

**Higham Ferrers Surgery**  
**Patient Participation Group Meeting**  
**8<sup>th</sup> February 2024**  
**Minutes**

**Attendees:** MG, ER, DG, MD, CB, SR

**Apologies:** DW

**Agenda Items**

**Introduction:** Some members were supposed to have attended the meeting but did not show or send their apologies. MG asked the present members if we should proceed or wait in case anyone showed up late, the present members all agreed to proceed with the meeting.

MG handed out numerous documents to the members for the meeting.

**Confidentiality Agreement:** Some members who joined the HFS PPG last year were asked to sign a confidentiality agreement, however some did not. MG explained and showed a copy of The Confidentiality Agreement, which means that other than in the meetings, nothing regarding patient information or sensitive information is to be discussed outside of the meeting or published in any format for the public to see. DG and SR are the only two members that needed to sign this agreement, which they did.

**Terms of Reference:** MG advised that he has met with the presidents of the ENPA (East Northants Patient Association) and has discussed with the HFS Practice managers that a 'Terms of Reference' should be instated into the PPG so that there is a set course of guidelines and rules to follow.

MG went through the ToR and the current members of the HFS PPG decided on some changes:

1. The PPG shall not exceed more than ten members.
2. Membership of the PPG is for 3 years, after this a member is to reapply for their membership.
3. Any member of the PPG can be nominated and elected in an official role (if the PPG wish to elect officers i.e. Chair, Vice Chair, etc.) which will run on a two year term, with the option of re-election for a further two years. Up to a total of seven years, after which their membership will cease.  
This will also mean if the member is not elected for a 2<sup>nd</sup> term their membership will also cease.  
*(The elected term will restart the members previous membership time)*
4. Any member who does not attend two consecutive meetings will be removed from the HFS PPG (regardless of any apologies made).
5. Any member who does not attend a meeting without sending their apologies for non-attendance in advance will be removed from the HFS PPG.

All other aspects of the ToR were agreed upon by all members of the HFS PPG.

As the ToR was accepted by the current PPG members MG advised that it would mean the removal of some members who did not attend to this meeting, have not sent their apologies for non-attendance and have not attended the past two meetings consecutively.

MD asked which members they were, MG advised the group the names of the members. The remaining PPG members agreed for them to be removed from the HFS PPG.

**Appointments/GP Patient Survey/Online:** MG had handed out the Agenda and GP patient Survey Action Plan at the beginning of the meeting.

MG went on to advise that the GP Patient Survey came back quite poor, mainly in the areas of appointments and getting through on the telephones.

An action plan has been drawn up by the practice which shows they are getting a new telephone system which should start to help with the bulk of the morning rush by offering services like call-back waiting. The practice will also only be dealing with triaging and booking patients in, in the mornings. Any patients who call for results or admin/prescription queries will be told to call back at the appropriate and relevant time later in the day.

SR and DG advised the group about some of their own frustrations with the system and service at the practice, MG apologized and understood these issues but stated that as the practice currently don't have the staff to answer the

phones and they don't have the doctors (nationally, not just HFS) it is something we are working on but the public do need be patient while the practice can try to resolve these issues.

MG also advised that the practice is recruiting new reception staff with the idea of having three in the morning to answer calls and that Dr Umrao is due back the mid-to-end of Feb so a lot more GP appointments will become more available.

DG brought up the issue of patients in the mornings waiting outside the practice and taking appointments before those who are calling get a chance. DG also advised that other surgeries refuse to book patients who que advising them to call like everyone else.

MG advised that this has been brought up in the practice already, staff have been told not to tell patients to que up outside and to call the practice. However it has been decided that at the moment the staff cannot refuse to book patients in who do que and that we do currently have one receptionist who takes calls and one who sees the que, once the que is dispersed the 2<sup>nd</sup> receptionist answers calls as well.

MG also advised that there is also an Extended Hub service, which offers OOH appointments and where our reception staff will triage and send patients for certain ailments, i.e. Back pain going to physio, skin conditions being referred to dermatologists or pharmacies etc. However when patients refuse to use Hub services and demand to see a GP then this is also what takes up appointments slots when they are not needed. MG also advised that this issue is national and is something that the NHS and PCN are going to be looking into a lot more this coming year.

MG also stated that NHS England and the PCN are trying to encourage more patients to sign up to the NHS App where they can see their own care records and in effect reduce the amount of certain calls coming through i.e. patients calling up for their blood test results can be seen on the NHS App once the patient has signed up, rather than calling the practice.

MG also advised the group that if they have not already then to sign up to Anima and to start spreading the word for patients to sign up and start using it for non-urgent problems (as the practice have several days to look at each Anima case and respond). MG advised that Anima is manned by a clinician and admin and if more people start to use the triaging system then it would free up the telephone lines a bit, resulting in less waiting times for patients to be answered who do phone.

**Virtual PPG Meeting:** MG had brought up the discussion of maybe setting up a Virtual PPG meeting. This would mean a member of the PPG taking on the role.

CB asked if the minutes of these meetings were published, MG advised they are on the website and the PPG noticeboard in the practice. ER asked that if patients had any questions are they able to ask them. MG advised they can email the practice or bring up the issues with yourselves (the PPG members), who can then raise them at the PPG meetings.

The group decided that as the public are able to do these two things to raise issues with or about the practice with the PPG, then a VPPG is not needed at this time.

**Spring Newsletter:** MG asked members of the HFS PPG if they have any ideas for this Springs Newsletter. DG asked for a time period to respond, MG advised within the next few weeks as he would like to have one out by March.

**Voting:** MG asked if the PPG would like to vote on a committee, ER stated that at the moment he does not feel a need, the rest of the group agreed.

**ENPA:** MG advised that as we have removed members of the PPG due to the new ToR being agreed upon, we need new representation at the ENPA meetings. DG advised that he is happy to do this, once we have more members we may choose a 2<sup>nd</sup> representative to join him. The rest of the group agreed.

### **Date of next meeting**

Spring/Summer 2024