

**HEREWARD GROUP PRACTICE PATIENT PARTICIPATION GROUP (PPG) MEETING
HELD AT THE PRACTICE ON TUESDAY 21 NOVEMBER 2017 AT 6.15 PM.**

1. PRESENT

Mr B Sadler (Chair), Mrs K Dolby, Mrs J Payne, Mrs J Richardson, Mr R Casbault, Mr M Wright, Mrs M Wright, Dr I Wheatley (Partner), Mrs D Galloway (Practice Manager), Mrs P Rennie (Infection Control Nurse).

2. APOLOGIES

Mr R Rose, Mr T Reacher, Mrs J Reacher, Mrs P Howes.

3. MINUTES OF LAST MEETING

Mrs Richardson pointed out that she had attended the meeting rather than given her apologies. Minutes to be amended accordingly. Otherwise agreed as a true record and signed by the Chair.

4. PATIENT APPOINTMENTS

The Chair commented that the position regarding waiting times for a routine GP appointment for which 3 weeks or more was common did not appear to be improving. Dr Wheatley acknowledged the problem which he felt was common throughout the NHS. Locally, appointment demand continued to increase. For example, attendance at the latest Monday morning open access clinic had risen to 140.

Whilst the Primary Care Practitioner service was working well one staff member was leaving. In addition two salaried doctors were also serving their notice and the Practice were about to lose their two trainee doctors for a period. The effect on GP appointments would be a loss of 24 sessions. Recruitment was underway but the initial response to the two GP vacancies had been disappointing. Overall it was difficult to see the position improving until all vacancies were filled. The Group appreciated the difficulties the Practice were experiencing but felt that the present waits were unacceptable in the long term.

In response to a specific question the Practice confirmed that Patients could request to be seen by a named GP when attending the Monday morning open access clinic.

Members felt that an initial wait of 3 to 4 weeks for a GP appointment was inconsistent with a target 2 week wait for a GP referral to a Consultant for suspected cancer. It was conceivable in such circumstances that the wait in primary care was longer than that experienced in seeing a Consultant. It was also felt that consideration should be given to prioritising patients with serious or chronic conditions particularly when they were merely seeking advice.

The Chair raised the issue when the GP requested a follow up appointment be made at reception after the lapse of a few weeks only to be told at Reception that the GP's diary was either not yet available or there were no vacant slots. He felt that that this was particularly frustrating and Patients should expect to be able to book an appointment before leaving the Surgery. Perhaps a note to be passed to Reception by the patient could act as an instruction to release a vacant slot? Dr Wheatley acknowledged the issue and would discuss with colleagues.

5. PPG PATIENT SURVEY

The Survey was being undertaken during the current week and PPG members were in attendance to encourage patients to participate.

The Chair had attended for the first two days and around 160 surveys had been completed. Whilst detailed analysis will be undertaken discussion with patients and a cursory look at their responses indicated that most concern was around access (3 week appointment waits leading to a call for more open access clinics). There was very positive feedback around the telephone system and vastly improved Reception service.

6. DASHBOARD INDICATORS

Mrs Galloway circulated a number of indicators covering the period January to October.

It was requested that appointment information be expanded to include those offered by GPs and that the previous information supplied via the telephone system (number of calls, response times etc) be reinstated.

Mrs Payne expressed her disappointment that the criteria employed to determine eligibility for the flu jab seem to have changed and this only became apparent in her case when she attended the surgery for the injection.

7. CQC INSPECTION

Dr Wheatley commented that the next inspection appears to have been delayed and is now expected in the new year.

8. GP ALLIANCE

Despite the appointment of a Business Manager who had visited the Practice little appears to be happening locally which the Practice find frustrating.

9. GENERAL PRACTICE ISSUES AND FEEDBACK.

Mrs Rennie introduced herself as the Practice's Infection Control Nurse and talked briefly about plans for an Infection Control Awareness Day.

10. MEETINGS ATTENDED.

The Chair who is also the Chair of the local Cluster Group updated the meeting on the recent meetings he had attended.

11. ANY OTHER BUSINESS.

Mrs Wright requested that consideration be given to increasing seating in the waiting area at peak periods.

12. DATE OF NEXT MEETING.

Tuesday 6 February 6.15 pm at the Practice.