**Minutes of the Westbury Group Practice (WGP) Patient Participation Group (PPG) meeting including AGM held on 28th. February 2023**

**Attended by:** (SC), (DB), (MP), (MK), (IH), (CR), (PB), (AH), (MW), (PBr), (DR), (BC), (GC)

**Present from the Practice:** (MD), (CM)

**Apologies**: (MJ), (JM), (BF), (BB), (DH), (PBy), (JC), (SK), (VM), (JP), (PM), (BY).

**Date**: Tuesday 28th February 2023

**Venue**: WHHC (White Horse Health Centre), Westbury, Wilts

1. SC welcomed new members - DR and potentially GC and BC.
2. SC apologised for the late delivery of the Agenda for the December '22 meeting. The Agenda was posted on time but not delivered due to postal strikes. Some members did not receive theirs until January!
3. MJ is updating her records and members were requested to provide up to date email/phone/address contacts – and an indication of how they would prefer to receive future Agendas/Minutes i.e. by email or post.
4. **Review of Minutes of the last full group meeting held on 6th. December 2022 and matters arising.**

The Minutes were accepted and signed as a true record of that meeting.

* PBr requested that initials referring to medical organisations / names are

 written in full in the future.

* + PB request for information about children’s referrals re children & teenage pregnancy - MD had asked the question but no statistics yet.
	+ Practice website to be updated soon
	+ Practice survey was released (closed 16th January 2023)
	+ Question on where Westbury is (statistically) compared with the National stats for Covid.
		- MD - difficult to get the figures.
	+ Question - Are ICB collecting figures for Covid now?
		- No
1. **A brief remark - MW**
	* MW wished to comment on how good he felt this GP practice was compared with others he has visited including praise for the parking, building etc. In his opinion, when things don’t work well he felt that it was usually when things are ‘out of WGP control’. Attribute a lot of well running to MD - so thank you. Other members concurred with this.
2. **Confidentiality statement for PPG members - CM**
	* Why required?
		+ If anything is discussed in confidence that you keep any data / information private.
	* Regular members requested to sign
3. **Minutes of last PPG AGM (25th February 2020)**
	* SC explained that she did not intend to review these due to the time delay involved (i.e. 3yrs ago)
4. **Chairperson’s review of the year –SC**
* Attached
1. **Treasurer's Report - MK**
	* No income, no expenditure throughout the last 3 years.
	* It was questioned whether the PPG needed a bank account now? The account was set up many years ago as it was used in association with the flu clinics (for teas/coffees) which is now not required.
	* Members felt that it wasn’t required and the money remaining (£230) should be (re)distributed to a charity/charities. To be discussed at the next Sub-Group meeting. Some suggestions were made - Dorothy House, Westbury Food Bank, White Horse Lunch Club for the Elderly.
	* **Surgery update – MD**
	* Reflecting on the impact of Covid and inability to have meetings which were missed
	* 400 new homes in the area meaning additional pressure on the Practice.
	* The building, it was felt, could cope with the additional patients however the main struggle is recruitment to positions.
	* Reference to Primary Care Network (PCN). WGP is partners with The Avenue combined total 42,000 patients. PCN Additional Roles Reimbursement Scheme (ARRS) allows to fund other clinical staff not previously available – e.g. can recruit a paramedic to help triangulate with the Practice, ARRS has allowed recruitment e.g. physician associate (who can see ‘on the day’).
	* Receptionists go through rigorous training (which is often missed/overlooked by patients).
	* WGP has been able to create have an Acute Care Team (ACT) which consists of individuals to deal with ailments
		+ Health Care Assistant (HCA)- take the observations, ECG etc.
		+ Nurse Practitioner
		+ Paramedic
		+ Pharmacist
		+ Acute Care Doctor
		+ Float GP - sign prescriptions, answer questions
	* A lot of clinicians in the Practice to help assess/treat - consequently seeing a Doctor/GP is not necessarily the best - however many patients seem to insist or demand for a GP appointment
	* Recruitment
		+ 3 GPs - including Dr. DH (starts 6/3), Dr. DS (remote), Dr. KB (remote) Dr. AB (was on Mat leave) back on KIT (keep in touch) days,
		+ 3 long term locums – Dr. MG, Dr. DB, Dr. S
		+ ARRS - taken on another Paramedic - expressed desire to work in Primary Care more. Another Physicians Associate, 2 new clinical pharmacists, LR (started 2 days ago), CL (starts 2/5) 5 new receptionists partway through training, x 2 new nurses (interested in diabetes - will do diabetes diploma)
		+ ‘Flu campaign - usual number vaccines delivered 4,400 - usually send back about 10%, 5,374 delivered this (2022) year
		+ Talks with Integrated Care Board (ICB) and Clinical Services Unit (CSU) to change the telephone systems. ICB have tendered for new system - MD doesn't yet know what the spec will be, unsure if we will be able to specify who/what we want. In any case the Practice will be changing systems soon as the current one is not fit for purpose.
	* Questions/comments from members
		+ AH - What time will the part time GP’s cover? Just short of the equivalent of 2 full time Doctors
		+ CR - Will the Practice consider charging for car park? No
		+ CR - Has there been a change (increase) in abuse from public? Probably no change (neither up nor down)
		+ PB - with more complex staff in the surgery, would it be sensible to explain the roles? Yes. A lot of info has been put together (still in progress), hope to publish in the White Horse News when complete.
		+ PB - can the surgery set the spec for the telephone system? Scott has stated what we ‘won’t’ have.
		+ BC - is anyone looking at statistics e.g. Wiltshire council - regarding the incinerator so that we have a base line (to check against in the future)? MD monitoring by Council (on air quality). Westbury is already a polluted town - so the increase in traffic likely to make a difference. Yes, we do have the data, the question is how we can interrogate!
		+ BC - How do we compare with other ICB’s?
		+ MK - is there any reporting on Covid? No, not directly.
		+ MP - Bath Clean Air Zone will increase traffic in the area!
		+ IH - what is the turnover of receptionists from leaving vs promotion? A higher number are leaving than in any other department.
		+ IH - Could there be something in White Horse News (WHN) to state that the people are here to help (to counter the criticism)? Consideration is being made.
		+ MK - how much is done in career development for staff? The Practice takes this very seriously (e.g. 4 staff currently have help with study) lots of development in the Practice.
		+ GC - is there a chance of restarting the drop in blood clinic? Yes, the Practice is looking to do this (but will need more staff).
2. **2022 Patient Survey - headlines/summary – CM**
	* + 2000 responses looking at a variety of parameters
		+ CM wished to focus on the comments on ‘what we do well’ and ‘what don’t we do so well’ - the responses were 50 50 good/bad
			1. ‘Do well’ comments reflected a general feeling that people were satisfied with the Practice and that the staff were attentive, caring, responsive etc.
			2. ‘Don’t do so well’ top 3 comments
				1. Problems getting through on the phone
				2. Lack of continuity Doctor to Doctor
				3. The 8am rush (i.e. too many people trying to get through 1st thing in the morning
		+ Comments from Practice (CM)
			1. It is recognised that some of the problems / complaints are felt by other Practices too.
			2. Action plan to be developed
		+ Comments from members
			1. BC Seems to be a disconnect between systems e.g. e-consult guides to call the surgery yet the surgery couldn’t take the call.
				1. CM stated that the Practice was looking at updating the software
			2. IH How many receptionists are answering the phones at 8am?
				1. 6 or 7
			3. DB Would the Practice consider extending the hours of E-consult (beyond Monday to Friday)? -
				1. CM stated that new software may assist!
			4. PB suggested WGP should use the White Horse News more as it has a wide distribution over Westbury.
				1. MD stated that Dr M was looking at the stats with a view of presenting info to the public more effectively
3. **Election of officers** -
	* + Chair -

SC has been in place for 10yrs and is happy to carry on -

* + - * 1. proposed by MW,
				2. seconded by PB

* + - Vice-chair -

DB - happy to carry on -

* + - * 1. proposed by MP,
				2. seconded by AH
		- Secretary - must be a staff member -

MJ

* + - * 1. proposed by SC,
				2. seconded by CR
		- Treasurer -

 MK - still required until bank account is closed

* + - * 1. proposed by SC,
				2. seconded by PB
1. **Membership of Sub-group**

Prior to the AGM, SC circulated members to see if any other member(s) wished to join the Sub-Group. No names were received.

* + - Therefore, the Sub-Group to carry on as before
		- The Officers plus the following members:
			1. DH
			2. IH
			3. MP
			4. CR
			5. BY
1. **A.O.B.**
	* + PB What is the surgery’s approach to ear syringing?
			1. Practice not commissioned to do, as lots of things can go wrong
		+ PB - if DNR forms are now redundant (replaced with a respect) are people being told to update to the new form?
			1. Nurses will do annual reviews (of forms) and update when required

MEETING CLOSED AT 2005hrs

1. **Date of Next Meeting: Tuesday, 6th. June at White Horse Health**

 **Centre at 6.30p.m.**

**Chairperson's Review of the Year PPG AGM February 2023**

When our last face-to-face AGM was held on the 25th. February 2020 none of us, in our wildest dreams, could have pictured what lay ahead. Less than a month later the whole country was in lockdown owing to Covid-19. To protect patients and staff, WGP was forced to close its doors to open access and to adopt an entirely different way of working. We all learnt a new vocabulary and looked forward to receiving our first Covid-19 vaccination to give us some protection.

Clearly, face-to-face PPG group meetings were out of the question and the decision was taken that 3-monthly updates would be issued to keep members informed of what was going on. A section was included for A.O.B. that members were invited to submit questions for at any time and further A.O.B. updates were issued as required. My thanks go to Mark and to Marie for all their help in these and, when it was deemed safe, allowing me to attend a few socially distanced meetings with them.

Most “normal” PPG activities had to be suspended during this time but the Annual Practice Survey did go ahead each year and Di Benham and I were able to meet with Mark and Marie to help formulate the questions and the Action Plans following these.

It was finally deemed safe for us to hold our first face-to-face full group meeting again in June 2022. This was more of a social occasion for us to meet again but a more formal meeting was included. Members were updated on the on-going changes that Covid-19 has brought to the Practice and the impact of them.

At our September meeting, Emma Higgins gave a presentation on the changes being made when the Clinical Commissioning Group became the Integrated Care Board on 1st. July 2022. If it works, this should ensure much closer working between all factions involved in patient care.

A few of us were able to help with the ‘Flu Vaccination Clinics that were held at WHHC in October.

In December, Mark updated us on the changes in the Primary Care Network since 2020 and the benefits we have derived from them particularly with regard to staffing.

Marie left WGP in February last year for pastures new and we are going to miss her knowledge and input. She has been replaced by Craig who has attended our meetings since last June and has played a major role in the Patient Survey for 2022.

As always my thanks go to Mandy and to Mark for their support and their willingness to meet or chat with me at any time. Also, to Di for her input as Vice Chair which, now that we are back to more normal working, I hope that she will be-able to do more easily.

Finally, looking ahead to 2023, let us hope that we are able to plan ahead, to work in a more usual manner and to develop the role of the Group further.