**PPG Minutes 4th March 2025**

**1: Welcome and introductions**

Attendees: Ian Goodwin, Beryl Fletcher, Carol Hatton, Peter Marvellous, Rani Ryatt (patients)

 Helen Hatfield, Kate Porter and Dr S S Kailey (practice staff)

Apologies: J Smith, M Kember, V Smith, P Dewberry, C Norbert, H Wilson, G Burlington, P Jaganath

Helen introduced the staff present at the meeting.

**2: Ground rules – Constitution:**

Explanation given that the PPG is to work through issues and not for complaints, but for constructive feedback. Copy of constitution given to new members.

**3: GP Dr S S Kailey talk/answer questions:**

Dr Kailey introduced himself, he is the lead GP Partner at Northumberland Heath and has been at the practice for over 30 years. Over the last few years the practice has stabilised, we merged with Parkside Surgery, which was a big step. Dr Dhaduvai was the lead GP from Parkside but has now retired. We have employed more salaried GPs over the past few months, most GPs work part time.

We are extending the practice building to add more clinical rooms and change the administration rooms, building works have started but have paused currently due to a gas pipe that needs to be moved.

We have different ways of accessing appointments, in the last year a new cloud telephone system was implemented. On the day appointments open at 8am. AccuRx online triage forms for non-urgent problems can be completed by patients. The reception team are trained to navigate and guide patients to appointments with the correct clinician, they are the front line and doing a difficult but fantastic job.

We have different teams, including GPs, Nurses, Pharmacists, Admin staff and Management. All the different elements come together, to run smoothly. We are not always right but happy to listen and improve. We have some long serving staff that have been with us for over 30 years. Our clinical pharmacists are quite new roles within the surgery, they come under the new ARRS roles funded by the government. The clinical pharmacists can help with chronic conditions, medical queries with medication and hospital discharge summaries as these usually have a long list of medication changes.

Home visits from GPs are available for those patients who are unable to come to the surgery, this service is triaged, and a GP will make a phone call first before a home visit is made.

It was asked if we would ever have a pharmacy on site, Dr Kailey said it has been approached before, but there are other pharmacies close by and it would take up room space which we need for clinical rooms to be able to offer more face-to-face appointments.

**4: NHMC Brief update:**

**New Staff –** New female GPs Dr Ragheb, Dr Oozageer, Dr Gogate have started with us, unfortunately Dr Oozageer leaves us at the end of the month as she is moving to Australia, we do a have another 3 female GPs starting with us soon.

We have 3 partner GPs, 3 male GPs, 3 female GPs. We do not have a paediatrician but our GPs are trained will do 8 week baby checks.

**Appointments –** Are now booking 5 weeks in advance.

**Building Works –** The ongoing building works will provide us with 3 clinical rooms and 2 bigger administration rooms, and additional management rooms, we are currently waiting on the removal of a gas pipe, which has delayed the project.

**5: Continuity of Care**

Before the meeting the below questions were sent to all PPGs members to think about continuity care within the GP practice.

*What is an acceptable wait time for a routine appointment?*

Around 2 weeks, for routine appointments such as knees or back, but would depend on ailment and if urgent on the day.

*Do you have a preferred GP?*

How important is it to see the same GP? Yes it is, they know your background and to have consistency. It was also mentioned that some of the PPG members have preferred GPs which they like to see.

*What do you think are the benefits for consistently seeing the same GP?*

Seeing the same clinician for the same problem over a period of time helps with continuity. Also if not known to GP before appointment can feel rushed.

*How could the practice promote continuity of care?*

Possibly a call after the appointment from an administrator or manager to see how they got on. We do already send out texts after appointments that ask how we did today. It was added to make these more personal.

We will look to do another survey and place in the waiting area for one month for patients to complete as they wait, we will add the above questions to see what feedback we get.

Helen explained we have Face to face appointments and telephone appointments, which are all 10 minute appointments. For a GP working all day, their day will consist of 10 face to face morning appointments and 6 telephone morning appointments. 10 face to face afternoon appointments, and 6 telephone afternoon appointments (or 3 telephone afternoon appointments plus a home visit). These are the recommended British Medical Association guidelines for appointments.

We are open 8am to 6:30pm, with Monday and Thursday opening at 7am. The surgery is open to be used by the HUB on weekday evenings and Saturdays, this is a mixture of 7 practices from North Bexley with GPs and Nurses.

It is one problem per appointment. Prioritise what is needed most from the appointment, if the GP has time they will try to do more. COPD/Diabetic reviews are 30 minutes. A GP may ask you to book a double appointment.

**6: NHS App –** We have been promoting the NHS APP in the practice. We held a drop in session, with 31 patients attending. We would like to run the session again but may look into an appointment type system as it was quite busy at times.

Currently you can only book GP appointments via the NHS APP.

**7: Previous Minutes**

We were asked to see if there has been any improvement on patients not attending appointments - Did Not Attend (DNA).

December 23 – 218 DNA’s January 23 – 227 DNA’s

December 24 – 159 DNA’s January 24 – 190 DNA’s

We have seen an improvement of missed appointments; we think this is due to the new telephone system. There is the facility to check and/or cancel your appointment via the phone system by calling the surgery telephone number and selecting 1 for the check and cancel line. This is used around 30/40 times a day.

Appointments can also be cancelled through the NHS App.

A text reminder is also sent one day before your appointment.

**8: Any other business**

Blood tests – Normal results now have a quick turnaround. We are currently piloting a new blood result reporting system.

We are also asking patients to book follow-up blood test results appointments with the same GP who requested them for continuity of care.

**9: Date of next meeting & time**

Date and time to be confirmed, but we will aim to meet in the summer time.