**PPG Meeting Minutes**

**Thursday 20th October 2022**

**Attendees:** Andrew H (Chair), John M, Pete B, John S, Alan H, Marilyn B, Norman W, Lesley W, Pete Sutcliffe, Lorna E

**Apologies:** Jayne Bouch,

**Start Time:** 13:00

**Meeting Closure:** 14:25

**Minutes of Last meeting:** As a group we talked through the minutes of the last meeting, some of which coincided with the action plan below and therefore see updated actions. In relation to the appointments being made available online LE confirmed that this had been done for the flu but that GP appointments in general were still not available online. LW shared that nationally the CVS had been asked to drive a campaign for patients to access their appointments via the NHS app. LW felt that if surgeries were not offering this service, then it was to early to run with the campaign. LE and the rest of the group agreed with this. LW was going to feed this back.

Whilst discussing the flu vaccines it was confirmed by LE that the practice were not offering Covid vaccines. Andrew gave feedback that he had a positive experience when accessing the covid vaccination clinics elsewhere. LW agreed to look in to whether the mobile vaccination clinics would run this time around as if this was the case there would be the possibility of setting this up in the Morrison’s car park.

JM updated the group also that in relation to the last meeting’s minutes and the theme of phone lines being an issue, that he was a member at the Mansfield Woodhouse probus and he too had received expressions of patient dissatisfaction regarding the phones. JM shared with LE a copy of the woodhouse warbler, and the fact that there was an article issued discussing Oakwood surgery on a quarterly basis. This is completed by Dr K Butt who communicates with a gentleman called Lee C. JM and PS suggested that it would be useful for LE to speak with Lee also to ensure that patients were getting the information that they needed to about the surgery; for example what is being doing about the phone lines etc. It was felt that the information currently provided for the article was generic for the NHS and not specific to Oakwood surgery.

LE confirmed that the recruitment of the staff mentioned had taken place. ( Nurse Abbie, HCA Wendy and Dr Tommy Moffitt.) LE gave a further recruitment update as part of this meeting.

In relation to the extended hours and the action of patients having a visual for this, it was agreed that it would be useful for the patients to have access to the opening hours for extended hours for ALL surgeries within the PCN**. Action: LE to find out information and share**

MB informed LE that Mjog had still not been working and LE said that she would look in to this. **Action: LE to look in to Mjog status**

The group discussed DNA’s and agreed that it was useful for the figures to be displayed in the newsletter. The text reminders were discussed again and it was suggested that the text reminders be switched on end of October in order to allow a comparison in DNA figures for November. Action: **LE to propose the above in order to allow comparison and decide whether worth turning the reminders back on**

**Actions from previous meeting**

|  |  |  |
| --- | --- | --- |
| **Action** | **Completed** | **Other** |
| Flu clinics to be bookable online | Yes | N/A |
| Once Extended Days and Hours decided would be useful for patients to have a visual | No | Now hours confirmed with PPG discuss best way to communicate this to patients. (To include all practices?)  LE to find out information for all surgeries and share |
| Lorna to monitor any responses to DNA Letters. | Yes | To date no responses contesting letter.  Discussed turning on text reminders to make comparison to DNA figures |
| Lorna to chase fire risk assessment from general office | Yes | Added to this agenda |
| Fire actions in relation to fire risks in the building and escalating to MP | In progress | Awaiting update from fire safety project 14/10/22 |
| Technology and apple phones, smart phones etc having capacity to do ECGs? What are our policies | Unknown (Ruth on annual leave) | LE will check (LE and RH both had overlapping annual leave) |

**Recruitment Update**

In addition to confirming that previous recruitment update had gone ahead and the staff had joined us as above, LE gave further recruitment update at todays meeting.

Nurse mentor Sarah Street-Rose has now joined the practice and will be providing mentor support to nurse Kezia on a Friday.

Dr Freeman will be leaving the practice in December to join another practice.

The practice has hired another salaried (Female) GP who will be working on Mondays and Tuesdays and her start date is 31/10/22.

The practice continue to use locums to increase the number of appointments available to patients.

Two new receptionists have joined the practice since the last meeting: Amanda who will be working Monday, Tuesday and Friday. Laura who has joined us on a full time contract. We are losing a receptionist who currently works four days as they are changing career altogether. A further receptionist Beth, will be working 2 days a week on Thursdays and Fridays.

**Fire Risk Assessment-** LE shared that she now has a hard copy of the risk assessment for the building which has 25 recommendations 18 of which are “significant findings” incomplete/Not signed off. The group discussed their concerns and disappointment that nothing has been done with the actions. The group are aware that the responsibility does not lie with the practice but with the landlords (NHS property services). Discussion as to why nothing is being done by those who conducted the FRA- there are deadlines given but no follow up action? All agreed that an explanation is required from the people who conducted the assessment and those responsible for completing the actions. Action: **LE to speak with necessary people re the actions and why no completion/ follow up. What are the next stepts?**

**October Newsletter information & Newsletters moving forward.**

All in agreement that the information included in the newsletter is useful and that it would also be useful to share with the wider patient population rather than just the PPG. Bull farm branch to be added under where it says Oakwood Surgery. PS is going to give LE’s contact information to Lee to arrange for the newsletter to go on a full page alongside anything that Dr Butt submits. In terms of Bull farm it was agreed that it would be made available at the Bull Farm site and the pharmacy as a starting point.

**LE attending course 10th November- “ How can PPG best support general practice”**

LE shared details of a course that she may be attending in November. She was unsure of the agenda but thought that it may be useful to discuss any outcomes in December’s meeting. All agreed that this may be useful and will add to next meeting’s agenda.

**QOF- patient recording BP result in practice**

LE explained that as part of our QOF indicators 8,000 patients require an up-to-date BP reading. There is a BP machine in the practice that patients can use themselves and records directly in their patient notes. LE asked whether anyone would be willing to help out in the surgery, perhaps during flu clinics to assist the patients with recording their BP via the machine. Consensus was that members would be happy to help but would a) need to be shown how the machine works and b) a list of dates of clinics/dates that would be useful for the practice. **Action: LE to speak to collate list of dates and speak with RH/HC how this would work logistically.**

**Phone Line Project**

LE shared with the group the phone line project that the practice will be working on to improve patient access via the phone lines. LE discussed that a monthly report had been created via a system called SipTrunk call manager, a system that can be used to monitor the number of patients in the queue. The report will include information such as calls answered, calls unanswered, calls abandoned etc. LE explained that the monthly reports will be used to make decisions regarding processes etc in order to improve the phone lines.

**AOB**

The NHS app was discussed and the fact that even if a patient has third party consent/ access for another patient that they are still unable to order prescriptions etc. LW is going to feed this back.

PPG minutes and availability- certain members of the group do not have access to emails, printers etc and therefore a hard copy will be made available for these members by LE.

Dr K Butt usually attends a community action forum at park road which happens once every 6 weeks. PS requested that where KB cannot attend can we have an update on behalf of the practice. Lee is going to share the dates with LE. LW/ CVS also requested that they are invited to this or provided with an update.

LW discussed that she had met with Anna who was the health and wellbeing coach for the PCN. LW and Anna thought that it may be useful for Anna to come along to a PPG meet to discuss what her role entails. LW has given Anna LE’s contact details.

LW attended PPG networking event 11/10 and there was an update from Rushcliffe where PPGs come together to learn from each other and also use the event to understand what primary care networkers are and how they work together and with practices. LW is hoping to have the funding for 2 events; 1 for Mansfield North and another for Rosewood- will keep the group updated.

Patient knows best- if registered for patient knows best with SFH would the patient need to register again for the GP practice. **Action: LE will look in to.**

LE gave brief overview of accelerated patient access to their medical records online. LE explained that this would be for patients to be able to access their medical records (entered by the clinician), test results, letters and communications. LE said that there was still work being done in the background in relation to this and that she would give a more in depth presentation of this once it was confident that the roll out was a success. LE discussed issues such as patients being able to downloads word documents and alter them, group suggested that these could possible be changed to read only or PDF format to which LE said NHS digital were looking in to it. LE confirmed that practices have held off currently running a major advertisement of this feature.

JS shared that waiting room sign for upstairs has been causing confusion amongst patients as it is not clear as to which way the waiting room is. Several patients had to ask for help during JS last visit. LE explained that she would look at this but that it would all need to go through general office as it was not as straightforward as LE just moving. **Action: LE to look at sign and if needed discuss with general office**

AH & PB shared that if anything was to come to light regarding the fire risk assessment and the practice needed any assistance, that they would be happy to help.

Agreed Next Meeting 15/12/22 @ 13:00