**Minutes of the PPG Meeting held at 18.30 on the 8th February**

**Topics discussed**

**Appointments**

The phone-lines are open from 8am to 11am should one wish either a phone discussion or face to face appointment with a doctor.

Due to demand, you are more likely to get a phone call from a doctor on that day than an appointment.  However you could try phoning in again at 2pm on the chance of a cancellation.

There has been discussion about whether return calls to the patient could be made within a smaller time frame than currently.  (If you tell the receptionist of the time window when you are available, it may be  possible to meet your requirements.)  The doctors would find this very difficult. But if you let the receptionist know if certain times would be difficult for you they will make a note of this.

Emma will discuss with our doctors and reception staff to explore whether the appointments system can be further fine-tuned.

We all agreed that the reception staff were very approachable and helpful.  The training of reception staff is a key part of Emma, our Practice Managers' job.  For instance, receptionists currently help the patient decide whether a phone call or face appointment is the appropriate way to proceed.

Unfortunately Online Booking has not been possible for some weeks now.

Online consultation may be available around April when the National health are due to select the best system.

**Texting Test Results**

Currently patients who have had tests at the surgery are told at the time that they will not hear from the surgery unless there is an issue.

However it was pointed out that some patients, without definitive assurance, might worry.

Emma said that while texting normal results was impractical, concerned patients can always phone reception to check that all is well.

**Patients with Certain Issues**

The point was strongly made that we will have a number of patients whose ability to enjoy successful outcomes within the health system is impaired.  Due to lack of confidence, poor telephone skills, inability to get to the surgery, they fall out of the system and subsequently may be at risk of not receiving the benefits that we others enjoy.

Emma totally accepted the premise.  She then detailed that where possible, and with permission, they tried to keep a note in the records of relevant patients referring to these types of issue *-* for example, immobility or has a carer.  Emma then covered some of the many actions the surgery undertook to contact patients with known issues, to ensure they are not forgotten.

**The Referral System**

The question was asked how the Referral System worked.  Emma said that should a doctor feel that a patient would benefit from an appointment with a specialist, the doctor would contact that specific department.  That department then gets in touch with the patient.

Where the referral is urgent, for example suspected cancer, a special referral is made and the department will get in touch with the patient within 2 weeks .

**Raising people's awareness of the PPG**

Emma agreed to follow-up on the possibility of a PPG "poster" in the waiting area.

**Our Primary Care Network**

Through PPG actions, and in particular the efforts of Suzanna, we have a strong relationship with Petra Davis, PCN Development Manager for the Bestwood and Sherwood PCN.  Thanks to that relationship, Suzanna recently talked to Petra and found that due to the "crisis" in the NHS, Petra has been temporarily moved to cover other issues.  This means that some planned PCN developments are on hold.

This also means that we have not been able to move forward with plans for our PPG (and other relevant PPGs) to have direct patient engagement with the PCN. Suzanna asked those present at the meeting if they would agree to our contacting the Clinical Directors of the PCN to encourage moving forward with these plans, and this was unanimously thought to be a good idea.

However, as you may know, we do already have one Social Prescriber within our surgery, working very effectively and hope to have another in a few weeks’ time. We also have a part time Clinical Pharmacist who is much appreciated.

Our next meeting is planned for Friday 17th March at 2pm.