

Homestead Medical Centre

PPG Meeting held on

24th January 2024

Meeting commenced at: 17.08

Meeting closed at: 18.25

Practice personnel Present

Dr Rogbeer Dr R

Zoe Palmer ZP

Sarah Huskins SH

PPG Members Present

■■■■■■■■■■ JR

■■■■■■■■■■ SS

■■■■■■■■■■ IC

■■■■■■■■■■ HC

■■■■■■■■■■ NH

■■■■■■■■■■ JH

Apologies

Dr OAI

Dr MP

■■■■■■■■■■ NJ

■■■■■■■■■■ BF

Agenda Number	Description	Action/info
1	<p><i>Agree Minutes of last meeting</i></p> <p>Everyone at the meeting introduced themselves – because we welcomed some new members.</p> <p>Minutes of the last meeting were accepted but some members had not seen the minutes.</p>	
2	<p><i>Welcome back to JR for standing in for today's meeting.</i></p> <p>JR was welcomed to the meeting – standing in for NJ.</p>	
3	<p><i>Action Points from last meeting</i></p> <p><i>Patient Survey</i></p> <p>ZP – Patient Survey. The patient survey was discussed, thinking about the NHS survey and the PPG local Patient Survey. It was decided to review the next PPG survey after seeing the results of the NHS survey. We need to ensure the different surveys don't duplicate to same issues.</p>	<p>Review PPG survey and results of NHS survey.</p>
	<p><i>Action Points from last meeting</i></p> <p><i>Missed Appointments (DNA – Did Not Attend)</i></p> <p>It was noted that pre-booked appointments had a higher incidence of no-shows than booked on the day appointments. This had both a cost implication and more importantly appointment slots being unavailable for other patients.</p> <p>JH highlighted the methods used by the hospital to send reminder SMS messages for appointments. Those messages also pointed out the cost implications of missing an appointment.</p> <p>SH said that data on this issue has been gathered in the past for DNA's.</p>	<p>ZP to speak to the digital team to see if the SMS messages can be amended to reduce this problem.</p>

4	<p><i>New telephony system update</i></p> <p>There was a long discussion about the Medical Centre telephone procedures. It was accepted that some of these were also covered at the last meeting. This covered the times in the day to take calls for appointments, prescriptions, lunchtime cover, etc. An issue raised by NH was the difficulties around the fact that the appointment line was closed over lunch when that was the most likely chance most patients would have opportunity to call for an appointment. SH pointed out that medical centre staff also need to take a lunch break and that they had to strike a balance around which lines should be covered over lunch. SH also pointed out that certain lines had to remain open for emergency contact, for example paramedics. The physical layout of the offices and specialist staffing also has to be considered.</p> <p>SH agreed to review this issue.</p> <p>SH also reminded the meeting that a new telephone system will be installed later this year (maybe March 2024) that will bring lots of benefits for patients and the medical centre. A significant feature will be to enable the caller to ask for a call-back rather than holding on waiting in the queue.</p> <p>It was noted also that there is more than one channel for contacting the medical centre. SH reminded the meeting that the PATCHS on-line system is another way to order prescriptions, make appointments, etc.</p> <p>SH also pointed out that a lot of the various channels of communication are initiated and instructed from the NHS, as is the main content of the Homestead web site.</p>	<p>SH to review lunch time phone cover.</p> <p>The next meeting will also be able to discuss the new telephone system because hopefully it will be up and running before then.</p>
5	<p><i>Prescription telephone line update</i></p> <p>SH reported that the prescription line is still available but needs more promotion and ideas to increase the uptake.</p>	<p>Review at the next meeting.</p>
6	<p><i>Feedback from patients</i></p> <p>JR noted that the PPG had done a patient questionnaire, circulated at the coffee mornings, and the NHS send out questionnaires and SMS messages have been used for feedback – so are we in danger of having too many?</p> <p>It was agreed that the PPG survey should be reviewed so that it is more focussed. It was decided, therefore, to await the outcome of the NHS survey then use that as a starting point for the PPG more locally focussed survey.</p>	<p>Review at next meeting.</p>

7	<p><i>Practice good news</i></p> <p>This wasn't discussed in detail but it was noted that we now have a new GP, Dr Bakare, and our HCA, Natalie Bogg has completed her 4 years of training and passed her exams to become a Practice Nurse.</p> <p>Filling the role of HCA will be Sarah Richardson – she was a training nursing associate but now a nursing associate.</p>	
8	<p><i>Future coffee mornings</i></p> <p>Not discussed in detail, but just noted that we need to try to improve the attendance.</p>	<p>All to consider best dates and which organisations to invite. Maybe consider a young mother's support group in an attempt to recruit some younger members to the PPG?</p>
9	<p><i>Recruitment of PPG members</i></p> <p>Not discussed in the main meeting, but remains an important issue.</p>	
10	<p><i>AOB</i></p> <p>Reintroduction of wearing face masks when attending surgery</p>	<p>Not discussed</p>

	<p><i>AOB</i></p> <p><i>Physiotherapy services</i></p> <p>JH and others reported that these services were not affective. Anecdotal reports say that once referred, apart from phone calls, very little effective direct treatment happens.</p> <p>JH has some documented evidence comparing Physiotherapy treatment received through NHS referral with paid for Chiropractic Treatment. JH felt this was unfair because patients with serious back pain, for example, were denied a remedy through lack of funds needed for private access to Chiropractic treatment.</p> <p>JH asks if there is any formal feedback from patients referred for physiotherapy?</p> <p>JH acknowledges funding comes from the PCN (Primary Care Network) but asks if the funds for physiotherapy could be diverted to chiropractic treatment if that treatment is more effective.</p> <p>An issue with this different treatment is that it is still considered as 'alternative'.</p> <p>JH agreed to send the research she has found to the practice to at least start a conversation on this topic.</p>	<p>JH to pass information comparing the effectiveness Physiotherapy with Chiropractic treatment.</p> <p>Practice to review and consider funding.</p>
11	<p><i>Next Meeting</i></p> <p>8th May 2024 at 5pm</p> <p>Patients group usually like to meet at 4.30pm to discuss issues before the main meeting just involving patients. This reduces the time impact on practice staff members.</p>	
	<p><i>Thank you</i></p> <p>Special thank you to the Medical Centre members for extending their day to participate in our PPG. It is much appreciated.</p>	