

6	<p>Telephone Waiting Times and Online Appointments</p> <p>PPG Chair said there are still issues with telephone waiting times and online appointments. SP said we have a lot of data on our phone lines and statistics are exceptionally better. We're clearing calls a lot quicker and we're utilising staff all over the Practice to answer calls during our busier periods. Dr Wadhwa said we're no longer hearing that Patients are being disconnected or that they can't get through, etc, which is good news. AG said for the first time, calls are being cleared by 8.30am, despite circa 100 Patients calling from 8am.</p> <p>AG said online appointments are available and have been for several months now. SP said although we're not offering as many online appointments as we would like, we are offering them and we are continuing to analyse our appointments to see when we can increase the online appointment capacity.</p>	
7	<p>CQC Inspection</p> <p>PPG Chair said it looks like we haven't been rated of 'Caring' and 'Responsive' and this appears to be because we haven't got Patient feedback data. SP said CQC obtain data from the NHS National Survey and this is what is used to rate the Practice. SP said the previous NHS National Survey was carried out prior to the caretaking arrangement commencing, therefore CQC could not use this. SP said we can do a Patient survey at Practice level, but CQC won't use this for rating purposes.</p> <p>Dr Wadhwa said he would like the PPG to read the current CQC Report, as well as the previous one, so they have a comparable. Dr Wadhwa said we were disappointed to not get a 'Good' rating, but this was out of our hands due to lack of data. Dr Wadhwa confirmed the CQC Inspector was extremely impressed and acknowledged the hard work that had been put in and great improvements had been made.</p>	
8	<p>Date and Time of Next Meeting and possible Open Day</p> <p>PPG wanted to know when they/we are able to run a fair. Dr Wadhwa said we need to discuss this together to see then it would be best to run this.</p>	
9	<p>Other</p> <p>Dr Wadhwa said we're thinking of setting up an EPPG (Virtual PPG), as there are many people who wish to get involved, but can't physically come into the Practice. Dr Wadhwa said we could invest in more technology: speakers, projectors, etc, to help with this.</p> <p>PPG Chair said she feels F2F PPG meetings work better in her opinion. Other PPG members agreed with the PPG Chair.</p> <p>PPG Chair wants to have some space at the Practice to be able to liaise with Patients. They are looking for us to provide them with a room, tables, chairs – so they can do a set-up.</p> <p>PPG Chair asked what was happening with Safeguarding, Cancer (vulnerable) Patients. Dr Wadhwa said we're doing a lot of work on this and we're continuing to</p>	

	<p>do more and more work on this. We're now proactively contacting Patients and getting their bloods taken, rather than waiting for Patients to contact us. We're taking a proactive approach on everything now, as this is the best way to provide great care.</p> <p>Dr Wadhwa said he wants to set up a PPG Equity Group, which targets specific types of groups of people, for example: LD Patients, different Ethnicity Patients, Carers Group, etc. Dr Wadhwa said we want to set up specific Champions amongst our staff, who would be 'Champion' for LD Patients, etc.</p> <p>PPG Member asked what happens when Patients call up with more than one problem, as a single appointment isn't long enough. SP said we do make double appointments, where we are aware that there are multiple issues. PPG Chair re-confirmed this was happening already. PPG Member said we should maybe make it clearer that we offer double appointments. SP said we could risk Patients requesting double appointments all the time. Dr Rao said we can train our staff to be more cautious about this.</p> <p>PPG Member said we could have 2 Clinicians who are separate to day to day appointments, who purely deal with minor issues which shouldn't really come to GP Practices. SP said our staff have been trained on sign-posting already, so we are referring Patients to other facilities who can deal with certain queries. PPG Member said a lot of Reception staff are not always nice and if they explain things in a better way to a Patient, they have a better chance of getting a Patient to accept what they are saying, especially when there are no appointments left, or a Patient is coming in for something an external facility can deal with.</p> <p>PPG Chair has asked how we're getting on with our recruitment. Dr Wadhwa confirmed recruitment is going extremely well. We now have 3 ANPs, Phlebotomist, 3 In-House Pharmacists, Regular GP's, Social Prescriber, etc.</p> <p>PPG Member said is there no way of limiting the amount of Patients who are at the Practice, if we don't have enough Clinicians to meet the demands. SP said we can't stop people from registering as we're not allowed to do this. PPG Member said she wasn't aware of this. SP confirmed we do look at data to see what our busiest days are and we plan our ledgers based on this information.</p> <p>PPG Member asked for data on our appointment slot breakdown, i.e. how many online appointments, pre-bookable appointment, on the day appointments, we are giving.</p>	<p>AG/SP</p>
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