PPG Meeting

Date

Fri 10 Oct 13:00 - 14:00

Confirmed attendees

Amy Hood, Tyler Bailey

Other Attendees

RH/SD/PW/CC/FMS/GD

Details/Agenda

1. Welcome
2. Introductions
3. PPG Suggestions/ Comments box
4. Notice board
5. Recent government guidelines on use of the App approach
6. Flu jabs feedback
7. Call times and feedback
8. Practice update – Tyler

o Building

o Staffing

o DNAs

1. AOB
2. Date of next meeting

Minutes

1. Welcome
2. Introductions /apologies

- Apologies sent from TF and RW

- Notice that TH has left the PPG

- SD & FMS requests the table be smaller at the next meeting to help with those who have hearing issues - TB will sort smaller room or table next time.

1. PPG Suggestions/ Comments box - nothing in box this time
2. Notice board

- RH/CC/FMS to meet separately to discuss updates to PPG notice board

- PW praises the practice for the general notice boards which are now much clearer and informative.

- RH comments the waiting room environments does feel much better and welcoming

- FMS and PW comment on the lighting on the right side near the PPG low, especially around the corner. *TB to enquire about lighting options.*

1. Recent government guidelines on use of the App approach/ What's in the Press

- RH Feels the government/media wording has been a little misleading on the new guidance to come out regarding online contact and booking appointments. The media has inferred this to mean you can contact online and be able to book in whenever you want.

- **Official wording:** Online requests From October 1, 2025, all GP practices must have an online system open from 8 am to 6:30 pm for patients to submit non-urgent appointment requests and ask questions.

- TB/AH - This is correct in that you can now also submit a medical request online not just admin requests as it was before. It must be between these hours and we must respond in some form by close of day. This could be a message back to say your issue can be seen at pharmacy or we could book an appointment same day or for the future or simply send general advice. This doesn't mean there is any more capacity/appointments available it is just another method of communication aside from the telephones the main issue is that we have to respond to them on the same day. *AH to check website wording is up to date*

- The group asks if there have been any issues so far since implementing this? None as yet but only started on 1st October so can address at a future meeting should anything occur.

- SD comments that it could be quire limiting for patients in a way as they may have to accept the appointment offered electronically and may not be able to request another day/time. TB we as a practice tend send out links where a patient can select their own time/day but yes this could potentially happen.

- Comments from the group around other practice's in the area going to a total triage online method where the option to phone in is now non existent/very limited, general consensus from the group that this would not work for our practice due to age ranges/computer illiteracy/ digital tool access issues. ~ Our GP partners are in agreement and at present we are not obligated to do so.

1. Flu jabs feedback

- GD - Felt the clinic sat4th oct went very well but there was the mad rush first thing, he requested for fire exit to be opened as an exit to maintain the flow of people and this worked very well although it could have been closed after about an hour when things calmed down.

- CC- Some concern regarding patient waiting at the top of the stairs. CC directed patients to queue in a snake pattern and this resolved the issue. *TB/AH - to consider queueing ribbons/partitions next year.*

- Car park was quite full in the morning but dopped off after lunch. *TB - Consider outside signage to say more parking down the ramp.*

- Both GD and CC fielded questions from patients while queueing regarding eligibility and there seemed to be some general disgruntlement that the Covid vaccination age range had altered this season. CC comments that the PPG especially those helping out on clinic weekends could do with some knowledge about alterations to criteria prior. FMS - Feels PPG members should not be answering these questions. CC - We responded to patients with it is the government who decides eligibility and left it at that. Also RH/CC suggest name tags/lanyards stating that they are volunteers and cannot field questions may be helpful going forward. *TB to query.*

- CC comments on the Covid side that we had quite a lot of very frail individuals, some did not wish to sit down and were worried about losing their place. SD also mentioned it would have been good to have some done downstairs. TB

Responded that as there are no computers downstairs it would be difficult and the administration for the covid vaccine is lengthy. *TB to consider ticket system and/or not having covid vaccines done on a sat going forwards.*

- There was no signage up to say not to use the screens to arrive - next time to remember to do so.

- General census from the group that it was a success and moved along quite quickly and that our practice now opting to do Covid vaccinations is good.

- Figures - Sat 4th October 278 Covid done, 1588 flu done. All done to date Covid 948 and Flu 2556 (housebound vaccination have not been done yet)

1. Call times and feedback

- Call board now being cleared by 8.45am most days. Waiting times for Monday am rush reduced from 16 minutes to 13 minutes.

1. Practice update – Tyler

o Building - no issues

o Staffing - Dr Ropa has emigrated to Australia and we wish her well, We welcome Dr Whittaker has started last week working wed/Thur/Fri and has already had several compliments from patients. The group expresses sentiments to our Practice manager KS who is coming back from long term leave next week and will hopefully be in attendance at the next meeting in the new year.

o DNAs - Stayed at 3% for last few months. Much better than last year.

1. AOB

- FMS would like the glass surrounding the reception desk removing, finds it difficult to hear through and notices that some receptionists seem to shout over it. TB/AH Although it was installed during covid we did request it prior to covid after an incident with a violent patient. RH comments that due to risk assessments it is difficult to remove barriers put in place for safety due to legal implications should another incident occur. FMS states reception should have de-escalation training and that barriers should not be required and that other practices do not have them. TB several in the area do, it is each practices personal preference and we do not have intentions of removing it. RH suggest enquiring about speakers like at banks and other places. RH requests for practice to enquire and pick up at another meeting. *TB to look into risk assessment and other options*

- SD got locked out of nurses corridor recently, TB there is an electrical fault the hand dryer in the toilet next door when used it triggers the automatic door release, on council list for fixing.

- TB thank you to all PPG members who were present on Sat Flu clinic for helping.

1. Date of next meeting

- Friday 16th January 1pm

Actions

1. *TB - To enquire about lighting on right hand side wating room (doctors side), can council install brighter bulbs in this area/notice board LEDS etc.*
2. *AH - To check website wording for online requests is updated*
3. *TB/AH - To consider 1hst hour rush and what can be done better and consider queueing ribbons/partitions for next year.*
4. *TB - Consider outside signage to say more parking down the ramp.*
5. *TB - To query obtaining volunteer lanyards/name badges*
6. *TB to consider ticket system and/or not having covid vaccines done on a sat going forwards.*
7. *TB to look into risk assessments and other options regarding glass screen on desk.*