The Patient Participation Group -Meeting notes

Date: 11.12.2024

no	Items			
1	Welcome and apologies Patients: K. Ehm, H. Ehm, A. Sellick, P. Cook. Practice: Dr Ekwue (Partner), J. Bacha (Q&I Manager) Non- attendance: D. Clarke Apologies: K. Bell, G. Freeman, Gus Ghataura The meeting was chaired by H. Ehm.			
2	Approval of the minutes of the previous meeting (to be proposed and seconded)			
	No comments passed by the PPG members on sharing of the minutes			
3	Matters arising from the last meeting Chairperson and Secretary for the PPG group have not decided yet			
4	Items for discussion (consider new members, local and national initiatives etc. and limit time) 1. Election of Key Roles -Chairperson: To lead meetings and act as the main point of contactSecretary: To take minutes, manage correspondence, and organize activities.			
	The group could not reach a decision regarding the appointment of a chairperson and secretary. Members discussed the pros, cons, and limitations of this arrangement. However, it was emphasized that moving forward, it is essential for members to take ownership of the PPG. The manager will play a supportive role, addressing any suggestions or gaps identified by the PPG and working on improvements.			
	 2. Communication Channels -Share contact details among group members. -Discuss forming a WhatsApp group or similar platform for quick updates and collaboration. 			
	Some members expressed difficulties in using WhatsApp, noting that messages could easily be missed. There was a general preference for communication via email, as it seemed more convenient for most members. However, one member mentioned having limited access to emails. Moving forward, the PPG members' email addresses will be shared within the group for future discussions.			
	Action Plan and Objectives -Set goals for the PPG (e.g., patient surveys, health promotion events. It was proposed to conduct petient surveys and erganics health promotion. **The proposed to conduct petient surveys and erganics health promotion.** **The proposed to conduct petient surveys and erganics health promotion.** **The proposed to conduct petient surveys and erganics health promotion.** **The proposed to conduct petient surveys and erganics health promotion.** **The proposed to conduct petient surveys and erganics health promotion.** **The proposed to conduct petient surveys and erganics health promotion.** **The proposed to conduct petient surveys and erganics health promotion.** **The proposed to conduct petient surveys and erganics health promotion.** **The proposed to conduct petient surveys and erganics health promotion.** **The proposed to conduct petient surveys and erganics health promotion.** **The proposed to conduct petient surveys and erganics health promotion.** **The proposed to conduct petient surveys and erganics health promotion.** **The proposed to conduct petient surveys and erganics health promotion.** **The proposed to conduct petient surveys and erganics health promotion.** **The proposed to conduct petient surveys and erganics health petient surveys and erganical surveys are surveys and erganical surveys are surveys and erganical surveys are surveys and			
	It was proposed to conduct patient surveys and organise health promotion events. It was suggested by PPG member that surveys could be conducted by the practice while patients are in the waiting room. The practice manager emphasized that the practice could assist with initial arrangements and essential aspects of the events. However, the Patient Participation Group (PPG) should take ownership to conduct it, practice can help in analysing survey results and recommending actions for the practice.			

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- 4. Feedback and Suggestions Collect patient feedback and suggestions for improvement
- Consideration of using the "on hold music" time for public information announcements. These could include details on flu vaccinations, the PPG, and helpful reminders, pharmacy first, first contact practitioners, such as conditions that don't require a doctor's visit, like minor ailments or physiotherapy needs.
- Praise (feedback to all staff, partners etc.) for the clear efforts of all in the practice on behalf of the patients, all the compliments are shared with the team
- Call back system and number of the callers on queue is helpful.
- A reminder of body-language and the power of a smile to make everyone's day better.
- Practice Updates -Updates from the healthcare team on any changes or developments in services.
 - -The surgery is exploring the implementation of a total triage system. The surgery manager and partners have scheduled a meeting with another surgery that has already adopted total triage to learn from their experience and apply those insights at King Street Surgery. The process is planned to be implemented within six months. During this time, patients will be informed and instructed about the changes, with proper communication and consultations as needed. It was noted that other surgeries faced initial challenges when adopting this system, but they gained valuable learnings and streamlined the process over time.
 - friends and family test

	good	Neither good nor bad	poor
October	88	5	13
November	32	2	0

In aggregation Good 90.23%, Poor 9.77%. as a surgery we have identified the key points from poor responses are lack of appointment & long queue on the phone line during rush hours

6 **AOB**

7 Location, date and time of next meeting

19th March 2024 at 6.30 pm – King Street surgery 2024 All are welcome.