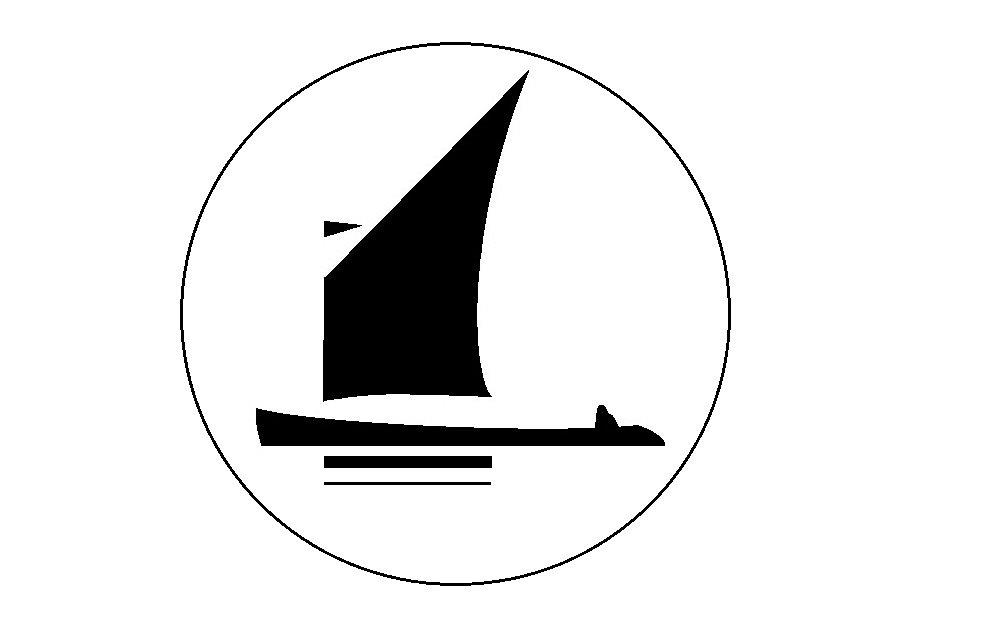
**HOVETON & WROXHAM MEDICAL CENTRE**

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**PATIENT PARTICIPATION GROUP**

**MINUTES OF THE MEETING**

**HELD at the CENTRE ON 14th May 2024 at 5pm**

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| **Present:**  Carol Hastwell (Chairman)  Heather Leishman (Practice Manager)  Alex Howe (Minutes)  Carole Eason  Tony Emes  Auriel Gibson  Dr. William Brookings  Charlotte Watlow (Dispensary) |  | (CH)  (HL)  (AH)  (CE)  (TE)  (AG)  (WB)  (CW) |

1. **Welcome**

Item 5 was brought forward so that CW did not have to sit through the first four items.

**5. Presentation by Charlotte Watlow – Dispensary Telephone Audit**

“Work smarter not harder”

Two telephone audits had been undertaken, Audit one in 2022, and audit 2 in 2024. Both were carried out over a period of one month and were designed to review the phone calls, in and out, of the Dispensary, to ensure the line is being used appropriately and efficiently. The principle of the audit was to ensure that the process was fair to all.

A call log data collection sheet had been designed and once the data was collected each phone call was given a call type broken down into the following categories:

Medication query, Medication order, Error (wanted reception not dispensary), New Medication information, Medication ready, Information, Payment (over the phone payment for private work).

* CW advised there was a shortage of community pharmacies
* It was agreed that CE would be the PPG contact for CW
* The consultation letter had received a good response and the first month had gone reasonably well
* Only 5 patients were not replying to the letter, and there may be a good reason for this
* Ten patients had decided to cancel their deliveries – had they ‘wanted’ rather than ‘needed’ deliveries?

Discussion then took place regarding unused medication, which was wasteful and costly to the surgery. (All unused medication should be returned to the surgery’s pharmacy as Roys did not have a pharmaceutical waste disposal licence). Charlotte was keen to have a big campaign in the foyer although she acknowledged that some patients were known to be a bit embarrassed at showing how much medication they had not used. A canoe full of empty boxes was thought to make a noticeable display, in an attempt to illustrate the amount of unused medication.

Carol thanked Charlotte for her very helpful presentation. Charlotte elected to stay for the rest of the meeting.

1. **Apologies**

Apologies from Ranjan Choudry (on-going)

**3. Minutes of Meeting on 9th May 2024**

These Minutes were agreed and signed by the Chairman.

**4. Matters Arising not on the Agenda**

**i. (item 9)** It had been suggested that the handwashing initiative could be taken to schools. Children are very receptive to these creative type of events. CH to speak to Liz Jump, the Vicar, to see if the Stay and Play project would take it on board.

**ii.** The dates for the Saturday vaccination clinics in the Autumn were confirmed in an email dated 12th July, from HL. They will be:

Flu, Saturday 28th September in the morning, and

Covid Saturday 26th October in the morning.

It was hoped that one of the clinics could provide both the Flu and Covid vaccines.

AH to forward HL’s email to the rest of the members, after the meeting.

It was also hoped to be able to run a RSV (Respiratory syncytial virus) clinic starting in the autumn. This would be a ‘one-off’.

**6. PPG Poster**

Following a recent meeting HL had devised a poster to put up in the practice. It should promote the PPG on the practice website, and on our social media platforms. HL had suggested that people contact her if they are interested in helping as she can keep a register of interest.

The poster had been circulated and HL asked for feedback. AG offered to collate. CW advised that in her previous role she had lists of people with individual skill sets.

The key skill sets for anyone applying for the role of Membership and Events Secretary, as highlighted within the poster, were IT proficiency, good at communication, and being pro-active and making things happen.

**7. PPG Signposting Meeting**

HL was keen on the idea of educating patients. She had put some dates in the Teams calendar for the proposed PPG Signposting events. She was suggesting holding them on the first Wednesday of every month at 5pm for an hour starting September 2024. They could include the following:

* HL could arrange a slide set to include all the areas we discussed
* HL could also invite different people with different roles to come to the event to speak about what they do
* A poster and booking form would need to be set up to allow people on reception to add people to future events
* Possibly a member of the PPG to talk about the role of the PPG and for there to be teas and biscuits

The PPG learning sessions on the 3rd Wednesday of the month could also be added but the Signposting events need to be set up first.

**8. Rackheath Surgery – update**

There was not much to report at this stage. The dates for delivery of the modules had consistently slipped by a few months. TE stressed that a year had been lost already, due to flooding etc. This was something TE had been concerned about a year ago, but he remained hopeful that the work would start fairly soon.

**9. ACCURX Programmre**

All was going well and HL felt that AccuRX was more time saving than Footfall, the previous programme. More and more patients were now using the on-line system, and additional staff was coming on-stream. An additional benefit of the new system is that it prompts patients for further information, which the patient might not otherwise feel is relevant.

# HL advised that GP Voice, which offers a call back system, was supposed to start in June but has been delayed. The humming bird system was also referred to. This is a system which automates recalling, organising, and monitoring patients. It had started but only with specific conditions.

AG referred to Secondary and Primary Care possibly being merged in the future, and by stealth. *(The NHS in England is an ecosystem of care providers, each with a specific purpose or specialism - primary care, secondary care, tertiary care, and community health).* The finances need balancing and some creative budgeting is required for the Primary and Secondary Care groups.

**10. Any Other Business**

**PPG – On-line sub-meeting**

This subject had been raised by Heather. Someone with IT expertise was needed to help organise this project. TE’s original form could be used? CW advised that they found people from their medical records. Patients had been put into groups and a questionnaire sent out. CW offered to help and so a sub-group was set up with HL, CH, and TE as the initial working group. HL to circulate dates for sub-group meetings.

**11. Date of Next Meeting: Wednesday 4th September, 5pm at the Medical Centre**

**Signed ………………………………………………………. Date …………………………**