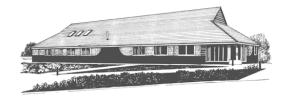
CHURCH LANE MEDICAL CENTRE 1 Orchid Rise, Scunthorpe, North Lincolnshire, DN15 7AN



PATIENT PARTICIPATION GROUP MEETING MINUTES

Meeting Date: Thursday 19th May 2022

Attendees: **Apologies** Faith Woodcock RĞ WS Kirstie Hornsey Sue Scorer DW Dr U Obu (part of meeting) ΥT JΒ ΗВ KD LC ZS JR ΒE Sophie Ferrier

	Meeting Minutes		
Item		Owner	
1.	Welcome and Introductions		
	Explained that we only had four patient members present, however SS was there (as secretary) and other representatives from CLMC so arguably was quorate. All agreed happy to proceed with meeting.		
	Went over the code of conduct that was agreed at the last meeting and everyone happy to work within these boundaries.		
	Dr Obu gave an introduction and thanked all members for their time, support and interest given to the practice. He looks forward to us working well together to improve things for patients. He stated he would try and attend as many meetings as possible going forward for continuity.		
2.	Actions from last meeting – all completed		
	Terms of reference had been amended and recirculated following feedback; the new document was adopted.		
	The practice have checked with telephone provider and the number of callers who can wait in the queue is capped to 6 currently.		
	The script for the lunchtime message was circulated previously to all members and does include a number to call over lunchtime in case of emergencies. A sentence has been added to the website too now which states that the practice remains open to visitors during this time.		
	The practice has extended online access and the promotion of this; we have improved the website so more can be done online and have begun to send text links to book into specific clinics directly without the need to access online accounts – for example smear clinics and flu clinics. This has worked very well and we had a good uptake.		

 We still need to do more to promote online services and are starting to do a text campaign over the coming weeks and looking at having a staff member speak to patients in the waiting room to help them access this.

3. Update from GP Practice

Since the last meeting we have worked hard to increase capacity of appointments; our Specialist Paramedic, Alan, has increased his working days from 2 to 4 and has started to do visits to housebound patients and care homes. We now have a first contact physio (Michelle) onsite for a full day and a mental health practitioner (Cheryl) every Thursday and Friday afternoon. Care home comments after visits have been extremely positive.

This has freed up more appointments with the GPs. We also currently have three medical students with us who are seeing patients face to face.

We have also upskilled existing staff members to allow for more appointment capacity – Sally has passed her Minor Illness qualification and now can see patients for UTIs, chest infections, ear infections, minor muscular-skeletal issues etc. This is in addition to her work focusing on sexual health, contraceptive fits and advice on the menopause/prescribing HRT.

We now have a part time clinical pharmacist – Oliver.

Nicola has completed a certificate in Diabetes which means she can now do diabetic reviews to support Jacky's workload/increase appointment availability.

We have had some work done to split our treatment room into two separate rooms. We will be moving all the donated equipment from the Adele Cox Memorial Room into the new treatment room which is a lot bigger and allows for different types of appointments, not just bloods. This should be completed in the next few weeks.

Dr James who has been with the practice as a Salaried GP since last February has joined the practice as a Partner now. Sadly Dr Usman will be leaving the practice at the end of August to return to Pakistan due to family commitments. She is very sad to be leaving and will be missed by both staff and patients.

We are now fully staffed on reception although we do have a current vacancy to cover for maternity leave starting in July.

SS explained that we are trying to amalgamate chronic disease annual reviews so patients can just come in and see one practitioner wherever possible. Patients will be recalled in their birthday month to make it more memorable for patients and easier to manage at the practice. There may be times everything can't be done at once due to the clinician they are seeing having different areas of specialties but it will definitely help to reduce the number of times they need to come in to the practice.

Discussed how we have many more F2F appointments available and that these should be offered by reception. If only telephone appointments remain then a slot can be converted to a face-to-face appointment by the supervisor.

4. Telephones/prescription line The practice is meeting with the telephone provider in a couple of weeks as the contract is nearing an end. They are exploring moving onto a cloud based system to improve efficiency and happy to receive any suggestions or ideas of what we should be looking at to take to the meeting. We are looking at ways of reducing the volume of calls into the practice; the vast majority of these in a morning is for prescription requests. Most practices in the area do not accept prescription requests over the telephone (there is also always room for human error). This is not something that we really want to do as we have a high percentage of older patients who may not able to bring in paper prescriptions and could perhaps struggle with online ordering. One idea is to reduce/delay the prescription ordering times so that the initial rush of calls to make appointments are dealt with first. We are also exploring a telephone automated ordering system which may help reduce calls: https://www.voiceconnect.co.uk/wp-content/uploads/2022/03/Repeat-Prescription-1.mp4 The advantage of this would be that people could order their prescription at any time of the day or night. Members pointed out you can do this online however some people may feel more comfortable using the phone than computer. Feedback welcomed from all members not present at the meeting on prescription ordering and video demonstration above. **Action** To email Sue with any ideas you would like us to take to the meeting **Members** with the telephone provider. 5. Annual Survey, website and social media The practice would like to reintroduce the annual survey for all patients (to go alongside the Family and Friends test). Some ideas of questions we might include were shared with the patient members present (and will be circulated to those not present). Please could members read through the questions and let the practice know if there are topics they think we should cover that are missing? KH showed those present the new website which is a lot clearer than the old one and mobile compatible. One of the new functions on there is the ability to request a continuation of a sick note rather than booking an appointment to discuss this. The protocol is still being finalised but the request will be looked at and only if necessary will an appointment be made. The ideas is that this will reduce calls and increase appointments. We have had over 280 appointments for sick note requests in the past 3 and a half months so we hope it will have an impact. The practice is looking at expanding its presence onto social media to share health campaigns and practice news (the website/text messages will still be utilised, it is just another wage of engaging with patients).

Action	Please check the new website and feedback any comments. We welcome suggestions of anything missing from there: https://www.churchlanemcscunthorpe.nhs.uk/	Members
6.	Suggestions and comments from the PPG members	
	Have we thought about an in-house counsellor? We now have Cheryl our mental health practitioner who is currently offering 30-minute appointments; this is the model which has been adopted in Primary Care and she can signpost to further support if needed.	
	Enquiry as to whether the check in computer is back working - yes, it is now up and running, if you spot this not turned on please let reception know as we are just getting back into the routine. The screen will be wiped down regularly.	
	Additional link suggested for the new website on 111 graphics which practice agreed to add.	
	Feedback given on how reception/customer service had improved over the last months and how receptionist will try and solve problems and listen to the patients.	
	Discussion on feasibility of saving some appointment back to release after lunch.	
Action	Practice to discuss with clinicians the reasoning for appointment release times.	Practice
7.	Election of Chair and Vice Chair	
	SS and SF were previously voted as secretaries. At the last meeting ZS expressed an interest as Chair and KD as Vice Chair. It was agreed that we would open this up to members who had not been present to put themselves forward for these positions out of fairness.	
	There we no further expressions of interest from other members and those present happy to elect ZS as Chair and KD as Vice Chair. FW will arrange to meet them separately to discuss roles etc and spend time in the practice in the future.	
АОВ	The next meeting will be set for approximately 8 weeks. Any agenda items to be forwarded to Sue and/or Sophie in their position as secretaries.	
	FW thanked everyone for attending and for their contributions and the meeting was closed.	