

Minutes of Meeting
Patient Participation Group
Wednesday 10th Nov 2021
Via FtF and Teams

Attendees:

Name	Position / Organisation	Initials
Tim Pearce	Senior Practice Manager	MB
Patricia Cole	Apologies - Admin lead	PC
Ethan Denny	Admin	DC
	Patient Apologies - met individually via team 29 th Oct	HC
	Patient	CW
	Patient	PR
	Patient	KH
	Patient	JAB
	Patient Apologies	JP

Item	Time	Agenda	Action
1.		<p>Welcome</p> <p>TP - Thank you all for joining the meeting TP gave a brief introduction re the purpose of the meeting to reignite engagement in the PPG as a result of limited opportunity to meet over the past 18 months or so.</p> <p>TP highlighted own observation re initial thoughts since joining the practice on 23 Aug</p> <ol style="list-style-type: none"> Lack of clinicians / inconsistency clinical team reliant on locums New admin team in place – needs training Poor patient service regarding booking GP appointments via telephone. Long waiting times as a result of high demand (pandemic driven) plus lack of clinicians. <p>Objective of this meeting</p> <ul style="list-style-type: none"> How to work together going forwards agreement Open discussion to hear PPG opinions Highlight / discussed new service via the website Patient Survey results 	<p>PPG to meet quarterly</p> <p>TP to send separately</p>

	<p>Introductions</p> <ul style="list-style-type: none"> All attendance gave brief intro and apologies as above <p>Terms Of reference</p> <ul style="list-style-type: none"> TP gave brief overview of the PPG (ToR) and agreed he will send a copy for everyone to read within the minutes 	
2.	<p>Actions& updates from the last meeting</p> <ul style="list-style-type: none"> Last meeting was Oct 2020 - since that time there has been unprecedented change as the practice has adapted and introduced new measures as an effect of the pandemic. Plus the challenging of changes to staffing. 	No Action
3.	<p>Patient Open discussion</p> <p>KH - Questioned TP regarding amount of doctors (clinician employed) and length of time to answer tel / book appointments. Lack of female GP's.</p> <p>TP - aware of the need to recruit and retain talent. Market conditions difficult to recruit salary GP's. As a result the practice has been force to use remote GP's and currently reliant on locums. This is NOT idea and very much looking to reverse this trend.</p> <p>Note -NHS fund every practice with Five GP appointments per patient per year.</p> <p>CW - Why have GP's left the practice?</p> <p>TP – Unsure reasons but need to establish a settled team</p> <p>KH - Could we book online or have appointments booked for the following day rather than being told to phone back on the next day if there aren't any appointment available.</p> <p>TP – Without doubt having a lack of Clinician seriously impacts onto the service we can provide. I am worried about rolling over appointment to the following day because this might mean just moving the problem. However I am open to suggestions.</p> <p>ALL - general discussion braining storming how this might work eg walking on the day, allocate some</p>	<p>TP Make working for DMC an attractive place to work for clinicians. Recruit stable team by Spring 2022 / supply and demand where practically possible.</p> <p>TP agreed must Recruit Female gp immediately</p> <p>TP to investigate different operating models in which provides PT with better access and service. Trial new ways of working re clinical appointments in December21. Feedback to PPG in the new year</p>

	<p>appointment for the following day and use practice website to access services</p> <p>CW / JAB - Could patient requests / needs be channelled into categories by urgency, type and person. Making it easier to priorities which patients need an appointment ON THE DAY with a GP and which patients could self-manage for example those less urgent (routine care) services of HCA.</p> <p>TP – We are trying to better understand how we could use the clinician resource intelligently (onsite and locally supported) in order to land patients with the correct clinical support (person and pathway) 1st time. This is the ambition, will take some time to work through and will need PPG involvement to help guide and solve the process. I believe the new website could help signpost patients more efficiently. In short, I would like the website to be designed by patient for patients and putting patient’s usage front and centre of the design where possible.</p> <p>RH / CW - The telephone messaging systems needs to be updated. Could it be simplified to reflect how services can be assessed?</p> <p>TP – Yes, this is an area I am aware needs development.</p> <p>ALL - Can we have consistent communication when patient are asked to book a follow up appointment by a clinician</p>	<p>TP / PPG to feedback on the design of the new website and in-house services that are available online. For example moving certain patient contact 100% on line eg repeat prescription requests, registrations. Thus freeing up the telephone lines to BOOK appointment.</p> <p>TP - to send a link of the new prototype website for the PPG to offer feedback by Dec 15th (if ready)</p> <p>NOTE - Need to find a way of engaging more PT so they are educated and trained in accessing their own healthcare online. Eg educational meeting in the practice.</p> <p>TP to meeting with telephone contractor to reconfigure the telephone systems by 15th Dec 21</p> <p>TP - develop and agree with all clinicians an</p>
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	<p>ED – sometimes Dr will send a task, sometimes they will book the PT and sometimes they ask the patient to visit reception to book themselves.</p> <p>ALL – sound like we need consistency</p> <p>CW - I have experienced a lack of communication when I have made contact with the practice. For example no acknowledgment of this meeting.</p> <p>TP – apologised / the volume admin flowing through the practice is high. However, we do have measure in place to manage demand. One to be aware of and thanks for the feedback.</p>	clear process by 15 th Dec 21
4.	<p>Patient Survey - Headlines News</p> <p>Didn't get time to discuss - will send the headlines as an attachment in the minutes - one to pick up at the next meeting</p>	Bring forwards a a discussion topic at the next meeting
5.	<p>COVID 19- Remote and video consultation</p> <p>TP - NOT discussed due to time.</p> <p>However, currently we are providing all the telephone consultation. During the telephone consultation, the doctor decides whether this consultation should be a video consultation or face to face. Receptionist do not book any video consultation or face to face consultation. You can also book the telephone consultation through patient online access.</p>	To be reviewed – Bring forwards for next meeting
6.	<p>CQC update</p> <p>TP - Not discussed and for Information</p> <p>CQC was inspected Chadwick rd DMC on Oct 22nd and although improvements recognises since the last visit earlier in the year there are a couple of areas that require improvement.</p>	Bring forward to next meeting

Closing Note

Thanks for everyone contribution next meeting booked for Wednesday 2nd Feb at 18:00 to 19:00. PPG member can choose to attend FTF or virtually via Microsoft teams

Action Plan

	Action	By whom	By when
1	Schedule PPG quarterly meeting for 2022	TP	2 nd Feb 2022
2	Recruit stable clinical team	TP	Spring 2022
3	Recruit female GP	TP	Immediately
4	Trial different operation models to improve appointment booking	TP	To feedback Feb 2 nd 2022
5	Engage PPG in the design process of the new website - send link	TP	Expected early Dec 2022
6	Update Telephone system (message AND option)	TP	Jan 22
7	Organise consists process for booking patient follow up appointments	TP	Jan 22