Patient Participation Group Minutes

Tues 23/05/2023.

Attendance:

PPG: Brenda Bell, David Bell, June Green, Alice Burns, Sharon Conroy, Sue

Atherton (vice-chair), Gail Johnson, Lesley Wells (Chair), Marion Hall

Surgery: Angela Maine (Practice Manager), Steph Allsebrook (Reception)

Apologies:

No apologies

Minutes from previous meeting:

The minutes from the previous meeting were agreed.

Matters arising and Actions:

Item	Action	Who	Date	Status
Consent Forms	Consent forms to be completed	Members of the PPG	23/5/23	Complete
Contacting the surgery	Implement a call back process	Surgery	July 2023	In progress
New equipment	Install new weight and height monitor	Surgery	No date as yet	Pending
Membership of NAPPG	Add local members of PPG to NAPPG	Angela	No agreed date	Pending
Introduction of Doctors	Consideration of whether to introduce Doctors to PPG	Angela	No date agreed	Pending
Cleanliness	Practice to investigate cleanliness of doors	Angela	No date agreed	Pending
Patient contact	Review of standard message texts	Admin / Clinical team	No date agreed	Pending
Patient contact	Ensure team consider the patients understanding of bespoke text messages	Admin / Clerical team	No date agreed	Pending

Agenda item - Consent Forms:

Consent forms from the PPG are required to

- share e-mail details with other members of the PPG
- have members name on the minutes of the meeting
- be added to the Nationals Association for Patient Participation.

Some consent forms have been returned and the remainder completed and returned by the end of the meeting.

Agenda item - News from the practice:

Dr Mbah is now a partner in the practice along with Dr Huseen and Dr Shaw Dr Batra is now working reduced hours

There are additional doctors on Friday Afternoon – Dr Abdalla and Dr Kumari

There are two practice pharmacists that perform medication reviews – they are not prescribing medication directly currently.

There is a practice nurse and health care assistant, but no Nurse Practitioner at the surgery.

Reduced requirement for Locums – the intention is that patients get to know their doctors

The practice team should be here and stable for the foreseeable future. It is hoped that the younger members of the team can bring new ideas into the practice.

There has been a change to appointment booking process – there are 30-50 triage appointments available on the day and some appointments are pre-bookable 2 weeks ahead. Some are available on-line and some via telephone.

The triage list is reviewed in the morning and any appointments that need to be F2F rather than telephone are passed to reception to contact patient and make appropriate appointment.

There is currently an even split between telephone and face to face (F2F) consultations.

The practice is looking to implement a call back system – Target is July 2023.

Currently there are 6,100 patients on the practice register.

A new Healthcare monitor (in the foyer) is being provided by PCN to measure height and weight, this should be automatically connected to the practice systems. No firm date as yet.

Saturday morning opening is generally for pre-booked clinics such as smear tests, steroid injections, vaccinations etc.

Bloods will continue to be collected at the hospital. Attempt to do so at the surgery for the over 50s resulted in flooding the appointments and was therefore discontinued.

Agenda item - Ideas going forward:

The purpose of the group is to be the voice of the patient to the practice and the voice of the practice to the patient.

The practice can add about 10 members of the committee to the National Association of Patient Participation Groups. The National Association has recommendations on activities and remit of local PPG groups. Agreement to be added to this association is on the consent forms. Angela will add as appropriate subject to numbers.

The suggestion that the doctors are introduced to the group was made – with acknowledgement that they are busy. Direct feedback from the group may be beneficial.

Previous speakers to PPG were beneficial in educating PPG members but were not perceived to be of direct benefit to the surgery.

Video calls were suggested as a compromise between F2F and telephone appointments. Potential future idea.

Agenda item - Any other business:

The cleanliness of some of the doors was raised. Investigation by the Practice Manager.

There was a discussion about the communication from the practice to the patient and that these are sometimes unclear. Whilst it is appreciated that the processes are very efficient and work very well, it is understood that the communication back to the patients need review to ensure they are clear. Some specific examples include:

- Blood results with the acronym NAD patients would not necessarily understand what that means
- Advice to patient to start taking Vit D with no advice on dosage and length of treatment
- Orders of prescription not expected by patient

Some texts are automatic and some are bespoke. The practice will review all standard texts and more consideration given to the text of bespoke messages.

Next Meeting

September 12th !8:30.