# The Alney Practice Patient Participation Group Meeting

# 16 Cheltenham Road Gloucester GL2 OLS Wednesday 19<sup>th</sup> April 4.30pm to 6.00pm

#### Present:

Ilyas Piperdy (Practice Manager) Pamela Dewick (Chair) Bill Badham Chloe-Ann Renouf-Baldwin (Assistant Manager) Denise Leach

Jeremy Base Geoff Gidley

Janet Edgeworth

## **Apologies:**

Terry Flowers Kevin Arrowsmith Pam Cashmore Clare Clancy Rachel Banfield Caroline Smith

#### New member of PPG:

Clare Clancy has become a member of the PPG but is unable to attend meetings on a Wednesday.

## Alternating days of meeting:

Following a discussion it was agreed that future meetings would alternate between Wednesdays and Thursdays, in order to accommodate everyone in the PPG.

#### Notes from last meeting:

JB observed that there was very little in the minutes of the last meeting eg., telephones etc. JB said he would like certain parts to be included in the previous meetings, especially the part where IP talks about 'if patients need a face to face appointment, there are appointments available on urgent requests and on routine requests if the GP cannot deal with the problem on the telephone'.

JB said he wanted to know more information regarding appointments from the last meeting, regarding how many appointments are available for face to face / telephone appointment / online appointments now and before COVID. IP explained that the appointment system is mainly 50% telephone appointments and 50% face to face appointments. IP also explained that if a problem cannot be solved in a telephone consultation, the GP will always arrange for a face to face meeting.

JB advised that he had not had an opportunity to comment on the minutes of the last meeting and would like the minutes changed. PD advised not to change the previous minutes but to add on as currently actions / points, in the new meetings.

JB asked about gardening / cleaning up the front of Cheltenham Road building. IP said he would like to discuss this separately away from the meeting as there is a gardener who does the garden for the Practice.

#### 4. Practice Update:

- There has been a high staff turnover (in and out) recently. There have been new starters but a couple have not passed probation. There have been two new starters on reception in the last two weeks
- **Nursing Update:** two nurses have left or are about to leave. One nurse is reducing her working hours
- A new practice nurse is starting shortly although she requires training as this is a new role for her. An Advanced Nurse Practitioner is starting in July. There is still one vacancy in the nursing team. This vacancy may be filled with a full time Healthcare Assistant (HCA) in order to relieve other nurses. It will be September before things get back to normal with nursing appointments. One of the retired nurses is planning to help with some of the shifts
- Travel Clinic: IP explained what a travel clinic is; it is mainly private patients coming into the surgery to get travel vaccines. One of the nurses runs this clinic, Currently looking at options to keep this running after the staff members reduces her hours. IP will keep the PPG updated
- Partners Away Day: IP explained the purpose of an 'Away Day'. Discussions at the away day included; partners have equally spread the patient register list across the partners (to make sure they have an even number of patients between them). Phlebotomy appointment structure has been changed to increase the amount of 'blood tests' available for patients. Phlebotomy appointments are now 5-minute appointments (averaging at 7.5 minutes per appointment).
- IP explained that all patients can ask reception who their registered GP is.
- **Junior Doctor strike:** did not really affect us as a surgery (with appointments etc) It was the hospitals etc that we affected although it did have an affect on the surgery in a way because it increased footfall into the surgery / appointment demand due to not being seen at the hospital.
- **Phlebotomy appointments:** question was asked if patients can attend the hospital for blood test. Answer is yes, patient will need a form for this to take to the Edward Jenner unit.
- **Duty GP**: partners have come up with a new plan for the 'Duty Cover'. IP explained what a 'Duty GP' is to the group.
- **New Development:** it is probably going to be a couple of years before anything happens, will most likely be 3<sup>rd</sup> party lead. IP will keep the PPG updated with any updates we have.
- GP Assistants (GPA): we have 1 qualified GPA, and we have one in training now. They are used to ease the GP's workload; Chloe explained a little bit about what they do to help the GP's etc.
- System One: we are still waiting for a final answer from the ICB regarding this. When the move does happen, IP will get in contact with the PPG to help with the move across as their help will be useful.
- Staff morale: The summer party is coming up for staff. PLT in May; health and well-being being discussed in the PLT. Practice is doing everything to increase staff morale.

- Appointments: patients are frustrating at not being able to get a routine appointment, not being offered any other options i.e., access centre / NHS 111 etc. Chloe explained that staff have been struggling with difficult patients.
- 5. COVID CLINIC UPDATE: Chloe explained that there are 2 different types of vaccines (Sanofi and Pfizer). Lunch will be provided. Chloe explained that there are very specific rules with the vaccines (the 2 vaccines cannot be in the same room, vaccine cannot be in sunlight etc.) Chloe also explained that there has been a vaccine shortage, so has reduced the number of patients to be vaccinated and will have to have another clinic in the future to vaccinate the patients who have not been booked in this time.
- 6. Surgery Walk, Talk, Walk (SWAT): celebrating 1 year anniversary soon, have had some good numbers of patient attending, proud of starting this. It was a shame that it was no longer practical to use the text messaging service. However, the group have created a WhatsApp group for people attending. PD mentioned that the GP's/ Social Prescribers would be the best people to encourage patients to come along.
- 7. Friends and Family Test (FFT): GG explained what friends and family are, discussed the results with the PPG. The FFT Form shown to all group (available to patients on the front desk at both sites). GG went through he questions on the form. Total responses as an example: for 2 months as an example 24 responses (not enough numbers to get an accurate result). Chloe raised points that we could do to improve the results / advertising; the practice has ordered a feedback stand to go in reception / be visible to all patients, discussion of PPG coming in on random days to encourage patients to leave feedback / fill out forms for patients, to see if we can get a higher number of results. Proposal from GG: PPG to have half a day at both sites and try and get more feedback / forms filled out (to communicate with IP a suitable day). IP explained that it would be helpful for PPG to submit results into a spreadsheet and the forward to IP to submit online. PD/Gg/JB/JE would be interested (others in the room would be interested if they are available on the day). PPG will have some feedback forms for Sunday at the Covid clinic
- **8.** Telephone System: JB shared his personal experiences. He waited half hour to get to number 1 in the phone queue, the phone then rang out. The system does not tell the patient where they are in the queue after you get to number one, just continues to ring. JB wants the practice to sort this out as it as happened to him on 2 occasions. IP explained that the phone system may not allow this to happen
- 9. Posters: JB said still waiting for these, hopefully by the end of the week. They will go to PD when they are done. PPG would like another noticeboard at both sites. PPG will clear boards at both sites, will create a pile of stuff they think to chuck away and give to IP and Chloe. PD thanked JB and GG for their help and hard work with the posters

## 10. Any Other Business

- JB made a request regarding minutes of the meeting: for all members of PPG to view the minutes before being sent to PD and IP. JB would like the minute taker to type up minutes, send them to PD who would then send them to the members for approval before they are sent to practice manager to view and then sent to PD to review. PD did not agree with this process as it is not the normal process. No final decision was made. Action: To follow up on next meeting.

# 11. Date and time of Next PPG meeting:

Thursday 8<sup>th</sup> June 4:30-6pm. At Cheltenham Road