

**Patient Participation Group meeting minutes
at Campden Surgery
Tuesday 24th October 2023 at 6pm**

Present: Mrs Sue Pritchard (SP) (Chair), Dr M Degnan (MD) (GP partner), Mrs A Goode (AG) (Practice Manager), Mrs Teresa Newman (TN) (Assistant Practice Manager), 12 patient group members

Welcome from Chair and update

Sue Pritchard welcomed everyone.

SP explained that there had been a working party set up from the last meeting in April to discuss the remit of the PPG in more detail and how this could work with the practice going forward.

SP raised 2 questions to be discussed:

Some of the members were also members of the Surgery Friends, who raise funds to provide equipment for the surgery, and it is felt that the 2 groups could work more closely in future to benefit both groups.

We need to agree actions for SP to be able to contact members more easily and to open the working group up to more patients.

Discussion

How do we inform patients of surgery news and developments and gain feedback – can this be improved?

Current methods:

- Newsletter in the bulletin - monthly which is delivered to majority of patients free to households in the local area (does not cover Bretforton and other Worcestershire or Warwickshire residents). Decision to include information from the PPG in the next newsletter for December – **Action** – SP and AG to discuss.
- Same newsletter on the surgery website – monthly with back copies for patients to read online.
- Facebook – new facebook page opened late August – 75 followers to date and has provided the practice with the ability to share urgent information, such as today's burst water main on Back Ends so that patients are aware when accessing the surgery that we have not had toilet facilities available today. **Action** - suggested a target of around 300 by Xmas with raising awareness both by the practice and by the PPG members via word of mouth.
- Surgery noticeboard in waiting room and TV information – noticeboard needs updating – **Action** – surgery to take down all notices and then replace to help with information distribution.

A patient felt the website itself needed improving. He mentioned Stow as an example – **Action** - AG confirmed that Stow had the same website provider as our surgery but would have a look and compare the 2 sites to see where and how they differed. PPG members would also investigate further and provide feedback to TN.

AG asked the group how they felt about general texts to patients with information such as the facebook page being opened, as the surgery only currently use texts to send to individual patients re appointments or reminders. There was a mixed response, therefore we agreed not to expand this to send general information.

A patient asked if texts could be made to allow more responses from patients when texts are sent –
Action AG to discuss with admin team.

Friends and family survey – discussed monthly by the surgery and comments are checked for themes and discussed and acted upon where possible. Positive comments are shared with the staff to help with morale. A patient queried when texts are sent and it was confirmed that they are sent on confirmation of appnt booking, 1 day before the appnt as a reminder, then a follow up text to ask for feedback after each appnt.

Can we inform patients of upcoming targets set by the NHS so that patient education and equipment donations could be tailored to this?

MD explained targets around QOF, frailty, palliative care and polypharmacy targets, AG explained access and telephone system targets for this financial year. **Action** – the surgery to include in next newsletter.

New surgery – update with delay in planning from the District council - a patient asked if we can we include other services such as the local dentist who is looking for new premises?

Action - MD and AG to forward info to our project manager for the build.

Other areas to raise awareness –

DNA rates – discussion around text messages now being sent to individual patients when they have not attended an appointment and this may have had an effect on reducing DNA's.

Self care services available to patients – physio, mental health, MSK, social prescribing and other services that patients can access directly – Ag explained that Medical Receptionists have now received further training and have access to a signposting tool to enable them to advise patients of various services that they can access without needing to book a GP appointment and potentially, therefore, reduce waiting times.

Fundraising – via events/donations and bequests – discussion around setting targets for fundraising for specific items and the friends having a “donation point” at the surgery and local chemist to enable patients, such as overseas temporary residents, who often expect to pay but the surgery is unable to charge for services and patients who do not need to pay for prescriptions to be able to donate instead. MD explained how changes in NHS funding meant that smaller, rural practices are finding it more and more difficult to “survive” and are having to merge into much larger groups in order to remain viable businesses.

Action – SP to discuss further with AG

The group was thanked for their time in attending the meeting as this is much appreciated by the surgery. Meetings would be kept to an hour to encourage patients to attend in future and ensure they were kept focused.

Future meetings –

Agreed to be 3 to 4 times per year – next meeting date to be set by SP and AG in early February.