

Present		
1	<p>Welcome and Introduction In attendance: SW, RW, JG, MS, PR, JD, MM, SL, RP, PT, JB, GM, PT, SP</p>	
2	<p>Apologies: SA</p>	
3	<p><u>Approval of minutes</u> Meetings agreed as accurate.</p>	
4	<p><u>Actions' Arising</u></p> <ul style="list-style-type: none"> • Election of new Chairperson – MM had put herself forward. This was unanimously agreed by the group. MM stated she is conscious that the group represent patients and should have a way of gathering comments/feedback to bring to the meeting. The group can send comments directly to MM for feeding into the agenda. (Please just reply to her and not 'reply all.') • A comments box to be made for reception along with suggestion slips. SP made suggestion to have PPG members come in to talk to patients. Also idea to have another PPG board or posters to advertise the group. PPG page on the website – SP to create a comments form for the page. • Cheque not yet paid in – SP to chase up • Easy fund raising set up and 4 people joined. Reminder to all and add to website. JD to send electronic version to add to website 	<p>SP</p>
5	<p><u>Treasurer's Report/Receipt</u> Bank statement £327/ Balance £81.83 plus 8p to add from easy funding. If take out insurance this is a big earner from the website via Compare the Market.</p>	
6	<p><u>LLR Patient Survey & CAIP Results</u> No results as yet unfortunately. Expected any day soon. To be carried over to the next meeting.</p>	
7	<p><u>Surgery Update</u> Dr Chauhan has returned 2.5 days per week. Have recruited 2 new reception staff. We are varying staff roles to refocus and bolster teams. The secretarial team is now 2 members of staff. Karen Chetwynd has a more focussed role on digital and data needs. Abbie Harrison (receptionist) will be training as an HCA to boost our phlebotomy team as there is a large upwards trend in patient numbers. Partners have an away day in May when they look at what has happened this year and what we should be planning for in the future. RW/RP to provide and update at the next meeting. Very successful Covid vaccination day – 654 people were vaccinated. Vaccinators have also been out to care and nursing homes. Who are classed in the group under 75 and eligible? Immunosuppressed patients – eg high dose steroids etc.</p>	

8	<p><u>O & W PCN Update</u></p> <p>Saturday clinics remain popular. They are mainly used for smears, ears and bloods. There is a plan to split the clinics so they run in Oadby as well and Wigston. RW/RP have pushed to keep a weekly clinic here.</p> <p>There is a lot of good work done by Sue Renton and the Social Prescribing team. A new project is starting at the locks by Kilby Bridge for mental health. This is in conjunction with Severn Trent and The Canals and Rivers Trust.</p> <p>Pharmacists continue to do lot of work on medication reviews. Bushloe have paid to have extra physiotherapy capacity over the last few months. RW and Partners/RW will be looking at how this is working and how we use this going forward ie what happens when the Physio is on leave.</p> <p>As a practice we have reviewed how we use the rooms and less outside clinics are now using the building as it is needed more by the additional roles coming into primary care.</p> <p><i>A member discussed the gardening project – Pride of the Borough which takes place every 3rd Sat of the month in a different area. Agreed that it would be fine to contact Sue Renton to ask for volunteers and advertise the project.</i></p> <p><i>Amendment: a misunderstanding regarding the work of PotB locally. The suggestion was to put PotB and the Social Prescribing team in touch with each other.</i></p>	
9	<p><u>Online Bookings</u></p> <p>PR – raised again that it is difficult to ring/get an appointment. Would like to understand why the partners don't want online bookings.</p> <p>Reminders are sent out in advance now on days 7,3,1. Numbers of DNA's and hours lost were discussed. They sound a lot but compared to when we did book 2 weeks in advance numbers are low. (Used to be 10% DNA)</p> <p><i>What does message itself say? How easy is it to cancel appt? SP to check to see whether messages allow for cancellation.</i></p> <p>Currently we are not reintroducing online GP booking as we HCA & nursing appointments are available online. The number of DNA's and also the appropriateness of the appointments booked are factors.</p> <p>RW feels that Artificial Intelligence will change how bookings are triaged in the future. RP stated we need to balance between having slots filled v unfilled. The reception team triage all calls and Contact the Practice to ensure that bookings are made appropriately. There needs to be a balance between same day access vs pre-booked appts for other things. If patients can ring and also do online booking then we would eventually loose same day access ability. In an ideal world with lots of capacity we would offer all of the different ways to book. However, since covid, we don't have capacity.</p> <p>Are the PPG very keen to have pre-bookable slots? Knowing that people would DNA? This would therefore reduce access on the day.</p>	

	<p><i>? Would the medical team be willing to have a drop in session for those well enough to get to the surgery and then get to see a Dr/Nurse? There would need to be a cut off time for attending.</i></p> <p>The 2 busiest days are Monday and Friday; there can be double the number of requests on Mondays. We try to map the appointments to see how many have been filled then can patients are added to oncall for those that cannot wait. Exceptionally busy days become very stressful for the Oncall Doctor. The BMA says 25 appointments per day at 20 mins. Oncall Doctor on Tuesday saw 33 patients and this has gone to over 50.</p> <p>A member suggested that patients aren't aware of just how good the nurse practioners are. RW said that we do get compliments regarding them. Suggestion that PPG promote ANP</p> <p>Action – can accurx give option to reply yes to reminder?</p> <p>Discussion regarding patient numbers and closing the books. We cannot influence any patient to move back to another practice. It is very difficult for a practice to close its books. Rosemead jumped through many hoops to be able to close theirs due to building works.</p> <p><i>Who gets to see Doctor on a day?</i> Receptionists triage the calls and book with the most appropriate clinician. The number of calls can be huge. A discussion took place regarding waiting on the phone and requesting a call back.</p> <p><i>Is there a solution to the 8am rush? Could there be something on the website asking for feedback regarding this?</i> The issue of 8am rush affects the whole country.</p> <p>Discussion regarding our Physician Associate who does a lot of non-urgent work, eg kidney reviews etc. She also does more urgent work within guidelines and adds capacity.</p> <p>The Practice will listen to what people want and we can provide what is possible. RP to take feedback to partners but may not be able to provide what everyone wants. Wigston Central traditionally ran an open surgery and patients would wait for this but the large numbers became unfeasible. Several practices are now setting number of appointments that can be booked and are then telling patients to call 111. RP feels that we are at the better end of the spectrum.</p> <p>Feedback to be given at next meeting. SP will also collect appointment data from a standard week. Eg, Which days are the worst/best for calling and getting appointments. Can we have online booking – sounds like it will be a ‘</p>	<p>SP - KC</p>
11	AOB	

	<p>Phone calls. A member said by the time they had picked phone up, the caller had rang off with no message left. A large proportion of Wigston has now gone onto digital voice which seems to have a time lag; there is discrepancy with how long you hear your phone ring and how long the caller rings.</p> <p>Bridge closure. Work to start in July 2025. There will be notices going up in advance.</p> <p>Proposal to get rid of the heading for the PPG agenda – agreed.</p> <p>There is a proposal to withdraw mental health support for frontline clinicians. PPG are aware that there are extraordinary pressures on the practice. Is there anything the group can do to support staff/the practice? RW confirmed we do still have support through occupational health. RP confirmed he has access to Practitioner health service, sick Doctors trust, BMA advisory and counselling service. We are a supportive practice and make use of WhatsApp groups to support colleagues in various ways.</p>	
	<p><u>Meeting Dates for 2024:</u> These are confirmed. Tuesday 2nd July 2024 – RP kindly to bring cake to celebrate his birthday! Tuesday 3rd September 2024 Tuesday 5th November 2024</p>	