



The Oaks Medical Centre

Dr Laurance • Dr Johns • Dr Burns

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Patient Participation Group

Minutes of the Meeting

Wednesday 8th May 2024

17:15

PPG Members

Practice Representatives

[Redacted names of PPG Members and Practice Representatives]

Apologies

[Redacted names of those who sent apologies]

1	Welcome, Introduction & Apologies GM welcomed everyone, SH also sent apologies
2	Minutes of the last meeting / matters arising Minutes of the last meeting reviewed and approved.
3	Action Log updates <ul style="list-style-type: none">No diabetes update today as SH and MR not here today – move to next agenda.Discussed pain group for patients as suggested at last meeting by MJ – The practice ran a search on patients referred to the pain clinic in the last 12 months (34) and as such don't feel there are enough patients who would be suitable for this group and there are concerns from the practice that this is not something that should be done alone by the surgery and should be done at scale if appropriate but as the service is commissioned already it may be

	<p>a challenge. LB will put this on the agenda for the next meeting when MJ is here to discuss.</p>
4	<p>Practice Updates</p> <ul style="list-style-type: none"> • Registrar Dr Ben Loach started in April and is seeing patients alone and doing some teaching clinics where he sees patients alongside one of the other GPs. • New phone system should be in between sometime from June and Autumn.
5	<p>Big Green Book</p> <ul style="list-style-type: none"> • Discussed the Big Green Book that is implemented in Rushcliffe which is a booklet people can access for mental health services etc. • It can be accessed online by searching 'Rushcliffe PCN Green Book'. • AJ feels it is something the practice's patients could benefit from as well as other practices in the area as we know we have a lot of repeat patients coming in with these queries. • Everybody agrees this would be beneficial for patients. • CEH explained this would be best for the social prescribers to implement as they are the service who signpost patients to the places in the Big Green Book so will ask them if this is something they could look at putting together.
6	<p>Explanation of appointment system</p> <ul style="list-style-type: none"> • GM asked for some clarity and explanation on how the appointment system works as recently experienced some confusion and conflicting information when trying to book an appointment. • CEH and LB explained it isn't a simple answer as the practice's rotas are very complex and they take a long time to put on as there are around 25 staff members who all work different types of clinics and at different times. • The practice aims to have at least 4 weeks of rotas on the system and a maximum of 8 weeks. • CEH explained that the leadership team assess the appointments every day and look at what appointments are available and make changes to cater potential appointment needs. • LB also goes through any online appointment bookings to make sure what has been booked is appropriate, so that GP appointments are used appropriately. • CEH reassured that the reception staff have resources from the GPs, so they are aware of what is urgent and appropriate for routine and urgent appointments and what needs to see a GP as opposed to another clinician. There is always an On Call GP in the AM and PM. Regardless of when the next 'routine' appointment is, the practice will always try and see patients on the day for an urgent problem. • Discussed that some surgeries are now doing only on the day appointments to reinforce safe working standards, but PPG members were assured the

	<p>practice are not looking at moving to this system as it would not work and be beneficial for our patients. All reassured by this.</p> <ul style="list-style-type: none"> • Going forward with the new phone system will allow the practice to see data around the number of patients calling for appointments as patients will be asked to choose an option for what they are calling for as at present, we have no data to show statistics of appointments. This will then help to map demand to the number of appointments available. • Reception also signpost to other services such as Connect Health (for musculoskeletal problems) and Pharmacy first (for minor illnesses and infections) now who can help patients and therefore increase the practice's appointment capacity. • Discussed a recent article which has been seen about some surgeries now using a system where they have to contact the surgery via website not telephone. Again, the practice expressed it is not something that is in the pipeline as they are aware it is not something all patients can do, and it is not something the GPs want to do either.
7	<p>Unsolicited telephone calls</p> <ul style="list-style-type: none"> • Some PPG members have been receiving calls for an 'emergency health pendant'. • Concerns around where these places are getting data from as they have claimed they are getting it from 'local healthcare providers' • It has been reported to age UK who have said they have had three calls regarding this and would be passed on to the manager to make aware. • The main concern is wondering where they are getting the health data from and where the information is being passed from. • Reassured no patient data is released in this way from health providers and anyone providing information would be in breach of data protection regulations.
8	<p>AOB</p> <ul style="list-style-type: none"> • CEH is starting a fellowship project, hers will be around patient communication and changing the narrative of practice negativity and the relationship with patients. The practice has noticed and increase in aggressive and abusive behaviour towards staff, and other practices are struggling with a lot of negativity towards them generally so CEH is planning to look at a social media campaign to try and target this. The PPG was very supportive of this and encouraged the practice in their zero tolerance policy of abuse towards staff. CEH asked if the PPG members could complete a questionnaire at some point regarding her project which they agreed to. • The new phone system was discussed and how the queue and call back system will work. Any feedback from the PPG when it goes live will be helpful. • The PPG asked if there is anything the practice needs from them. The main thing we ask of from the PPG is support which we feel we have and feedback

	<p>both positive and any constructive criticism to help us improve and know what we are doing well at. GM noted that he felt any concerns raised by the PPG were dealt with and that the PPG are taken seriously by the practice. TT discussed that the planned new diagnostic centre will be progressing, and despite some questions raised regarding logistics the plans are underway for this.</p>
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Next Meeting: Wednesday 3rd July 17:15