

TSMC PPG Meeting Minutes		
Date: 6 th August 2020	Time: 07:00pm – 08:30pm	Location: Meeting Room
Minutes Taker: Mayola Dsouza- Admin		
Chair- Narjis Chohan		
Attendees	Role	
Ms Pauline Cowan	Patient	
Mrs Gwendoline Joseph	Patient	
Mrs Susan Ashford	Patient	
Mrs Colleen Bowen	Patient	
Ms Samantha Henfrey	Patient	
Mrs Jennifer Aguoru	Patient	
Dr Ali Abbas	Partner	
Mrs Narjis Chohan	Managing Partner	
Ms Charleen Mullins	Deputy Practice Manager	
Mrs Therese Beveridge	Receptionist	
Mrs Mayola Dsouza	Administrator	
Apologies		
Mr Mohamed Nasim	Patient	
Mrs Mary Sagoe	Patient	
Mr Suhail Shikh	Patient	
Mr Younes Hamade	Patient	
Mr Shailesh Ramdeehul	Patient	
Ms Helen Ashley	Patient	
Mrs Lynn Broughton	Patient	

Topics		
	Issue	Action
1.	NC- Lets start by introducing ourselves. NC- Introduced herself and the new practice and patient group members.	
2.	CM- Went through the last meeting minutes and addressed all the issues which were discussed during the last PPG meeting which have now been actioned.	
3.	Practice update (COC result, new staff etc) CM- We have a new administrator and 3 new receptionist recruited this year, health care assistant Shivonn who joined in February, practice nurse Teelo who joined in December, salaried female GP Dr Rahman who just joined last month and myself who has been appointed since January for the role of Deputy Practice Manager. Building Maintenance CM- We have decorated the building colours are exactly the same repaired all cracks. CM- Just to tell u a bit more about how we are operating during COVID. The front doors are closed and we are using the intercom to communicate with patients. Drs are now working via telephone triage system so when you call reception, they will book you in for a telephone	

<p>consultation and they will advise you will receive a call back and if the Dr thinks that you need to come in than the Dr will give you an appointment to be seen face to face. Appointments for nurses/HCA for blood test, blood pressure etc, we are inviting patients in the practice.</p> <p>CM- In December we had our CQC visit.</p> <p>CB- Have we caught up with the CQC coz for the last time we had gone down.</p> <p>NC- The last visit we were good, with the patient GP survey we need to improve and that's where we need all you help.</p> <p>CM- Our CQC report showed we were rated Effective as good but our overall grade was required improvement, they were not happy with our GP survey results as well as work which should have been in place from the last DPM.</p> <p>SH- How do you send the summary out?</p> <p>NC- It is the actual government who send them. Only 18% of our population gave their feedback and the CQC rated us based on the GP survey.</p> <p>CM- Why have we got require improvement? They were not happy with our staff records and our risk assessment, risk assessment was done but we did not record the action that was taken.</p> <p>NC- In infection control they picked up that the mop heads was touching each other.</p>	
<p>4. GP survey results 2020</p> <p>CM- Went through every question on the GP survey comparing results of 2019 to 2020.</p> <p>CM- Our report was low, I will go through the report in 2019 and tell you where we stand in 2020, please give us your feedback on how we can improve.</p> <p>CB- Why couldn't the patient get through the phone?</p> <p>NC- This is anonymous survey so until the patient tell us we cannot find out for how long they have been waiting to get through.</p> <p>JA- It's much easier to get through over the phone than before.</p>	<p>NC- In 2019 after the survey we had 3 receptionist answering the calls and 1 to meet and greet, after this survey 2020 we have 5 receptionist answering calls in the morning and 3 in the evening.</p> <p>NC- Whatever feedback you give us here we are going to discuss it in or reception meeting.</p> <p>NC- TB to speak to the reception staff.</p> <p>NC- Reception staff to acknowledge every patient in the practice.</p>

GJ- I was in the surgery before the lockdown, I walked in and stood for about 6 minutes and nobody bothered to look up. Than one of the staff got up and walked towards the side offices on the ground floor. I think this is why patients complain.

SA- Do you have only one phone number for the practice? And what if the pharmacist wants to contact the surgery?

NC- for patients over 75 years we have a separate number. Pharmacist sends us an email or they call us on our bypass number.

CB- When a new receptionist or a nurse join do they have a training?

CM- Yes. 2 weeks of training by the senior receptionist/ Senior nurse.

SH- Do they have online surveys?

CM- Just today I have read that they want to change it to online.

SA- why are we not offering video appointments?

CM- When it's a telephone triage and the doctor thinks the patient needs to be seen that is when he offers a video call. Reception cannot offer video calls when booking an appointment.

NC- All these issues we have addressed to Dr's, Nurses, HCA's, receptionist/ admins and now are patient group so we can get feedback from all areas and then we make the changes.

CB- Can we have one patient record list for those people who do not use technology?

CM- I do not know how often you use the surgery but have you been referred to somewhere else if needed?

JA- My younger son was having some difficulties so I came in for my appointment and I was a complete mess. From the reception team straight to the doctor it was awesome. The doctor I met did a referral for me and the very next day I got a call, the referral gave me a massive support. I can't stop thanking the doctors enough. The reception team was outstanding I knew I was in the right hands.

NC- If a patient is hard of hearing, we need to mention in patients records and update in patient alert box.

	<p>GJ- The doctor might refer you but it's the team that's monitoring the referrals who decide. I had a referral last year the doctor referred me but it got rejected. The doctor called me and helped me out to sort my referral. I got an appointment in two weeks.</p> <p>SA- It also depends on the doctor, my husband had problems with his tablets he spoke to Dr Ishaq she tried getting through to St Georges the consultant for cardiology and there was no one available. In the end she had to get in touch with the consultant in South Hampton and he got back in 5 days with the answer Dr Ishaq was brilliant.</p> <p>SA- Do CQC come in every year? NC- CQC are suppose to come in every 3 years but if they have concerns then they will come in between.</p>	
5.	FFT/NHS Choices feedback	
	<p>CM- These feedbacks are from Jan- March and the good feedback comments are Satisfactory, good, efficient, helpful staff, quick, very good, friendly and approachable. The not so good are mainly because of not getting through over the phone and appointment time (waiting to see the GP)</p> <p>CM- We had introduced blocks when seeing a patient face to face before Covid- 19, every four patients we put a block slot so the doctor could catch up.</p>	
6.	PPI Rep Update + Volunteer to man the door.	
	<p>CM- Pauline volunteered the last time as the PPI Rep. PC- I only got to know the evening before the first meeting since it was late notice I could not attend. The second time I wasn't well. I haven't been for any of the meetings.</p> <p>NC- Would you still like to volunteer? PC- Yes but please give enough notice in advance.</p> <p>PC- When will be next meeting? NC- We haven't heard from them, it will be a virtual meeting once we get to know we will inform you.</p>	<p>CM- To inform PC in advance if any meetings are scheduled.</p>

	<p>CM- We are looking for a volunteer for the front surgery door. If we were to open ther door would someone be able to help us?</p> <p>NC- If you know someone please let us know.</p> <p>CM- we have applied online but unfortunately we have not received any reply.</p> <p>JA- What are the timings?</p> <p>NC- Depends on the volunteer what time they can give us.</p>	
7.	A.O.B	
	<p>GJ- How do you conduct the training for the receptionist?</p> <p>NC- They have a two week induction where they are shadowed, they also have a pack they go through so once they are confident they came on the front line and everything is signed. After they complete a month the manager reviews them to see how they are performing and if they need any further training. The training is conducted by our senior receptionist.</p>	
	<p>CM- Any ideas how to run our flu clinic this year?</p> <p>PC- It could be done alphabetically.</p> <p>NC- We normally do it how the government advise us like over 65 years and then with chronic diseases. This time we are planning to make it Mon- Sat daily clinics.</p>	
	<p>CB- Are you still going to have Saturday clinic?</p> <p>NC- Saturday we are open 9.00am – 1.00pm pre bookable appointments only.</p>	
	<p>SA- People I know not around here have already got appointments for their flu jabs.</p> <p>NC- The reason why we are not sending out appointments invite is because Pearl chemist will advise us once the vaccine arrives.</p>	Dr AA- We can start advertising that the flu clinics will start soon.
	<p>JA- Sending out text messages to relevant person. We need to try our best to deliver what we promise. We have to make them feel everything they want we have it. We have to be welcoming.</p>	
	<p>SA- Can we have this meeting once in 3 months?</p> <p>NC- The CCG have advised us to have it every 6 months.</p>	
	<p>CM- Can we put your names on our website to say that you are a part of patient group?</p>	All members agreed to have their names on the website.
	<p>CM- Thanked all for their time and for attending this meeting.</p>	