

**Present**

Kevin Blakemore	Judy D’Arcy	Stuart Collie	Malcolm Simpson
Keith Anthony	Tracey Keogh	Sandy Sell	Chris Parry
Tricia Weidnor	Dr T Siva		

**Apologies**

Hilary Jones	Georgina McMasters	Liz Simmonds	

**Meeting Notes and Actions**

Point	Item	Action	Action By
1	Minutes of previous meeting were agreed (at the end of the meeting).		All
2	<p>Dr Siva addressed the meeting. He sees the role of the PPG as <u>“How can we make this a better place for patients?”</u></p> <p><b><u>Priorities</u></b></p> <ol style="list-style-type: none"> <li>1. Transport - how to get people in to surgery</li> <li>2. Increase capacity - using available resources effectively.</li> <li>3. Improve online access to surgery (re- sults/appointments, repeat prescrip- tions, access to records).</li> <li>4. Website - how easy it it to navigate the surgery website to access information e.g. opening times, FAQ’s etc.</li> </ol>	<p>Use the resources within the PPG to de- velop initiatives to address priorities.</p> <p><b><u>Ideas that need to be scoped</u></b></p> <ol style="list-style-type: none"> <li>1. Map the process to gain full access to the Patient Access and produce crib sheet - selling benefits.</li> <li>2. increase awareness of online facilities (Patient Access) - in house patient training sessions for one week with facility to sign up patients to the system (Online Assess Workshop). (More foot- fall in the mornings).</li> <li>3. Exploration of the process for web ap- pointments - usually appointments are more available on the phone. Gain understanding of the appointment process and what goes on to the offline and online access channels.</li> <li>4. Voluntary Transport - a local solution</li> </ol>	All
2a	Dr Siva advised that patients need to check test results on line or by calling the surgery. Although patients are contacted if results show concerns, results could be lost.		
2b	A senior pharmacist will be starting in January 2018 to reduce some work from GP’s to increase capacity.		

2c	<p>Transport Update from Chris Parry. - Hedgerley have Tracy Trust. Organised locally. Has own central co-ordinator. This is used for longer trips (e.g. John Radcliff). Drivers receive mileage fee. Stoke Poles offer similar through the Parish Council.</p>	<p>Further scoping required to reduce demand for home visits. Request would need to come from surgery after triage and assessment. Volunteer windows could be agreed to reduce demand for volunteer hours e.g. 12 - 1pm and 5 - 6 pm. Volunteers use own vehicles (no mileage charge)</p>	All
2d	<p>Home visits. Impact on GP resource. GP's are not responsible for patients getting to the surgery.</p>	<p>Exploration about how the PPG feels about home visits and what support can be given to the surgery. Consider the implications of home visit on resource.</p>	All
3	<p>Agenda item for next meeting: Review of available data.</p>	<p>Kevin will meet with Sue and gain access to surgery data e.g.</p> <ol style="list-style-type: none"> <li>1. Number of patients using Patient Access (Dr Siva estimates 20%).</li> <li>2. Number of home visits; who are these patients (is it legitimate).</li> <li>3. Number of blood tests available/taken</li> <li>4. Trends e.g. missed appointments, home visits, complaints</li> <li>5. Any other data.</li> </ol> <p>Kevin will distribute to the group prior to the next meeting.</p>	KB
4	<p>Next Meeting Monday 20th November at <b><u>6.15 pm</u></b></p>		