



**Patient participation group meeting  
Tuesday Sept 13th 2022, 5-6pm**

**MINUTES**

Introductions – 4 patients present plus Camilla from the practice

**CQC inspection** our draft report has rated us as GOOD across the Board which is an excellent result and a testament to all the hard work of the staff teams at the practice put in. Over 100 patients responded to CQC's invitation to send feedback, which is a good number, and this was largely positive feedback. Some negative comments re appointment booking.

**Staffing update:**

Patient Support team: 2 colleagues have left last week from PST, plus Janan is retiring end of Sept. In December another PST colleague is taking up a development opportunity and progressing to a pharmacy qualification. This leaves us very short in PST. We are recruiting but it has proved more difficult than usual. One new person has started and we are actively interviewing other candidates.

Nurse team: HCA Wendy retires end of October. We have been understaffed with HCAs since the spring, but now have Ellie and Jo on board at last, this means we can now restart the few things we are still missing since the pandemic i.e. NHS health checks, also reviews for people who are at higher-than-average risk of cardiovascular disease or diabetes. We have not restarted them because the pandemic coincided with staffing changes for us, but we are now all good to go again next month.

GP team: Dr Dalton is now retired and again we are finding it harder to recruit than usual. We are currently having to use some locums, however it is largely a GP who did her GP training with us recently so it is not a "patchwork" of cover but is one person. We are hopeful that we will have a new salaried GP start in November.

Dr Median Jeronimo and Dr Gurung have joined us for the coming 12 months as GP registrars ie to complete their specialist GP training.

**GP appointment system:**

Patients are calling later and later in the day for our "critical service" ie where they are acutely unwell and ring on the day to speak to a GP. So we are proposing to implement an 11am cut off for the critical service – which is what we had anyhow prior to March 2022 when we changed the whole system. Calls after 11am will be taken from patients who are so unwell that they may require hospital treatment. Everyone felt this was a reasonable way forward.

2022 national Patient survey results see [GP Patient Survey \(gp-patient.co.uk\)](http://gp-patient.co.uk)

See the slides on our website for the headline results. Overall good– a pleasing number of the questions on slide 2 we score above national average. These are about patient’s experience with their clinician in the appt.

Camilla also flagged one question which has not been put into the slides: about continuity. We always score below the national average and this year is no exception: 20% as always or almost always or a lot of the time versus national average of 35%. See screenshot at end. We have had a number of retirements of very long standing GPs in past few years, which must have impacted.

Covid 19 vaccines & flu vaccines – 2 massive clinics at Woodhouse – 24<sup>th</sup> Sept and 8<sup>th</sup> oct. Both flu and covid vaccines to be given at once. Plus home visits & care home visits.

Any other business - none

Date of next meeting – 13<sup>th</sup> Dec 2022 2-3pm



**20%** usually get to see or speak to their preferred GP when they would like to

Hide breakdown

ICS result: 35% | National result: 38%

How often do you see or speak to your preferred GP when you would like to? Asked of patients who have a GP they prefer to see or speak to. Patients who selected "I have not tried" have been excluded

