**YORK ROAD GROUP PRACTICE**

**YORK ROAD ▪ ELLESMERE PORT ▪ CHESHIRE ▪ CH65 0DB**

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**PATIENT PARTICIPATION GROUP**

**Minutes**

**9th February 2023 6-7pm**

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|  | **Welcome/Apologies**Present – Becky Sutton, Steph Butler, Dr Macdonald Carole, Ina, Gordon, Marion, Joan, Chris, PatriciaThank you all for attending, welcome back to the old members and warm welcome to people joining us for the first time. This is our first meeting in over 3 years.  | **Speaker: Becky**  |
|  | **Team and Practice Update** We have two new practice partners Dr Newton and Dr Harrison. Dr Newton is currently on maternity leave. We also have Dr Probert a salary GP who is due to go on maternity leave, Dr Handy is our new locum. We have six practice partners, two salary DRs and one advanced nurse practitioner. Our GP’s work four days a week and our salary doctors work three. We have Suzanna our new occupational therapist who has been an asset to the team (Carole gave some feedback on Suzanna as she had worked with her parents, very happy with Suzanna’s work), Steph our care co-ordinator, Kathryn our well being co-ordinator, Tom our dementia nurse and 3 new admin team members. The additional roles are funded by the PCN which is the Primary Care Network, we have 6 practices registered to the PCN, York Road, Whitby, Westminster, Great Sutton, Hope Farm, Old Hall. We now have enhanced access in all 6 practices, our days our Tuesday and Wednesday 8am-8pm and you can book appointments 2 weeks in advance. We have outgrown our estates and there is no further development on moving buildings. We are looking at putting cabins on the side of the practice for more clinician room. We now have a lot more patients as people are living longer and Ellesmere Port is growing.  | **Speaker: Becky**  |
|  | **Social Media Campaigns**As a practice we are trying to push our social media campaigns and we have recently put out a video on cytology (cervical screening) which was done by our General Practice Assistant and had very good feedback on it. We want to be able to reach our younger generation as well. We are going to be doing some monthly podcasts Suzanna our OT haskindly offered to do our first one, these will be shared on various platforms and Becky will look into this. | **Speaker: Becky** |
|  | **Agenda Items for next meeting**Please email Steph with anything you wish to discuss in the next meeting  | **All** |
|  | **Any Other Business** * **Telephone System -** Carole gave good feedback about the practice telephone system, she likes that you can have a call back instead of waiting on the phone for staff to answer.
* **Telephone appointments -** You asked about if there could be better times given than just morning or afternoon when booking in phone call appointments as some people have jobs like teachers etc where they can’t answer. We can try to accommodate this if you speak to the admin staff when booking and we also have our enhanced access service for reasons such as this. We can’t give specific times as emergencies happen, and clinics can run over.
* **Social media** - Joan asked that not everything was put just on social media and the website as not everybody uses this, Steph said she is in the process of updating the boards in the practice, so they are more informative.
* **DNAS -** You all asked about the DNAs, and they have got better, since we have text reminders sent to patients about their appointments. Everyone agreed the texts work well and it was introduced over covid but will be staying in practice. Our Policy is if patients miss two appointments, they receive a letter from the practice.
* **Medical access app -** this is still postponed and hopefully will be working again at some point this year. Different systems are used throughout primary and secondary care for records, and they wouldn’t use the same system. We are also on electronic in England and Wales are still on paper.
* **Covid and flu clinics –** feedback from this was good, all agreed that it worked well and improved from the year before. Very efficient.
* **Screening -** Dr Macdonald addressed this and that we are quite low on all our screening nationally and any ideas on how to improve this, suggestions were a leaflet book, going into schools to promote screening from a young age.
* **Screening ages -** Eligibility for each screening.

Bowels is 60-74 years old – bowel screening has improved as it is just one test rather than three. It’s called the FIT test (faecal Immunochemical test)Breast screening is 50-71 years (if you are over 71 you can request screening) Cervical screening is 25 to 64. Every 5 years after 50 and you will only be invited after 65 if one of your last 3 tests was abnormal.* **Teledermatology being introduced** - which helps to diagnose skin conditions through digital images is going to be brought into practice soon which is hopefully going to help triage patients on when they are seen. Secondary care waiting times are all a long wait now, due to covid, people living longer and with more chronic conditions.
* Carole congratulated the practice on how well they coped during covid, and she always recommends our practice to others.

**PPG Chair** We have had a couple of members show their interest at becoming a Chair for the group.  | **All** |
|  | Time & Date of next meeting- 25th May, 6pm.  |  |