**DINNINGTON GROUP PRACTICE**

**PATIENT PARTICIPATION GROUP MEETING**

**Held at Anston Surgery Monday 31st July 2023**

**In attendance:** Jacqueline Huggins, Eddie Parry, Andrew Watson, Mary Gillgrass, Pat Naylor,

Joyce Cox, Annette Fagan, Valerie Morley, Sara Bown, Amanda Samhan,

Anita Redfern, Caroline Rothwick, Asha Ahmed, Kathryn Allen, Claire Keightley, Lauryn Elliott

**Apologies**: Maureen Rogers

**Minutes of the last meeting**

Agreed

**Matters arising**

* Some of the members had attended one of Kiveton Park’s Practice PPG meeting to see how they are run and what differences they have compared to ours. It was reported back that they were made to feel very welcome and it is very different to ours. They meet once every two months and at some meetings a GP attends and does talks for the group e.g., the last talk was about bowel cancer which they found useful. The meeting is 6.30pm – 8.00pm and they have young people attend. They have 10 patient members and 3 staff. .Tony Cowgill their Social Prescriber attends and gives input. They have a chair who holds the post for a year.

They went through a lot of information but were mainly presented to, rather than a discussion. They have a facebook page and are involved in a lot of community groups.

It was agreed that we prefer our meetings to more discussion based and action orientated.

* All members to have a think about what we want out of the PPG meetings, how it is structured and the roles of chair etc and discuss next time. KJA will update and send out the Terms Of Reference for the group.
* There was some discussion around a recent Facebook post on the Anston Matters page.
* A survey will be sent out to all PPG members to try and agree on a time for future meetings to be held.

**New Members**

Introductions were made by everyone for those who are new to the group. Sara Brown, Pat Naylor and Andrew Watson were welcomed to the PPG.

The PCN Social Prescriber link workers attended the meeting and the role of the Social prescribers and the Care co-ordinator were explained to the group as they will be attending future meetings.

**Group Discussion**

* A discussion was had around the importance of helping patients know more about what GP’s do and how our surgery works. The purpose of this is to improve patients’ knowledge and it will be more beneficial for them in the long run when having some involvement with the surgery. It was mentioned that the article in YourMag was useful, and this could be a good way to continue getting information out to our patients.
* A PPG Blog was mentioned to help get important information across, EP is going to draft this up and present at the next meeting.
* A discussion took place about why the Practice only does hospital blood for certain conditions.
* It was brought up that a diabetic group would be beneficial for those with diabetes who can attend without booking an appointment. CK informed the group that there an education programme called the ‘Desmond course’ which patients who are diabetic find useful, this is held at Rotherham hospital, but they are currently looking for more rooms in the local community.

**Capacity & Access**

* Equality of access to appointments was discussed. The practice is currently trying to make booking of appointments as straight forward and quick as possible for people of all ages and capabilities. We have an online booking system which is working very well, although some members of the group agreed this isn’t ideal for those who aren’t as computer literate. KJA and CK explained that reception will often help out these patients by filling in the online form for them or they can call the surgery and speak directly to our reception team who will do their best to help.
* It was brought up about continuity of care and that sometimes it can be hard to see their preferred GP. It was discussed that although this is something we are working on as a practice, unfortunately there will be times when this is harder to facilitate due to staff illness, annual leave or an already fully booked clinic. CR is working on a project where a link can be sent via mobile numbers will take patients directly to their preferred GPs clinic to self-book into.
* A discussion took place on the pressures that GP’s are under and the ever increasing demands from patients. Reason we are losing a lot of GPs or they only want to work part time.
* PCN roles have been introduced such as Pharmacist & Physio that can take workload off GPs. Patients don’t realise they can get an appointment with a Physio more quickly via receptionist rather than seeing the GP.
* We have introduced the call back scheme so that patients can be called back and don’t lose their place in the queue.

**PPG Privacy Policy**

* KJA had issued the PPG privacy policy and explained how PPG members data will be shared amongst the group and published on line as part of the PPG meeting minutes. It was checked that everyone was happy for this and their email addresses to be shared within the group.

**Patient Feedback**

* The national patient survey results have just been published. As usual Dinningon has not done very well but it is a very small group of 100 patients who fill it in so is not very representative. Dinnington Group Practice’s results have improved from last years. These will be discussed in more detail at the next meeting.
* The Practice is getting a lot more positive feedback in general from our patients.

**AOB**

* The link worker will be attending future meetings
* Request for a GP Partner to attend future meetings.

**Next Meeting:** Monday 4th September 3:30pm (unless new time to be confirmed)