Castle Place Practice Patient Participation Group Minutes of Meeting Held on Monday 12 February 2024		
Attendees PPG	Dan Leggett (Chair), Pam Spencer, Rosa Tuffney, Fran Knight, Margaret Maltby and Andy Robertson	
Attendees Practice Staff	Annette Cook (Care Co-ordinator), Jagan Mathew (CPP IT lead)	

Agenda item		Action
1 Apologies for absence	Apologies had been received from Linda Chalmers, Sophia Beard and Dr Megan Parkin (CPP GP and Clinical Lead).	
	Dave Hutchinson would be absent from the group until November 2024	
2 Introductions	Andy Robertson was welcomed as a new member to the group and described his career to date.	
3 Minutes of previous meeting	The actions from the 27 November meeting allocated to Dave Hutchinson (namely, information on the 'prescription journey' and the newsletter) would be taken forward in his absence. There were no other items arising that were not covered in the meeting. The minutes of the meeting 27 November meeting were therefore approved as a true record.	
4 Practice update	 Dr Megan Parkin had provided an update by email on a) changes to patients' named GP and b) notification of test results. a) Additional GPs had been recruited and patients had recently been informed of their named GP by text or letter. If patients had a preference for a particular GP they could inform the practice The GPs worked in three teams to ensure that someone from each team was available every working day. When a patient requested an appointment, where possible this was allocated to their named GP. Where this would involve a delay - and the patient needed to be seen quickly - they would normally be seen by a GP in the same team. This reduced the number of GPs involved with an individual patient. Patients with acute problems might also be seen by an Advanced Nurse Practitioner (ANP) who will link in with the patient named GP (or the GP supervising the ANP that day) to flag up any concerns. If a patient preferred to <i>only</i> see their named GP they might have to wait longer for an appointment, depending on the number of sessions the GP worked. b) When test results were returned to the practice, the admin team sent anything requiring a review to the patient's named GP. 	

	 Patients can phone in for their results or check them online. Telephone waiting times were now averaging 4 minutes, though it was longer busy times (e.g. Monday morning). For results that were reported directly from hospitals, patients normally received a copy of the letter sent to the GP. Members noted that queues of patients often formed at the reception desk and asked how this might be addressed. In addition to the 	
	receptionist there were 3-4 people working behind the scenes dealing with queries. During busy periods the practice volunteers helped patients attending for an appointment to register their arrival on the online system and this was helpful.	
	Many patients still visited the reception desk to ask for an appointment, rather than phone or use AccuRx. In time - with more confidence in the online registration system (for patients arriving for an appointment), increasing familiarity with AccuRx and reduced telephone waiting times to book appointments - the queues should be reduced.	
	There was a finite resource to allocate to reception duties and this had to be utilised to best effect.	
5 IT Update	There had been regular meetings between the PPG Chair and the IT lead with the aim of raising the profile of the PPG. The PPG section of the website had been redeveloped to include an application form and information on the work of the group. There was now a need to develop content to raise engagement.	
	The PPG newsletter and the information on what to wear for medical imaging had been well received.	
	The online application form would be directed to the PPG nhs email account. Any hardcopy forms left in reception would be uploaded to this account by the IT lead. There had been three applications to join PPG and prospective members would be invited to an informal meeting to discuss the aims of the group.	DL/PS/ FK
	The Friends and Family (FFT) returns for the practice for December 2023 showed figures of 72% (very good) and 17% (good). The FFT asks for feedback from people who use GP services on their overall experience.	
	The practice was implementing advanced cloud-based technology for its telephone services. This was an NHS initiative due to be implemented in March-April this year. It would include a call-back	

	 service where calls did not connect to the practice. At present, in busy times, twelve callers would be placed in a queue. The thirteenth caller would be asked to call back. The new system would call the patient back automatically. This would have an additional benefit in that patients would not have to listen repeatedly to the recorded patient safety information suggesting they on dial 999, 111 etc. The PPG members section on the website would be renamed the PPG members hub. The IT Lead was thanked for his work on behalf of PPG 	
6 Terms of Reference	The ToR were agreed and signed off by all members present. They would be published on the website and reviewed annually	
7 AOB	In future PPG would establish small working groups to take forward various projects in areas of interest. One example could be based the 'Learn My Way' website, a free online learning resource with a section on 'Managing your health'.	
	 This had various subject headings, including: Registering with your GP's website Booking an appointment Ordering a repeat prescription 	
	These could be tailored for use in Castle Place Practice and published to help patients and promote the work of PPG.	
	There was also an NHS document on 'Young People's Access to GP Online Services', aimed at 16 year-olds, that could be circulated as a PPG newsletter and promoted at PETROC.	
	To raise the profile of PPG in the practice waiting area it was proposed to produce A3 posters publicising the work of the group. The posters would include a screen shot of the homepage, (including the URL) along with a QR code. The QR code would give direct access to the You Tube video on the work of PPGs on the website.	
	Content and design work for the poster would be shared at a meeting with IT on 11 March.	RT
	Members would consider holding an informal evening session to promote the group to potential members who might not be available for daytime meetings	
8 Dates of	13 May 2024	
future	09 September 2024	
meetings	11 November 2024 (AGM)	