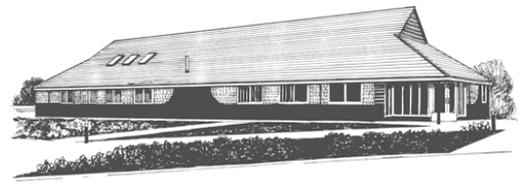


**CHURCH LANE MEDICAL CENTRE**  
**1 Orchid Rise, Scunthorpe, North Lincolnshire,**  
**DN15 7AN**



## **PATIENT PARTICIPATION GROUP MEETING MINUTES**

**Meeting Date: Tuesday 24<sup>th</sup> January 2023 6pm.**

**Attendees:**

Faith Woodcock  
 Kirstie Hornsey  
 Sophie Ferrier  
 JB  
 MB  
 HB  
 JP  
 KD (Vice Chair)  
 RG  
 DW

**Apologies**

Sue Scorer  
 ZS  
 LC  
 WS  
 BE  
 JR  
 YT

Meeting Minutes		
Item		Owner
1.	<p><b>Welcome and Introductions</b></p> <p>The meeting was opened by the Vice Chair. Members reintroduced themselves as there were some new attendees and SF passed on apologies from members and staff unable to attend.</p>	
2.	<p><b>Actions from last meeting</b></p> <p>No display materials have been provided as yet by PPG members, however there is still a basic PPG noticeboard in the second waiting area – new member present, MB, joined following seeing this.</p> <p>Messages for GP – staff clarified with GPs that when they ask patients to contact them if they need anything they actually mean to make another appointment rather than leaving messages. They will adjust their language to make this clearer.</p> <p>The reported errors with display on the website have been looked into by the website provider and they cannot see any issues. They concluded it could possibly be device specific to do with the screen resolution size. No other issues reported with the website.</p> <p>It was decided that a separate PPG email account would not be necessary as FW would be managing the email account so may as well stick with just her NHS one. It was agreed, however, that a WhatsApp group would be made for members who wish to join to share ideas prior to and between meetings. Strict guidelines would need to be set for this about what was appropriate to share/discuss – it was suggested that to start with this could be used to share ideas about displays within the practice. Sophie actually manages the noticeboards in the practice so is happy to help coordinate any new displays and a larger board could be provided for specific campaigns.</p>	

	FW is still very happy to collate and distribute information via her own email address for members who do not wish to be included in the WhatsApp group. HB agreed to be the administrator for the group.	
<b>Action</b>	<b>To let practice know if you wish to be included in WhatsApp group</b> <b>To set up WhatsApp group</b>	<b>Members</b> <b>HB</b>
<b>3.</b>	<b>PPG Members Agenda Items</b>	
<b>3.1</b>	<p><b><i>Preparations for CQC visit</i></b></p> <p>JB has kindly offered help with the CQC preparations due to his experience in this area and has already spent some time in the practice giving tips etc and reviewing paperwork. To explain, the CQC (Quality Care Commission) is an external body who carries out inspections and assesses the GP practice against a number of areas including patient safety and care. The last inspection we had was in 2015 which we were rated as good. We have not, as yet, received notification of a future visit but have been assessed remotely each month and advised a visit not currently needed although given the long time since the last inspection we would expect one soon.</p> <p>Currently all CQC inspections in GP practices are on hold due to the winter pressures with the exception of ones where there are serious concerns over patient care. JB was happy that the practice was on top of things in this area and FW reported that some of the current activity includes the clinical pharmacists working through the CQC search reports to ensure everything is up to date and correct. In addition to external inspections the practice also has a number of targets each year set (QOF – Quality Outcome Framework) regarding patient care in different health areas including dementia, asthma, mental health and diabetes. The practice has caught up with all reviews that were delayed during COVID with the exception of diabetes which is an area of priority at the moment.</p> <p>KH has already spoken with JB regarding the possibility of a CQC quiz for staff to familiarise themselves before the inspection and JB stated he was very happy to help with this and also come in and carry out a mock inspection.</p> <p>If the practice receives notice of an inspection the PPG, of course, will be notified and asked to be involved.</p>	<b>JB</b>
<b>Action</b>	<b>JB to work with KH to create CQC quiz for staff and to later undertake a mock inspection.</b>	<b>JB/KH</b>
<b>3.2</b>	<p><b><i>Online methods of support and/communication</i></b></p> <p>Discussion on improving awareness of the website and online services as many patients (including PPG members) have still not accessed these. The website has been refreshed again recently to ensure that it is user friendly to access online services by just having to press one button. You can now also request an extension to a sick note on there and send a non-urgent query.</p> <p>It was suggested that a text could be sent to patients with a link to the website so they can access the online services. Members felt that not all</p>	<b>JP</b>

	<p>patients were aware of the different ways to book an appointment and order prescriptions.</p> <p>It was also suggested that a QR code could be displayed that would direct patients straight to the website and practice newsletter (which again no one was aware of). This worked well with the patient survey.</p> <p>All members praised the new telephone system and raised no concerns.</p>	
<b>Action</b>	<b>Create a text message with the practice website link and create a QR code for the next practice newsletter (March).</b>	<b>FW/KH</b>
<b>3.3</b>	<p><b><i>Medication Shortages</i></b></p> <p>HB highlighted issues regarding getting a certain antibiotic from different pharmacies before Christmas. FW understood the frustrations around this which was caused by the Strep A outbreak and a national shortage due to high demand. FW advised that the practice does get notified of any medication shortages and these are forwarded to clinical staff so they are aware. In addition, our clinical pharmacist also looks at patients on these medications on a regular basis and swaps them if needed. Unfortunately, the antibiotic issue was nationwide and beyond our control but we did work closely with pharmacies who we would contact each day to see what they had in stock and try to prescribe accordingly.</p>	<b>HB</b>
<b>3.4</b>	<b>Locums</b> – PPG member who raised this had to leave prior to item being discussed so it has been carried forward.	
<b>4</b>	<p><b>Update from GP practice</b></p> <p>The practice had a busy couple of months with the Strep A pressure, then colds/flu.</p> <p>They have some new staff members: Sabina, Clinical Pharmacist and a new Healthcare Assistant (HCA), Amanda. Helen (one of our other HCAs) has nearly qualified as a Nursing Associate and will then be able to train to take on some of the nurses duties including immunisation and smears. We have a vacancy currently on reception, however we are recruiting for a replacement.</p> <p>Dr Javaid has now qualified as a GP trainer – new student starting in February. We have reviewed all the nurses’ and HCAs’ rotas to make sure enough appointments of each type are on there and we will be reviewing again after three months.</p> <p>We have expanded to online registrations, and we are only practice in North Lincolnshire offering this- this is working very well! The number of patients registered is continuing to grow. Our total now is 9551.</p> <p>FW is attending online PPG training in March and will report back at the next meeting.</p>	
<b>AOB</b>	None - meeting was closed by Vice Chair and thanks given to those who had attended. It was agreed to stick with the 6pm meetings due to higher attendance.	