

**Patient Participation Group Meeting**

**24th January 2024 @ 4:30pm**

**The Boardroom, St Peters Hill Surgery**

**Meeting Minutes**

**In attendance**

Julian Da Silva (Practice Manager); Molly Marshall (Patient); Stephen Sumner (Patient); Sarah Lamb (Secretary)

Apologies: Peter Brister (Patient)

**Practice Updates**

* Dr Parkin is retiring at the end of March and Dr Finlan will be replacing him as a GP Partner
* Julian announced that he is leaving the Practice due to a change of personal circumstances, his last day will be 9th April. The Partners will be advertising for a new Practice Manager imminently.
* The Practice is in the process of recruiting a new full time medical secretary with a view to replacing Sarah Lamb who is being further developed and will be taking on new responsibilities in the near future.
* We are also looking at recruiting a locum paramedic to help due to unforeseen circumstances with our current paramedic – JDS explained that this, along with other staff illness lately has impacted our askmyGP capacity in the morning’s. The Practice is aware that this is a common complaint amongst patients, but we are doing our best to improve this with the use of locum’s etc.
* JDS informed the Group that the pilot that we were involved in regarding streamlining Practice processes was a success and our outcomes have been shared with other Practices around the country.

The Group discussed the minutes of October’s meeting.

* Mrs Marshall said she had had a look at the new Carer’s Board and was impressed with it. The Practice is now recognised nationally regarding Carers, and we have a Carers Champion in place.
* There are now touch screens in reception where patient’s can be directed to/self-refer to Health & Wellbeing coaches. These coaches have been commissioned to help support carers, people struggling with lonliness and mental health problems etc.
* JDS informed the Group that Hayley Salvin, our deputy reception manager is already aware and dealing with foodbank vouchers as this had been a question asked in the previous meeting as to whether this was something we were actively involved with as a Practice.
* It was acknowledged that we still need to try and recruit more members for the PPG. It will be a priority to get the leaflets out in reception.

**Active Practice**

* The Group are keen to organise a sponsored walk when the weather improves (perhaps around Easter time)
* Need to decide on a local charity to raise money for and contact them to see if they would be willing to show a presence on the day of the walk with donation buckets so that the Practice doesn’t have to handle any money
* SL to register St Peters Hill Surgery with the Active Practice Charter
* Mrs Marshall / Mr Brister to look into a suitable route for the walk – approx 3km.
* Once we have a plan, SL to discuss with the GP Partners and start advertising within the Practice, on the website and on Facebook.
* Check re liability.

**Communication**

* Mr Sumner wished to raise two points that had been communicated with him by a friend/patient of the Practice.

1. Prescription had been ordered, told by reception to collect from nominated pharmacy (Asda), patient walked to Asda, and it was not there. When told the date of this we realised that this was the day of the underground fire on St Peters Hill which caused the Practice to close suddenly with little means of communicating this to patients due to a power cut. Unfortunately, this would have meant that the patient in question’s prescription did not get sent to Asda as the system was not accessible.
2. The patient in question was unsatisfied that they had been sent a telephone appointment for a COPD review rather than a face-to-face appointment. JDS explained the process for these appointments, that a questionnaire is sent to the patient prior to an appointment being booked with standard and complex questions and if anything is identified upon receipt of the completed questionnaire, this is flagged to a GP and an appropriate appointment would be made. We don’t have an asthma or respiratory nurse in the Practice and we are not commissioned to carry out spirometry’s which can sometimes make things more difficult, particularly when examining for COPD. JDS explained that we currently have over 1000 patients on our COPD list and we have to follow specific guidance / generate a score/rating which determines whether the patient would have a face to face or telephone appointment. In this instance, without having the patient’s details, we must assume that their score meant that they were deemed suitable for a telephone appointment.

Mrs Marshall asked if a patient has several reviews pending, that these all carried out by different clinicians? Not necessarily but these can be difficult to merge together due to the length of time needed for each review i.e., 15 minutes for an asthma review and if the patient was also on several different medications, it would be hard to do this within the same appointment hence then the need for appointments with different clinicians.

**Date of next meeting: Wednesday 13th March 2024 @ 16:30**

Members to keep in touch with Sarah via email ([sarah.lamb13@nhs.net](mailto:sarah.lamb13@nhs.net)) in the meantime to keep discussing the plans for the sponsored walk