**Patient Participation Meeting**

**22nd February 2023**

Present: Wayne Penegar (WP) Chair, Lynsey Buckles (LB)-Mins, AM, WPr, SP

Apologies: GN,

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| Discussion | Action |
| Today’s Discussion |  |
| Response to Website requestSP mentioned that a relative of his had put a request in via the website, had received a message back saying the GP with review and we will be in contact, but she had not heard anything. LB checked the notes and could see the request had been actioned, but the patient hadn’t been advised of the action.  | LB to highlight this to the GP and also to raise it at the next governance meeting as learning for the whole team.  |
| MasksWP mentioned that the sign about mask wearing in the foyer is unreadable. He also felt there were mixed messages with staff and GP’s not wearing masks in the waiting areas. LB advised that the guidance on mask wearing for staff has changed. The current guidance states that staff only need to wear masks in clinical areas i.e. in the consultation rooms. We ask staff to wear masks if they have respiratory symptoms but are testing negative to COVID and still coming in to work.The reason we have asked patients to continue wearing them is because with growing numbers of patients now in the waiting room, there is potential for easier spread of infection between patients.All of the PPG members felt it would be useful to get this message across to patients so they understand.WP also noted that the masks were not easily accessible.  | LB to get the signage changed to reflect these discussions and ensure it is easily readable.LB to ask that reception keep a stock of masks in the area and have boxes on the counter as under the check in in screen. |
| PhonesLB updated about the phone line stability issues. The option to ‘piggyback’ off the NHS network is not a solution that is possible at this time so we need to continue as we are. Phone lines are dropping out much less, but it is still happening a few times a week. We are unable to turn on the call back option as it uses up too much bandwidth and destabilises the phones completely.How reception answer callsIt was raised again that staff are not answering the phones with their name. Phone messagePPG members asked that the initial phone message be shortened and suggested that the information about Doctorlink and Flu can be removed.Place in the queueAM reported that she called up recently and had got down to 1st in the queue and then for some reason went back up to 6th in the queue.  | LB to raise this at the next Reception meeting, put it in the whatsapp group and ensure this is clear in the induction.LB to update message and enquire with the phone company if we can have a very short greeting and then put information as a message when they are in the queue.LB to ask the phone company how this could happen. |
| Staffing updatesWe have recruited a number of GP’s nowDr Nafisa Rahim started at the beginning of January doing a FridayDr Shalini Patel has come back on as a permanent staff member and joined the team again in January working WednesdaysDr Danielle Russell joined us this week and will be working Tuesdays all day and Thursday mornings.Dr Ali Sidiqqi will be joining the practice in August working Mondays and a Thursday afternoonOnce Dr Gage returns we will have 5 GP’s on each morning and 5 in the afternoons on our busiest days.SP raised a question about how we manage communication when we now have so many GP’s. LB advised on the various ways we communicate and how we try to make it work. Discussed both the advantages and disadvantages of having more salaried GP’s doing fewer days. Nurse Rosanna is now on maternity leave and her replace Catherine will be joining us from the end of March. She has experience as a lead nurse.We are still struggling to recruit for the Care coordinator positions.Reception-we are also still recruiting to reception. The deputy manager has been offered a job in a school so she has resigned.  |  |
| Complaints & ComplimentsWPr mentioned that she had had a great experience recently with Dr Mankia. Her husband had an appt and WPR also attended. Dr Mankia asked the patient if he wanted WPR to go in with her, which was a nice way to start. Dr Mankia was sensitive to the patients’ needs and wants, she was very proactive, contacting a consultant for advice and also calling twice more in that week to feedback information and check in. WPr quoted the patient as saying “that is the NHS at its best”.AM mentioned a consultation she had with Faizah the Pharmacist, she said it was the most informative consultation, I learnt more about my medication than I have ever known. She also advised me on my current blood tests results and what they mean. It was amazing!LB read out a couple of compliments we had received recently and discussed a complaint about the change of appointments to face to face and the fact that the GP’s are at times running late. Especially the locums as they are all face to face. Appointment templates have been amended and this is now working much more smoothly.  |  |
| LeaseThe lease issues continue and we have extended for a further 6 months. LB discussed potential options that are being explored to enable the practice to grow and have the room needed for all our clinical and non-clinical team. In early stages on new discussions about potentially getting additional space in the current premises. Utility bills-LB discussed the hike in costs in general but to utility bills specifically. Highlighting that these costs were not reimbursed by NHS England which make it challenging.  |  |
| ZoomA few members had issues with getting in to zoom this evening. Due to it needing to update. LB advised that if you don’t use zoom often it will need to update in order to be used. Agreed the next meeting would be face to Face.  |  |
| Date of Next meeting: Wednesday 5th April 2023. Face to Face at the surgery |  |