**Minutes of the GPSH**

**Face-to-Face PPG Meeting**

**Tanworth Lane**

**Monday 23rd January 2023**

**18.30hrs**

Attendees:

[NAME] – PPG Meadowside (Chairman and Secretary)

[NAME] - COO GPSH

[NAME] - Medical Director, GPSH

[NAME] – PPG Yew Tree

[NAME] – PPG Park

[NAME] – Tanworth Lane

Apologies: [NAME] – Yew Tree

[NAME] - Park

[NAME] – Knowle/Blythe

|  |  |  |
| --- | --- | --- |
|  |  | **For Action**  **by** |
| **Welcome** | Chairman and Secretary (C&S) opened the meeting and welcomed those attending and thanked them for attending the deferred PPG meeting.  C&S welcomed [NAME] COO GPS and [NAME], Medical Director to the meeting. Members present introduced themselves and identified which practice they were representing.  C&S reported that apologies had been received from [NAME], [NAME] and [NAME]. There was a low turnout for the meeting, with members from Meadowside, Park and Yew Tree PPGs in attendance. |  |
| **Previous Minutes**  **GPSH Summary Update**  **Local PPG’s, GPSH PPG and Recruitment** | The minutes were approved, being proposed by [NAME] and seconded by [NAME], as a true record of the previous meeting.  **Actions Arising:**  C&S suggested that most of the actions identified from the previous PPG meeting would be covered by agenda items.   * One item regarding whether recording of DNA’s has resumed, now that the surgeries are reverting to patient consultations as before the COVID crisis and subsequential lockdowns, was raised. [NAME] stated that such data is being recorded and also the status of waiting times and availability of appointments was also being recorded. This data would be sent to C&S to forward to PPG members before the next meeting. * C&S asked whether the situation within GPS Healthcare regarding patients suffering from StrepA virus, Covid and Flu symptoms had improved during the last six weeks. [NAME] responded that the situation had improved following a peak in cases as well as usual winter ailments leading up to Christmas. The practices are back to normal for the season. This was welcomed by those present. * [NAME] reported that the situation regarding staff levels was ongoing with the current national situation. However, recruitment of reception staff is difficult when regarding the pay levels and comparison with local businesses, e.g., supermarkets. The situation is improving but there are still vacancies. [NAME] asked whether there were any training courses for receptionist staff and whether they are being properly trained in dealing with patients. There are still reported instances where the patient is unhappy with how they have been dealt with. [NAME] promised to look into the situation as all receptionists should be trained in dealing sympathetically with patients and be fully aware of all aspects of appointments and whether there is other means of dealing with problems e.g., pharmacies. * Regarding the support of PPG members to the vaccination centre at Monkspath, the issue of vaccinations is not as hectic as previously and support has not been required. C&S reinforced the fact that PPG members would support marshalling if required.   The six sites that are combined to form GPS Healthcare originally had a local PPG, representatives of which attended a GPS PPG to discuss issues raised and to support GPS going forward. However, the six local PPG’s have dwindled such that there are only three local PPG’s active at present. This situation has led to a suggestion by GPS Healthcare to have one PPG with representatives of local discussion groups attending.  It was agreed that the real issue was that there is a need to encourage patients to attend their local PPG with two representatives from each PPG attending the GPS PPG. There is a need for current members of the PPG to work with the respective Site Manager to encourage patients who are keen to meet and discuss how to improve efficiency and effectiveness of GPS Healthcare by highlighting identified problem areas. [NAME] agreed in principle but was aware that the PPG was a patient led meeting but GPSH would certainly interact. Therefore, it was agreed that with the support of GPS Healthcare, the PPG members need to check the accuracy of information on PPG noticeboards in their waiting rooms and develop a message that can be inserted in the GPSH website to encourage patients to apply for membership. C&S was tasked with developing a proposal for GPSH support for encouraging patients to join a local PPG.  C&S stated that he would have no problem with the concept provided interested patients were notified to him to ensure to clarify the principles of a PPG.  C&S requested a copy of the current GPSH organisation chart  Which would help with communicating with the correct responsible person. [NAME] stated that there was an organisation chart, still being completed, which he would send to C&S. It was understood however that both [NAME] and [NAME] would wish to be involved in any communication which was readily agreed. | COO  COO/  MD  ALL C&S  C&S  C&S  COO/C&S |
| **Social Prescribing:**  **Any Other Business** | [NAME] stated that there was still a lack of understanding by members of the PPG and patients regarding how Social Prescribing is being managed and where PPG members could possibly support the Social Prescribers. It would seem that some receptionists are unsure as well. There was agreement that not all activities could be supported due to patient confidentiality, but there were some activities where this was not a problem. It was suggested that [NAME] would discuss with the Prescribing staff and arrange for someone to attend the next meeting to detail what was happening and where we could possibly support in a non-medical way.  C&S believed that the items identified in the agenda had been covered by the general discussions at the meeting. He looked forward to further discussion regarding developing the PPG model and improving support to the GPS Healthcare by having discussion regarding social prescribing. There much to consider regarding representation of the six sites at the GPSH PPG.   * Have the results of the last Patient Survey been analysed and could they be brought to the next meeting. It would be useful if the members could get some idea of identified problems and good points. [NAME] agreed to arrange. * Regarding informing patients of changes to availability of medical advice at surgeries and pharmacies, there was some discussion where communication with patients needed to be considered where there a lack of availability of internet use and also the possible lack of understanding English, where this was not their mother tongue. | COO  ST |
| **Next meeting** | Following discussion, it was agreed that the next meeting would be held on **Monday 17th April 2023 at 18:30 hours**. This will be a face-to-face meeting at Tanworth Lane site.    Everyone was thanked for attending and contributing to the discussions. The meeting closed at 20:00 hrs. |  |