PPG Meeting – 16.01.24

Practice Updates

- June leaving replacement with Hayley
- Two new receptionists Eva and one TBC, new receptionist will allow space for the practice to move Hayely into Health care assistant role which should reduce appointment pressures.
- Additional winter pressure GP appointments available with Dr Taylor routine and emergency

PCN Updates

- Social prescriber in position update in newsletter. PPG expressed that this service sounded like a good addition to the current offering and would like some further prominent information regarding this in the newsletter.
- Additional weekend appointments to assist with winter pressure.
- Increased home visit offering from paramedic and advanced practitioner.
 Discussed the home visit process for the practice, the practice holds a list of housebound and temporarily housebound patients for whom visits are appropriate. All visit requests are triaged by a GP to ensure the most appropriate clinician attends.
 For appointments with the PCN advanced practitioners, the Practice can book patients directly into this service, or patients are able to contact the hub themselves, however the preference would be for patients to contact the practice to ensure appointment requests are triaged correctly and appointments with advanced practitioners are booked with issues within their competencies for safety purposes.

OATH update

PPG member attending research/meeting regarding Optimising Access through Human Fit – this discussed the expectations patients and practices and how patients and practices can work together to manage and meet these expectations. This piece of work is being conducted as part of a research project from a local GP. Unfortunately, the meeting was poorly attended. Meeting invite was made known by PPG member to VT and was circulated when received.

VT discussed this meeting was not something the practice had prior knowledge and could have easily been missed if not sent as a meeting invite. PPG members unable to attend at short notice and VT also discussed it can be difficult to take a member of the practice including management away from the team for 2-3 hours in times of increased demand/staff issues etc. Discussed that hopefully for the next meeting we can share the invite with plenty of notice and hope to send a member of the practice team as there are certainly benefits/ideas that could come from the meeting of other PPGs and practices. The Practice and PPG member are yet to receive formal feedback or next meeting date from the OATH group.

AOB -

Online consultations –

Responses sent to patients as per the number provided, if there is a notification that messages have not been delivered, followed up by phone-call to alt. number or letter. PPG member did not receive message sent from practice. VT has logged with the provider for awareness of any issues. Automated submission message on the online consult system has

also been updated to say if you have not heard from the practice within 72 hours to contact the practice.

Complaints/Personal Issues -

Practice requested that personal complaints/issues are not discussed at PPG meetings – we discussed that it can be difficult to comment on individual care and this is why it is requested not to raise complaints during a meeting. However, it is agreed that first hand patient experience is important in order for the practice to receive feedback and make changes. Action to be that if problems arise, these should be raised with VT prior to meeting for matters to be looked into without delay and changes made if required. Where appropriate can be discussed and minuted in the PPG meeting following.

Doors

Front door and pharmacy door automation not working – VT will check, may just be setting on doors

Website hits

Unable to see how many times the document accessed but unique website hits:

Sept 7517

Oct 7263

Nov 12384

Dec 8075

Agreed to continue to use website for key updates as promising figures from unique website hits.

- Shingles

Discussed the criteria for shingles vaccinations and the confusion it could cause. VT will look at amending website to try and make information clearer for patients.

Newsletter:

- Layout read across rather than down
- Joining PPG discussed inviting as come along, VT discussed the purpose of a PPG is not a complaints forum hence the statement of this and the benefits of discussing this with each new member if there was no prior communication between patient and practice. For new members, VT sends information sheet and demographic questionnaire which states what a patient can expect from a PPG meeting and its purpose. Also issue could be accessibility if patients did turn up as all members are made aware that at the moment the meeting is held upstairs face to face but can be virtual too, if a online meeting is required this would be set up beforehand.
- PPG requested something more fun in the newsletter on the text included when sending the newsletter, the practice does ask patients if there is anything they would like to see to let us know. VT has asked for PPG input for further newsletters if there is something they would like to see. Draft is sent to all members before shared with all.
- -Discussed adding information regarding the phone call back system on the next letter it was highlighted there have been issues with the queuing system, VT aware of this and practice has put own processes in place to avoid the issues and also raised with telephony provider.

Social media

Instagram – VT to follow up with GW.

Prescriptions from hospital

Discussed process of letter received, reviewed by clinical pharmacist and medication added to acute or repeat medication dependent on monitoring required/length of treatment etc. Issues can arise when letters aren't received from the hospital. Practices have ongoing

discussions with the trust regarding post and printed letters vs the electronic delivery system which is much more efficient.

Date of next meeting – 2nd April 10:30