**Bridge Cottage Surgery**

**Patient Participation Group Meeting Minutes**

5th February 2024

Chair: David Bell

Present: David Bell, Jan Jacklin, Yvonne Bartlett, Sandra Saunders, Gerard Macdonald, Jaqueline Pountney, Shaun Nikiel, Debbie Crossley, Neil Burns, James Young, Anne Land

Apologies: Carolyn Clark, Henry Bowrey, Sue Fletcher, and Debbie Shearly (Debbie Shearly has resigned from the PPG Group but will remain a vPPG member)

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| **Item** | **Notes** | **Action** |
| Minutes from Last Meeting | Minutes were agreed as accurate |  |
| Matters Arising | * DC amended flowchart but will add further PCN staff and re-circulate.
* Extra chairs in reception area for patients waiting to book an appointment.
* NHS App how to guides available.
* Picture hooks removed from internal walls
 | DC – amend flowchart with PCN staff |
| Practice Report | **PCN Update*** ***New PCN Mental Health Clinician*** – Luke can refer to psychology (primary or secondary care). He is a prescriber so will be initiating and monitoring meds that he or the GPs have started. 30-minute face to face appointments on a Thursday morning at Bridge Cottage Surgery. He can issue sick notes that are mental health related. He cannot see Under 18-year-olds, those who are pregnant or have dementia.
* ***Social prescribers*** - 4 social prescribers, one who deals with under 18-year-olds. They help connect people with local community activities and services that can help improve health and wellbeing, such as art classes, gardening clubs or exercise groups, or providing more practical advice, such as debt or housing issues.
* ***First Contact Physio*** – Can see patients with Musculoskeletal (MSK) conditions which can affect the joints, bones and muscles and sometimes associated tissues such as nerves.  They can provide advice and exercises and are able to refer on for physiotherapy, xrays and scans.
* ***Clinical Pharmacist*** – He is a prescriber and is mainly being used to do medication reviews and clinical audits.

**New eConsult Triage System** * Dr Nick Mistry attended the meeting to explain the planned new eConsult triage system.
* The start date is to be confirmed but is hoped to be mid-March / early April.
* The Practice requested feedback from the PPG regarding the information to be sent out/given to patients to inform them of the new system.
* A copy of the leaflet will be sent with the minutes for feedback to DC.
* It is yet to be agreed the opening times for submitting an eConsult, but this is unlikely to be the entire opening hours of the Surgery.
* eConsult will be amended for us from the start date to prevent patients being told to contact the surgery on answering the questions. The eConsult will be submitted for the Surgery to assess and respond to the patient.
* It was agreed that clear instructions need to be given to patients on how to book appointments.
* Phase 1 will not include nurse appointments – these will be bookable as currently.
* Patients should be encouraged to use the eConsult system unless they are unable to, in which case a receptionist will complete the eConsult with them and submit on their behalf.
* PPG were asked which, if any, local newspapers should be used to communicate to patients. SS offered to provide DC with a list of them.
* Suggested that a post on the local facebook pages may be useful.

**Pharmacy First**When the Pharmacy First service is up and running and pharmacists have prescribers available, they will be able to deal with:* Acute Otitis Media (1 to 17 years)
* Impetigo (1 year and over)
* Infected insect bites (1 year and over)
* Shingles (18 years and older)
* Sinusitis (12 years and over)
* Sore throat (5 years and over)
* Uncomplicated urinary tract infections (Women 16-64 years)
 | ALL- provide feedback on eConsult leafletSS – provide list of leaflets/papers to DC |
| Newsletter | * December Newsletter was added to the website and a text sent out with a link.
* Next Newsletter to be about the new eConsult triage system.
 | DC – create draft newsletter |
| Disabled Accessibility to Surgery (JP) | * Discussed issues with bringing patients to the Surgery with mobility issues.
* If just drop-off, can drive into the Surgery car park, and straight out toward the exit, pausing to let person out on the pavement. Then must move car to avoid access issues for others. Cars without a permit will be sent a ticket if staying longer than 10 minutes.
* Alternatively, park in car park opposite, retrieve the surgery wheelchair and take to car to bring patient in.
* Surgery is aware of the slope and difficulty patients face. Will try to look for solutions.
 | DC – investigate solution to access issues for patients with mobility issues |
| Advanced booking appointments (JP) | * Request to stop sending letters asking patients to book an appointment with a particular Doctor – would prefer appt to be booked and patient informed.
 | DC – raise issue with partners |
| Any other business | * JJ raised grubbiness of building inside. DC explained that considerable amounts had already been spent over the last few years on a new boiler and water system, lift upgrades and conversion to LED lighting. Cosmetic issues will be attended to in due course, but clinical needs are the main priority.
* DC to send text reminder to vPPG with AGM date and time.
 | DC – send text to vPPG re AGM |
| Next Meeting | PPG AGM on 20th February at 7.30pm  |  |