian Asher, Margaret Asher, Isobel McGladdery, Margaret Swift, Nan Costorphine,  
Margaret Palmer –Brown, Lindsay Walker and Elizabeth McGladdery.

**2. Apologies:** were received from:

Alison McCrossan, Scottish Health Council  
Sarah Bryant

Heather welcomed all.

Topic	Action
<p><b>3. Minutes of the last meeting:</b></p> <p>The pre- circulated minutes were read and approved.</p> <p><b>4. Matters arising:</b></p> <p>Heather advised that she had spoken to and written to Eddie McKechnie, a solicitor with a home in St Catherines, asking for assistance in getting a speaker on Power of Attorney. Regrettably no reply had been received. Suggestions were put forward about contacting Ewan McDonald of Stewart and Bennetl or Elsbeth Black from Corrigal Black, both based in Dunoon Practice Plan to be discussed separately</p> <p><b>5. <u>Reshaping Care for Older People (RCOP) and Self Directed Support (SDS)</u></b></p> <p>Heather advised the Group about work currently going on with a programme of Joint Commissioning with the Health Board and the Local Authority on RCOP and SDS. On asking the Group if they were aware of these programmes, and the Scottish Governments Bill on Health and Social Care Integration, only one member was aware of these.</p>	<p style="color: blue;">Heather to contact</p>

Heather explained she was involved in the RCOP communications and engagement group and advised she had expressed her concerns at meetings about the level of public involvement, communication and engagement on these new plans being written jointly for implementation. Heather confirmed that there were government guidelines under CEL 4 2010 which laid out the process of engagement.. Heather suggested whilst these government strategies may not impact on any of the group members currently, they may inevitably have impact on us all, and therefore the voices of the 'end users' needed to be heard now. Heather asked if the group would be interested in hearing from speakers on these and all agreed that would be worthwhile. Anne asked if we should open the meetings to the wider patient group. Heather suggested it may be better to brief the group first so they are in a position to answer questions. Heather also suggested that the best methodology for communication and engagement was for us to go out to joint smaller groups such as lunch club, SWRI, etc where a more informal environment was best suited to talking and engaging. This was supported by the members.

Heather to arrange speakers for future meetings

## 6. First Responder Scheme

Anne reported that she had visited the Glasgow joint HQ of the Scottish Ambulance Service (SAS) and NHS24. During the visit she tracked a case and saw where First responder's fitted into the support network. Questions were asked about their presence at a Road Traffic Accident (RTA) but Anne explained the training which is more focused on CPR and using a defibrillator. Anne said the surgery staff had been trained as part of their job and were willing to participate in such a scheme. Heather advised at least 8 volunteers were required. It was agreed to try and re-launch for interest in setting this up for our community.

Anne to launch for more volunteers

## 7. Inveraray

Dr Coull referred to the press article in the local paper. Lindsay asked if the reporting was accurate and this was confirmed.

Dr Coull said the purpose of working with the Inveraray Practice was to ensure a strong network which would make both practices more sustainable. It was a well-known fact there are issues of sustainability in the rural areas and the bid presented would have addressed that. As part of his FOI request to the Health Board, a paper was produced written by NHS Highland on Health and Care Services in Remote and Rural Areas. This document seemed to indicate a plan where the Inveraray Practice was part of a pilot scheme linking the community hospital in Mid Argyll to outlying surgeries. Heather asked had he been aware of this when negotiations were being discussed on his bid and he said no. Heather advised she had read the time line of events from the first interest in 2012 until more recently and based on the data available, she had a concerned on the transparency of the process.

<p>Heather questioned public involvement, communication and engagement regarding this process and felt more information should be sought in that aspect.</p> <p>Dr Coull advised the matters was now in the hands of lawyers and at the Court of Session.</p> <p>On staffing Dr Coull advised Dr McCulloch had delivered a baby boy.</p>	
<p><b>8. Future Items</b></p> <p>It was agreed to keep RCOP, SDS and Health and Social care Integration on the agenda as they come into force.</p>	
<p><b>9. Any Other Competent Business (AOCB)</b></p> <p><b>Bloods:</b> Heather asked if the problem with bloods and patients having to have several samples taken before accepted by RAH. There is a direct Royal Mail uplift direct from the surgery at 4.00pm. Issue is a Friday as samples don't get death with until a Monday. Heather asked if there was not an NHS vehicle passing the door and it was confirmed there was.</p> <p><b>Communications:</b> Anne distributed the first newsletter. All liked the layout etc. Anne compiling the data for the 14 year olds and 56's. Anne confirmed she would be seeking advice on the format of communications with the 14yr olds. Sister Paton would be dealing with the MOT's for the older group.</p> <p>There being no further business the meeting closed at 9.30. Thanks was given to Dr Coull , Anne and all for attending.</p>	<p>Heather to speak to CCH re the Friday Issue.</p> <p>Anne to seek guidance from Alison McCrossan, SHC.</p>
<p><b>5. Date, Time &amp; Venue of the Next Meeting</b></p> <p>The next meeting is scheduled to take place <b>on Monday 28 April 2014 in the Surgery at 19.30.</b></p>	