



**MEETING:** Patient Participation Group  
**DATE:** Monday 25 March 2024  
**TIME:** 6.30pm  
**VENUE:** Meeting Room, Mayford House Surgery

### RECORD OF MINUTES

#### Persons Present

Nicola Tallentire (Practice Manager) **NT**  
Dr Ambar Duree (General Practitioner & Practice Partner) **AD**  
Three substantive members of the PPG were also present.

Para. No.		Action Owner
<u>1</u>	<b><u>Welcome and Introductions</u></b>	
1.1	The Chair welcomed everyone present to the meeting.	
1.2	Nicola Tallentire introduced herself to the PPG having joined the practice on 26 February 2024.	
<u>2</u>	<b><u>Apologies for Absence</u></b>	
2.1	Josh Parker-List ( <b>JPL</b> ) (Assistant Practice Manager) and three substantive members of the PPG had tendered their apologies for absence.	

<p><b>3</b></p> <p>3.1</p> <p>3.2</p> <p>3.3</p> <p><b>4</b></p> <p>4.1</p> <p>4.2</p> <p>4.3</p> <p>4.4</p> <p>4.5</p> <p>4.6</p> <p>4.7</p> <p>4.8</p> <p>4.9</p> <p>4.10</p>	<p><b><u>Minutes of previous meeting dated Tuesday 12 December 2023</u></b></p> <p>These had previously been circulated.</p> <p>The Chair asked for one minor amendment to be inserted into the previous minutes. Namely: Minute 9.2 should refer to <b>CC</b>, not RC.</p> <p>The remaining minutes were agreed as a true record of the meeting.</p> <p><b><u>Matters Arising from previous meeting.</u></b></p> <p><u>Minute 4.1 – Surgery Touchscreen</u></p> <p>A question was asked whether there had been an improvement in check-in processes, where previously it had been raised that some patients were not informing staff of their arrival, especially where a queue existed around the reception desk.</p> <p>NT and AD were not aware of any ongoing issues with this since the signage was installed.</p> <p><u>Minute 6.5 – Website Feedback</u></p> <p>This will be carried forward to the next meeting and will form an agenda item.</p> <p><b>ACTION: Update on feedback acquired.</b></p> <p><u>Minute 6.6 – Telephony Feedback</u></p> <p>Some PPG members reported they had conducted ‘mystery shopper’ audits of the telephony service with positive results.</p> <p>However, <b>AD</b> updated the PGG to advise that a brand new, cloud-based telephone service will be going live within the practice on Wednesday 27 March 2024.</p> <p>This new system was designed to provide additional performance data and lead to a better patient experience. However, there would be no obvious difference to the call handling structure from the caller’s perspective.</p> <p>AD asked that PPG members wait approximately 6 weeks (w/c Monday 6 May) to carry out further ‘mystery shopper’ reviews on the caller experience, as this would allow time for any snags to be fully ironed out.</p> <p><b>ACTION: PGG members to conduct random reviews from 6 May onwards.</b></p>	<p><b>JPL</b></p> <p><b>PPG</b></p>
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4.11	<u>Minute 6.7 – e-Consult Navigational Tool</u>	
4.12	This will be picked up alongside Item 4.5 at the next meeting. <b>ACTION: Update to be provided on e-Consult navigation tool.</b>	<b>JPL</b>
4.13	<u>Minute 9.1 – PPG Noticeboard</u>	
4.14	The noticeboard is still in development amongst a full refresh of all information boards within the waiting room/reception area.	
4.15	<u>Minute 9.2 – Children’s Play Equipment</u>	
4.16	<b>AD</b> advised that toys and other equipment to keep children occupied will not be returning here or at any other practice due to infection control measures.	
4.17	It was agreed that the onus was on the accompanying adult to bring something appropriate.	
<b><u>5</u></b>	<b><u>Practice Update</u></b>	
5.1	<u>Staffing</u>	
5.2	On 18 April 2024, Dr Anita Mercer will join the practice.	
5.3	Three weeks ago, Rachel Williams joined as a new Health Care Assistant ( <b>HCA</b> ).	
5.4	On 15 April 2024, Kelly Sharp will also join the practice as a full-time GP Assistant. The initial priority will be to undertake administration that GPs normally carry out, such as getting in touch with a patient when results have been received and generating follow-up appointments etc. This is a new role, so the responsibilities will be developed over time, but it is intended to take a lot of pressure away from the GPs.	
5.5	This role will also dovetail with the HCAs and Social Prescribers	
5.6	On 22 April 2024, Rachel Morris will join the practice as a Clinical Research Assistant. This is another new role following on from the practice being awarded the opportunity to take part in a clinical research project alongside Mowbray House Surgery. Rachel will also provide much needed support to Dr Mitford.	
5.7	Interviews are soon to be conducted to recruit a Dispensary Assistant on a fixed term contract, following the Team Leader’s current maternity leave absence.	
5.8	Finally, a new Practice Nurse is soon to be appointed, but the recruitment process is not yet fully complete.	

<p>5.9</p> <p>5.10</p> <p>5.11</p> <p>5.12</p> <p>5.13</p> <p>5.14</p> <p>5.15</p> <p>5.16</p> <p>5.17</p> <p>5.18</p> <p>5.19</p> <p>5.20</p> <p>5.21</p> <p>5.22</p>	<p>These latest appointments serve to bring the practice staffing up to the desired level, and ensures it is well placed to provide the highest levels of prompt and efficient service.</p> <p><u>Covid Vaccination Programme</u></p> <p>The Covid spring vaccination programme is to commence from 17 April 2024 onwards.</p> <p>Care homes will be the first priority, followed by in-house patients who are over-75 and those who are immunosuppressant.</p> <p>The practice doesn't yet know exactly how many vaccinations it will receive, and of what type, but a lower take up is expected. This programme will be followed by another round in autumn alongside the influenza vaccinations.</p> <p>The spring programme will involve at least two full Saturday sessions and is scheduled to run until the end of June 2024.</p> <p>However, it is not anticipated to run quite as far as the end of June, as a wait of 12 full weeks is required between the spring Covid jab and the autumn influenza jab.</p> <p><u>Practice Mission Statement</u></p> <p>The practice is trying to update its Mission Statement and gathered ideas at the most recent staff meeting.</p> <p>The current Mission Statement and a separate document of ongoing suggestions will be circulated to PPG members for their contributions.</p> <p><b>ACTION: PPG to review Mission Statement and submit suggestions.</b></p> <p><u>Community Mental Health Services</u></p> <p>NT circulated a paper forwarded by Zoe Battersby, Locality Development Manager from the ICB, which gave details of "Community Mental Health Transformation", where organisations from across Hambleton and Richmondshire are coming together to support mental health issues in local communities.</p> <p>The ambition is to have 10 pop-up sites across Hambleton and Richmondshire, supported by virtual and phonline infrastructure to enable timely access to support.</p> <p>This support will also include wider health and social issues such as housing support, social care, substance abuse, debt management, and other challenges that can affect mental health.</p>	<p>NT</p>
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5.23	The Steering Group has identified values that should be represented through the name and visual identity, and are looking for members of the local community to design and name the mental health support network.	
5.24	It was suggested the group contacts local schools, the Darlington & Stockton Times, the local Citizens Advice Bureau and job centre.  <b>ACTION: NT to put forward these suggestions to Zoe Battersby.</b>	<b>NT</b>
5.25	<u>Reception Noticeboard</u>	
5.26	Content suggestions were sought for the noticeboards in reception.	
5.27	These will provide information on topical issues such as measles, but ideas on additional and relevant material were required.	
5.28	It was suggested that sometimes less is more, and too much material can become counter-productive when seeking to highlight intended topics. This will be borne in mind when rotating the content.  <b>ACTION: PPG to submit suggestions for noticeboard content.</b>	<b>PPG</b>
<b>6</b>	<b><u>Any Other Business</u></b>	
6.1	<u>Satisfaction Texts</u>	
6.2	A question was raised to query who reviews the feedback received after texts are sent to patients as part of a small satisfaction survey.	
6.3	<b>AD</b> advised that these are ICB generated texts, but she will ask that <b>JPL</b> provides an update for the next meeting.  <b>ACTION: Josh to provide an update for next meeting.</b>	<b>JPL</b>
6.4	<u>Virtual PPG</u>	
6.5	A question was asked to establish how well the Virtual PPG was operating. Whilst we understand there were close to 70 patients who were invited to participate on a Virtual PPG, as an alternative to becoming substantive members of an already fully complete PPG, the meeting was not aware of any physical involvement or participation beyond that.	
6.6	Minutes were to be circulated to the Virtual PPG, and ideas and input were welcomed, but there had been little tangible evidence of any formal activity.  <b>ACTION: Update to be provided on status of Virtual PPG.</b>	<b>NT/JPL</b>

<p>6.7</p> <p>6.8</p> <p>6.9</p> <p>6.10</p> <p>6.11</p> <p>6.12</p> <p>6.13</p> <p>6.14</p> <p>6.15</p> <p>6.16</p> <p>6.17</p> <p>6.18</p> <p>6.19</p>	<p><u>Text Communications</u></p> <p>Concern was raised surrounding the form of words used in recent texts sent to all patients when the practice was undergoing periods of high demand.</p> <p>It was felt the texts could be misconstrued as being an individual one-to-one text, and the language could be interpreted as encouraging the recipient 'not to bother' the surgery for the foreseeable time.</p> <p>An anecdotal example was provided of a patient awaiting contact from the surgery about a medical matter and upon receiving the text felt it was intended to tell them not to get in touch until advised otherwise.</p> <p>It was suggested that such a text circular should be headed by a title that confirms it is a general communication to all patients, as opposed to a personal patient contact.</p> <p>AD and NT agreed to look at this aspect.</p> <p><b>ACTION: Update to be provided on proposed action.</b></p> <p><u>Follow-up Appointments</u></p> <p>It was raised that where a patient is advised by a GP to book a follow-up appointment in four weeks' time following tests, as an example, they were unable to do this as appointments could only be booked two weeks ahead.</p> <p><b>AD</b> confirmed this was the case following government decisions and NHS England directives, and appointments can only be booked up to two weeks ahead. If the practice offered appointments beyond this time, they risk being financially penalised.</p> <p>It was advised that patients should be encouraged to make a diary entry to remind them to book their next appointment two weeks in advance.</p> <p><u>Medical Students</u></p> <p>It was queried whether patients who were expecting to see a GP, but instead were dealt with by a Medical Student, should normally be informed of this process in advance.</p> <p><b>AD</b> confirmed that this should be covered at reception when the GP appointment is initially made, as reception staff have a script to deal with such instances.</p>	<p>NT/JPL</p>
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<p>6.20</p> <p>6.21</p> <p><b><u>7</u></b></p> <p>7.1</p> <p>7.2</p>	<p>The usual arrangement is that the patient is offered a 15-minute appointment with a Medical Student, who is being supervised by a GP. The GP would then see the patient immediately afterwards, but the patient would be fully aware of the process in advance and will have consented to it, or will have had the opportunity to decline.</p> <p>The same process exists for appointments with GP Registrars (Doctors in training).</p> <p><b><u>Date and Time of Next Meeting</u></b></p> <p>Tuesday 25 June 2024 at 6.30pm</p> <p>There being no other business, the meeting was concluded at 7.45pm.</p>	
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