**The Porch**

**Minutes of the Patient Participation Group Meeting**

**Tuesday 25th February 2020**

**Attendees:**

**Practice**: Dr Margaret Hatherell

 Susanne E Salen, Deputy Practice Manager

 Sarah Smith Reception Supervisor

Wendy Bray Carers Lead

**PPG Committee:** Yvonne Le Grys (YLG)

Steve Lumb (SL)

Pat Sharp (PS)

 Caroline Usher (CU)

Sue Dyke (SD)

Christine Coats (CC)

David Wilson (DW)

**Apologies**: Terry Simm (TS)

Terry O’Brien (TO)

Sally Hobden

Jane Dunn

**Introductions :** All

1. **Matters arising from minutes of last meeting:**

No matters arising

1. **Introduction to carers lead**

SES introduced Wendy Brake who is the new Carers Lead for the Porch surgery and advised Carers will be a standing item at every meeting. WB gave a brief update on the projects she is currently working on:

* Carers Afternoon Tea on May 6th at Corsham Town Hall. If anyone would be willing to help with setting up/making tea/coffee please inform WB
* Any ideas of speakers? Brunel shed – WB will contact Brunel Shed
* Young carers – the surgery are attempting to increase the number of young carers registered, the difficulty of identifying young carers was discussed and WB/SJS will be contacting local schools to try and engage with the Headteachers on how young carers can be identified.

***Update: Since this meeting many of the above initiatives have been postponed due to Covid19***

1. **Staffing and surgery update**

Jo Short – Reception has left

Naomi Vyze – Reception will be on maternity leave from July

Dr Susie Worsley – was GP registrar is now a retained GP

Registrars: Joe Witney, Cassandra Harrison and Annie Lehmann.

1. **Missed appointments statistics for 2019**

SES reported that since DNA’S have been recorded in 2012 the figures have reduced from 2488 in 2012 to 1222 in 2019, this is a huge reduction and SES thanked NV for her continuing commitment and being instrumental in reducing the number of lost appointments.

1. **Coronavirus – contingency plan**

MH advised that we are receiving daily updates from Public Health England. Currently the main advice is for patients who have symptoms of coronavirus or who have visited an at risk country they are advised to call NHS 111. If it is thought the patient has Coronavirus NHS 111 will organise for a medical professional to visit the patient and swabs will be taken. ***Update: since the meeting the changes have been very significant and all patients for GP appointments are telephone triaged.***

1. **Family and friends feedback/MJOG**

SES advised that as part of our contract it is necessary to ask for feedback from patients. This is done via a ‘friends and family’ feedback form which is available from reception. Patients are also asked via MJOG to provide family and friends feedback. After a patient has had an appointment they will be sent an electronic version of the form. The results for last month were:

How likely are you to recommend our services to family and friends?

* Recommend 93%
* Neither likely/unlikely3%
* Not recommend 4%

Feedback is acted upon and changes are implemented and this can be viewed on the PPG noticeboard in the reception under ‘You Said We did’.

1. **Balance of the PPG funds**

There is £9.21 left in the PPG funds account, all were asked how they would like this money spending. After discussion all were in agreement that the funds should be sent to Dorothy House.

1. **Flu Stats**

SES advised there were originally 4169 patients who were eligible for the flu vaccination

The targets issued by NHS to achieve are to vaccinate;

* 75% of patients over 65 years of age
* 55% of patients 18 – 65 years of age
* 50% of patients 2 -3 years of age
* No target for 2 – 17 years of age in the at risk category.

According to the Ardens report we have vaccinated 3171 patients out of 4160 which gives us an overall vaccination rate of 76% of eligible patients. 996 vaccines were given elsewhere – approximately 400 of these may be due to the school programme being carried out by Virgin Care. 596 patients declined the vaccination.

1. **Information provided by reception staff ref results**

The following question was raised? How does reception interpret results? SES advised that when a patient calls in for their results reception can only read the results in the results box; they are unable to interpret results as they are not clinically trained. There are some abbreviations to some blood samples e.g. C&E’s – kidney test, LFT – liver function test and it may be that not all reception staff are familiar with the abbreviations. SES showed everyone the training documents that are available to reception staff. MH reassured everyone that if the result is significantly abnormal, the GP will arrange contact with the patient.

1. **Area board event04/03/2020 Wadswick Green 2.30-5.00pm – ‘Have your say in what matters to you’**

All PPG members were invited to the above meeting and anything they would like adding to the agenda please pass to Jane Brake.

1. **Identifying veterans**

SES advised she has recently received a call from a Veteran who was questioning her about veteran coding. The patient has been involved in online discussions with other veterans and the subject of Veteran coding by GP’s was discussed. She asked if Veteran’s in the surgery were coded. SES advised the patient that guidance was created in 2016 and since then all Veterans have been coded.

The subject was discussed further at a Practice meeting and all clinicians reported they do code veterans. SES advised the reason veterans should be coded is because they have an increased risk of committing suicide and if they are coded as a veteran this may alert the clinician to this risk.

SES spoke to the patient after the practice meeting and she asked if she could add the codes to the online forum to see if they are used nationally and report her finding back to SES. SES agreed to this request. To aid promotion of Veteran coding SES advised the patient an article will be placed in the next newsletter and on the website.

1. **CQC Telephone inspection**

The CQC have changed the methods of inspecting surgeries. The last inspection was rated as satisfactory which meant we qualify for an annual telephone call instead of a physical visit. The telephone call took place on 14th February, Dr Davies, Dr Mohr, Rhonda Ward and Susanne Salen were all present at the telephone call. SES advised the call went well and it is thought the CQC rating will remain the same; however we are awaiting the official report. If we continue to maintain good standard we will receive annual calls and one site visit over the next five years.

***Update: we have had confirmation that our rating of ‘Good’ has been maintained.***

**DATE OF NEXT PORCH PATIENT PARTICIPATION MEETING:**

**Tuesday 19th May 10.30am (*Decision if meeting will go ahead will be reviewed nearer the time depending on the Government advice re Covid-19).***