**Portland Patient Participation Group: Minutes of meeting October 19th 2022 at 4.00 pm**

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| Present:  Surkita Chauhan Practice Manager  Sue Cousins Chairperson  Colleen Eades  Denise Hombiro Reception Team  Gail Jukes  Pat Morris  Hilary Mulholland  Sue Southall | Apologies for absence:  Antony Cashmore  Helen Garbett  Jean Halford  John Hipkiss  Catherine Stewart  Liz Smith |

Surkita Chauhan, the new Practice Manager was welcomed to the group, and introductions were made. Also in attendance was Denise Hombiro, a member of the Reception team. Surkita is hoping to bring different team members to future meetings.

1. **Minutes of last meeting:** Agreed as an accurate record.

Matters arising from minutes: prior to the meeting John Hipkiss requested further clarification of the phlebotomy service appointments. Prior to this service starting some years ago the group had been informed that patients needing blood tests could have these immediately after seeing the doctor/nurse, meaning a second trip to the practice would not be needed. As S Ch has only recently joined the practice she was unable to comment on the background. However she pointed out that this type of immediate service may be difficult to achieve as the phlebotomist is part-time and is shared with Northgate practice. D O informed the group that current waiting times for phlebotomy are approximately one week.

Action: follow up by S Ch.

**2. Practice update from S Ch**

S Ch joined the practice at the end of July. She has had a lot of experience in other practices and commented that this is one of the best she has worked in. She is aiming to further improve a great service. The following points were noted:

1. Receptionists have been asked to introduce themselves by name when answering the telephone. This is a friendlier approach and good for accountability.
2. Photographs of all staff have been taken and will be displayed in the waiting room and on the website.
3. Telephone calls will be answered within three rings if possible (once at the start of the queue). D O reported that this can be difficult at very busy times but staff are attempting to achieve this standard. There is a new tracker which tracks how many calls are waiting. The average waiting time is two minutes. It is currently not possible to update the phone system.
4. Face to face appointments have been offered since the end of August, but the option of a telephone call remains if this is requested by the patient.
5. E-Consult is still available as a means of access and is helpful in reducing the number of phone calls to the practice. E-Consult is popular with lots of patients but telephone access is still available. E-Consult requests are triaged by the duty doctor.
6. D O reported that the team are now chasing up reviews of chronic health problems which have been missed, and health checks for the over 40s have been reintroduced.
7. Flu jabs – 1947 have been given to date, and 700 more patients are booked in. Where appropriate Covid vaccinations have been given at the same time.
8. The practice is very busy, doctors feel they are working at a safe level but only just achieving this.

Comments on above:

C E thinks eConsult is great but is long-winded and repetitive. S Ch commented that it is not possible for the practice to make their own amendments, she has looked into this before, the content is pre-set by the developers. The system was not developed locally; it is widely used in practices across the country.

S S reported that on completing an eConsult form a message was shown saying “we cannot help you”. S Ch had no previous experience of that outcome.

The group commented that telephone access is still needed, S Ch said that this will continue and there are no plans to change this.

PPG members have previously assisted with flu jab clinics by supporting less mobile patients, helping patients remove coats, and generally chatting to people which seemed to be appreciated. Members are willing to assist with future vaccination sessions if this would be helpful.

3. **Discussion of draft Terms of Reference and Constitution**

S C explained that there is no record of the group having formally agreed their Terms of Reference and Constitution, and that these are necessary to set out the working arrangements, the groups’ purpose and scope and define the roles of the chair and membership. A draft document was circulated prior to the meeting. The group were in general agreement with the content; the phrase “health literacy’ was amended to “health awareness”, and a typographical error was noted for correction. In order to give time for everyone to comment this document will be re-circulated with the expectation that it will be formally accepted at the next meeting.

Action: All to read this document and forward any comments to S C prior to the next meeting.

**4. Waiting room displays**

S C reported that she had updated some of the waiting room displays and asked if anyone would be willing to take on this task on a regular basis. Janet Jukes from Northgate PPG has lots of contacts for sources of materials and has generously passed on unused resources. No-one present was wiling to take this on.

Action: other PPG members to consider taking on this task, either alone or with another member.

**5. Date for annual general meeting and election of officers**

Due to the limited number of meetings during the pandemic the annual re-election of officers has not taken place. There are currently vacancies for a Vice Chair and Secretary. S C is willing to continue to act as Chairperson but can talk through the role with any other member who is interested in putting themselves forward for election. It was agreed that the AGM will take place as part of the April meeting.

**6. Any other business**

P M raised three points:

Smoking outside the main entrance – at times patients have to walk through a cloud of cigarette smoke. G J queried whether the bin could be changed or moved?

*Following the meeting S Ch has asked staff who open up the building to move the bin around the corner.*

Who opens the post? A letter which was hand delivered, marked strictly private and confidential to be opened by addressee only was never received by the doctor.

S Ch: The usual procedure is that reception staff will open all post and scan it into the system as it constitutes part of the patient’s record. However she will look into this occurrence.

P M’sk late husband, Clifford Morris, photographed the development of Anchor Meadow Health Centre and some of the photographs were hanging in a frame just inside the main entrance but are no longer there.

*Following the meeting S Ch followed this up, the photographs are on the blue Primary Care Network noticeboard which has been moved to the staff room.*

**Date of next meeting: 18th January 2023 5.00 pm**