

	<p align="center"><b>PATIENT PARTICIPATION GROUP MEETING</b>  <b>Held on Tuesday 6<sup>th</sup> September 2022.</b></p>
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<b>1.</b>	<p><b>Introduction to Meeting</b></p> <p>The Chairman welcomed attendees to the Zoom meeting and indicated that it would be recorded.</p>
<b>2.</b>	<p><b>Apologies</b></p> <p>Apologies acknowledged.</p>
<b>3.</b>	<p><b>Acceptance of Minutes</b></p> <p><b>There were no minutes</b> of the previous meeting due to a technical hitch in recording.</p>
<b>4.</b>	<p><b>Continuity of Care</b></p> <p>Older generations will be familiar with the concept having grown up with a family doctor. The concept of Continuity of Care is to provide a patient centric network holding a holistic understanding of each patient, increasing effectiveness of treatment and reduction in hospitalisation and costs.</p> <p>The chair committed to assist the practice with the project especially in providing what is perceived as the benefits, limiting factors to its implementation and on how best to communicate to the wider patient community.</p> <p>The PPG has discussed the topic and sent its initial thoughts to the practice.</p>

5	<p><b>Practice Report</b></p> <p><b>5.1 Patient letter to explain changes in services at WMG.</b></p> <p>The arrival of Covid 19 has changed all our lives and certainly changed the way we deal with our health, it has been difficult for both practice and patients. The practice has found new ways of working including a closer cooperation with neighbouring practices.</p> <p>As the difficulties of the past few years fade, the practice will need to take advantage of new practices adopted during Covid and will not simply return to the old ways.</p> <p>Change is never easy so the PPG is working with the practice to ensure that appropriate communication plans are established to explain to patients what services will be available and how patients can access them.</p> <p><b>5.2 Flu Clinics</b></p> <p>The practice has launched 2 all-day clinics for the over-65 cohort as that is all the vaccines they have been allocated.</p> <p>The flu line seems to have worked but there was an issue well as regards the number of texts sent. Texts were to be staggered but unfortunately nearly 4,000 texts went out over a short period, all the on-line bookable slots (2000) were taken up almost immediately.</p> <p>The 60-64s cohort will be next and their invitations sent in about two weeks' time with the under-64s vaccinations anticipated to be in the middle of November.</p> <p>The process will be the same as last year and located at the surgery.</p> <p><b>5.3 Covid Boosters</b></p> <p>Covid vaccines are being administered as part of the PCN operating a group wide vaccination clinic and are imminent. The booster programme will follow the same process as before with invitations sent to people incorporating links so that they can make their bookings directly on line.</p> <p><b>5.4 Resourcing.</b></p> <p>The key aspect of the last three months in the Practice has been staffing.</p> <p>Two doctors have left and one recruited starting November, recruitment is underway but facing challenges. There is simply a shortage of doctors and those that are available are not looking for permanent positions preferring instead a locum role where better remuneration and life style is available. Several locums are working at the practice to address the workload.</p>
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	<p>With 2 vacancies and the holidays season in full swing there is a massive squeeze on the capacity throughout August leading to difficulties for patients trying to secure an appointments, in these circumstances the practice adapts its booking operations to maximise appointment availability.</p> <p>Two new partners have been appointed</p> <p>On the non-clinical side challenges with the Reception team have been experienced with half of our team leaving since March/April. The practice is faced with a massive recruiting challenge and during a buoyant of the labour market, where there is a wide choice of available work, working as a medical receptionist is not now seen as a particularly attractive occupationally nor financially.</p> <p>Two new members have been recruited for reception, increasing remuneration has enabled the practice to attract experienced people to the team.</p> <p>The combination of loss of staff, holiday absences, long-term sickness and several inexperienced newcomers has caused considerable challenges manning reception.</p> <p>Having fewer people on the phones caused difficulties for patients seeking appointments, so some appointments were made available on line which eased the pressure on reception to a degree.</p> <p><b>5.6 CQC Inspection</b></p> <p>The CQC will carry out an inspection on 14<sup>th</sup> September. The inspection requires a great deal of preparation at a time when services at WMG are in high demand.</p> <p>The CQC will also audit the PPG.</p>
<b>6</b>	<p><b>Questions and Comments</b></p> <p><b>6.3 The Sphygmomanometer</b></p> <p>A sphygmomanometer has been installed in the waiting room, the idea is to enable patients to take your own blood pressure and other vitals prior to a consultation. The results are automatically recorded against the patient record and any anomalies flagged to the doctor.</p> <p>Better signage is needed to draw this service to the attention of patients.</p> <p><b>6.4 The Named Doctor</b></p> <p>When a patient registers a named doctor is allocated and the patient informed. Over time this may change arising from doctors moving, retiring or new doctors joining the practice and at times there may be a need to rebalance the number of</p>

	<p>patients per doctor.</p> <p>While everyone has a named doctor, WMG does not enforce a rigid policy and so enables patients to see any doctor not just the doctor to whom they are assigned.</p> <p>WMG are working to improve Continuity of Information, so that test results and letters from consultants go to the named doctor. While the named doctor has a general oversight of the patient, it does not mean that the named doctor will handle every episode of treatment. For example, a doctor may have continuity with a patient who has a chronic condition such as diabetes or asthma, if the patient comes in with a sore throat or tonsillitis, there is no need for the assigned doctor to handle this ailment. The practice endeavours to practise Continuity of Care as much as possible.</p> <p>Patients can contact the practice to identify the doctor to whom they are allocated.</p> <p>The information available across the NHS although consultants and other practitioners may not always access it, relying on out-of-date information they hold locally so patients will see letters from consultants addressed to an incorrect doctor at the practice.</p> <p>Unfortunately the assigned doctor is not visible on the NHS App.</p>
<b>7</b>	<p><b>PPG Elections</b></p> <p>PPG elections are held annually for the two positions of Chairman and Secretary. The elections will be held at the next meeting.</p> <p>The process is that those who are interested should give their names to the Secretary before the beginning of the next meeting. Voting will be carried out at the start of the next meeting.</p>
<b>8</b>	<p><b>The WMG PPG</b></p> <p><b>8.1 PPG Membership</b></p> <p>There are approximately twenty people registered as members of the PPG but a core of about eight regular attendees. The PPG needs to represent the wider patient community and members are encouraged to seek out new members. There is an FAQ that provides information about the PPG and we should consider putting a copy on the website.</p> <p>There is no longer anything on our noticeboards at the surgery about the PPG, we would like to see it advertised and include an email address that could be used by anyone interested and save the Practice the administrative hassle of</p>

	<p>dealing with this matter. The PPG would like to see the PPG advertised on the TV screens in the waiting room.</p> <p><b>8.2 The PPG List</b></p> <p>Once a year the list of members is reviewed. There are people on our list, receive copies of our communications but never attend meetings, some wish to stay members but are unable to attend meetings.</p> <p>Once a year absent members are contacted requesting confirmation that they are still patients at Whiteladies and whether they wish to be members. Only patients can be a member of the practice PPG.</p>
9	<p><b>Next Meeting</b></p> <p>The next quarterly meeting is scheduled for Tuesday 13<sup>th</sup> December 2022. The meeting will begin at 5.30 pm.</p>