

**Patient Participation Group meeting minutes –
at Old Police Station Court Room
Wednesday 18 4 18 from 6 30 pm**

Present: Mrs Judith Ellis (JE) (Chair), Dr R Zamir (GP partner), Mrs A Goode (AG) (Practice Manager), Mrs Teresa Newman (Admin Manager) and 9 patient group members

- **Welcome and apologies**

Judith welcomed everyone and thanked attendees for coming on such a lovely sunny evening.

- **Presentation by the Social Prescriber**

Jo Spicer gave an overview of the current service available to patients through practice or self-referral. Home visits were also available. Appointments are booked via the surgery.

- **Last year's priorities and feedback**

1. **More frequent patient meetings** – a meeting was held in February consisting of a focus group after previous attempts had to be rescheduled due to lack of numbers.
2. **Local services information** – Judith has attended meetings and AG and JE have attended locality reference meetings. Newsletters have been circulated and added to the website. Jo, the social prescriber, helps patients identify local services both in Gloucestershire and across the borders into Warwickshire and Worcestershire.
3. **Communication** – the surgery has included a “newsflash” in the Campden bulletin, on a monthly basis, to update patients with current news.
4. **Blood test waiting times** – more and regular appointment sessions have been added by the phlebotomists and the waiting times are improving – currently under 2 weeks for non-urgent blood tests – along with increased choice of appointment days.
5. **Increase options for telephone/e-mail consultation** – the surgery has added on the day triage by GP's and an Advanced Nurse

Practitioner and has increased the number of urgent “on the day” telephone consultations.

6. **Waiting times** – AG reported the average wait in the waiting room for the last 3 months was for GP’s 2 – 9 minutes compared to the previous year of 7 – 13 minutes. This is a good improvement and a result of changing the appointment system to allow for catch up time for GP’s.
7. **Increase PPG members under 25** – there are now 5 patients under 25 (171 total membership of the PPG).
8. **Improvements to premises** – an additional clinical room is being created from NHS funding and grants obtained from the Community Trust, Surgery Friends and Town Council. The disabled spaces in the car park are being resurfaced for improved access and new medical equipment has been purchased.

- **Patient surveys feedback**

Friends and family test results and feedback:

- 96% say extremely likely or likely to recommend surgery
- 1% say neither likely nor unlikely to recommend surgery
- 2 % say unlikely or extremely unlikely to recommend surgery
- 1 % say they don’t know whether they would recommend surgery

National survey results and discussion:

Results information sheet circulated for discussion and priorities identified:

Improving continuity of care

Continuing to improve waiting times

Reducing the wait for telephone to be answered by receptionists and improving options for “call back” for triage calls if patients are unable to receive a phone call, eg if at work.

Improving access via e-consultations and on-line booking.

- **Priorities 2018-19**

Priorities for the practice – Dr Zamir presented the current priorities:

1. Keeping afloat in the current climate – the practice would continue efforts to maintain its current culture and values in an ever increasingly pressured NHS. Through collaborative working locally in the North Cotswold cluster of practices, NHS targets for Improved Access are being implemented, with clinics held at the surgery along with other local practices, to offer more appointments until 8pm weekdays. Increased care needed for more complex patient needs has meant more roles created at the surgery to help with frail patients. A frailty matron has been employed for the North Cotswold practices.
2. Input from CCG for chronic workload issues – The practice has undertaken various projects offered by the NHS commissioning group to help with workload issues, eg leadership training, working on clinical correspondence so that the most appropriate person actions the letters coming into the surgery, processes such as medication reviews and repeat prescription ordering, training for reception staff to direct patients to the most appropriate service. These projects re ongoing for the coming year.
3. New build – the practice is awaiting prioritization from the NHS for the year 2021-2026 for possible new premises.
4. More clinical time – with an increasing list size and workload, the practices has employed a new salaried GP this year and is looking to increase clinical time further with a clinical pharmacist starting in May.
5. Feedback from patients – GP's will be undertaking individual surveys this year from patients to understand their individual priorities for clinical care.

Priorities for the PPG -

PPG meetings - Judith gave an overview of the meetings she attended last year on behalf of the PPG. She has had to decline the Moreton based Locality Reference Group meetings but AG has attended on behalf of the

practice and provided feedback to JE. JE has attended very useful Gloucestershire-wide PPG network meetings and has given feedback (JE will send the link for the PPG network overview for feedback from patient group members). JE will continue to attend these network meetings, where she was the only patient representative from the North Cotswolds. She hopes to encourage better representation from the north. Volunteers are needed to attend future locality reference meetings in Moreton either with or instead of AG.

Communication – promoting the PPG – a hearing loss ‘Drop-in’ is being promoted on 4th June by the PPG with Gloucestershire Deaf Association and the Community Well-being Agent, in Campden and Mickleton. This will hopefully encourage more members. The PPG will also hold a stand at the flu clinic to answer questions and promote the group.

Getting the views of ‘hard-to-reach’ patients – we will continue to encourage younger patients’ views.

Raising awareness of practice systems, projects and news in the community by the PPG. Further focus group meetings are to be arranged and the partners will consider a small budget for expenses.

Website – after discussion, an improved or new website was felt to be needed. AG will research this by asking other practices, checking with website developers in the community.

Action Plan from discussions

AG will create an action plan and include in a newsletter for members and patients.

Patients were thanked for their attendance today and the meeting closed at 7 30 pm.