MINUTES - PPG MEETING

DATE: 05/07/2023

PRESENT: MILENA BODDA – PRACTICE MANAGER

 ELIDA BRAY – SENIOR ADMINISTRATOR

 MR PERRY ROBBINSON

 MS JILL STEATON

 MRS JANET BALCOMB

ABSENT: MRS CAROL RAWLINGS

NEXT MEETING:

WEBSITE:

1. Not so used by patients as not very clear and much easier to access info via NHS app.
2. It was suggested the Practice could have a laminated leaflet by check-in machine or notice board with simple instructions on how to navigate the website as well as to promote it.

**Action**: working on improving website to be more user friendly.

1. Promote more activities like Get Active type of service – Stay Well.
2. Patients were asked to put some positive feedback on NHS website if they could.

**Action:** Elida to send feedback link to those interested. Done.

**Action:** To improve info about Social Prescriber and all they offer in order to help patients. Done.

PATIENT TRIAGE:

1. Not clear for patients what it is or how to use it. Name/title does not speak out. Also, Accurx may need promoting as not available through NHS app.

**Action:** Elida/Milena to change name on Accurx and website (out of core hours) (cannot change default message but changed name to “How to contact us”.

NHS/PATIENT ACCESS APPS:

1. Much easier to access medical records, check results, request medication and book appointments. Some patients may prefer that over website.

BOOKING APPOINTMENTS:

1. Difficult to get an appointment on the same day for the afternoon period and waiting time on the phone is extremely long.
2. Automated call back is not ideal and not practical as patients might be at work or unable to reach the phone when Dr calls.
3. Unable to choose which GP to see when booking online as it only offers VP or JP. It is a problem if a female doctor is required.

**Action:** To change that and add all Drs if possible. Additional online slots have been allocated for all doctors including females).

1. Trouble booking nurses appointments online.
2. Patients are happy with F2F or Tel appt choices. Telephone consultation is much easier at times for quick issues or if patient is unable to attend practice i.e. mobility issues.
3. Video appointment was suggested as a good option as well. It was discussed it might not be as practical because Drs usually only have 10 min and by the time they send video link and connect it takes too much time.

RECEPTION:

1. Before Covid reception staff were quite rude but got much better after it.
2. Patients prefer not to say what the problem is when asked by reception at the time of booking appointments as other people can hear and this goes against GDPR.
3. If patient says they have a “personal issue”, reception should just book the appointment without any further questions.

EMAILS:

1. Patients would like to be able to send emails to practice whenever necessary. Most practices offer this service, but they appreciate it would be a lot more work for us going through it. Emails are not safe.

**Action:** Promote Accurx Patient Triage over emails. Already on website.

SOCIAL MEDIA:

1. Facebook was discussed and not a positive path to take at the moment as we would mostly get negative feedback and we would need someone to monitor responses/posts every day. Now a days, only over 50’s use Facebook. If we want to reach younger population, Instagram or Twitter better options but again, will need constant monitoring. Passed it on to Practice’s Transformation and Innovation Manager.
2. Social engagement officer – more information for younger adults, working age people, patients with disabilities. To send more information to ethic groups within the practice re associations connected to these groups who are able to offer non-judgmental help and advice.

**Action:** Awareness of Social Prescriber. On website.

FEEDBACK VOLUNTEERING:

1. Mr Robinson and Ms Steaton volunteered to help the practice getting positive feedback from patients. They have offered to come and sit in waiting room and speak to patients, asking questions on what could be improved etc.

**Action:** Milena to draft questions.