

**MINUTES FROM THE PPG MEETING
HELD ON WEDNESDAY 29 NOVEMBER 2017**

Welcome	Graeme welcomed everyone and we proceeded to introduce ourselves. Graeme welcomed Kay Bradley to the group.
Present & Apologies received	Present: Graeme Johnston, Hilary Osgerby, Pam Pitchforth Fiona Walker, Julie Anderson, Sarah North, Jill Hammond, Emma Hughes, Dr Ben Burgess, Carol Penny, Kay Bradley, Pam Mears, Diane Mason, Els Otten, Sandra Drew Apologies: Eileen Turner, Lynn Mazillius, Stephen Long, Margaret Dean, Margaret Place, Robert Secret, Christopher Kennedy, Shelley Wagstaff, Gail Daffurn, Becky Pryse, Katie Fricker, Mike Vince, Sophia Rudolf,
Clinical Update – Dr Ben	Dr Ben reported that here is a new GP starting shortly. Her name is Katie Owles. She is moving to the area with her husband’s job, he is a hospital doctor in MK. She has a young family and will be based mainly in Buckingham.
Reception Update-Julie Anderson	<p>Julie reported that there is a new receptionist called Julie Stewart. There are now 24 on the reception team across all 3 sites. The last two weeks have been slightly less hectic at 8.00 am and the call volume seems to be a bit lower. The team is now fully staffed and there can be up to 12 receptionists on the phones when busy. It was suggested that the recorded message should tell patients that there are that many receptionists on duty as when you hear that you are 18th in the queue that seems terrible. This has now been done.</p> <p>A meeting was held last week to discuss the fact that patients often don’t need a same day appointment but three weeks is too long to wait. This is work in progress. Julie explained that the system is constantly being tweaked to improve it.</p> <p>The Old Masonic telephone number has now been retired and no longer works.</p>
Dispensary Update	Emma Cox is leaving and Ann Marie who is ex Lloyds has now joined the team. Jo was introduced

	<p>and she is the new delivery driver and also moves paperwork between sites. This is working well. We were also told that the new electronic dispensing system is now not going ahead. The software is simply not ready and not working as well as the practice was told it was so it has been put on hold.</p>
Buckingham Health Festival	<p>Dr Ben explained the background to this and said that the Practice has been represented on the Friday. From his point of view, it had been very useful. Buckingham was the first place to 'invent' the concept of Health Visitors who used to ride around on bicycles teaching basic hygiene. At that time, Buckingham had the lowest death rate anywhere.</p> <p>On the Friday there were a lot of patients and health professionals. These included charities, workshops, representatives from Healthwatch, etc. Dr Ben said there had been a lot of useful discussions such as Buckingham becoming more breast feeding friendly by shops etc putting stickers in their windows. He found it busy and interesting but some of the group also attended on the Friday afternoon and they found there were more exhibitors than visitors so mixed feedback all in all.</p> <p>Dr Ben also told the group that the plans for Lace Hill had been submitted and now the practice was just waiting to hear the outcome.</p> <p>Dr Ben also had some questions for the PPG that he asked us to comment on.</p> <ol style="list-style-type: none">1. Patients coming in with multiple issues when time is so limited. The PPG could understand why this happened on the basis that if you are going to see the GP, you may as well tell him all that is going on in case it is related. From the GPs point of view, this is a nightmare in terms of allocated appointment times. The PPG suggested that the answer was better communication to the patients in many ways, ie the tele that is on in the waiting room could explain why this is such a problem. There could also be posters, something on the Jayex board and something on the recorded message. It was felt that a multi faceted approach to educating the patients would be the way forward.

2. Dr Ben explained that there was a problem with patients calling in very late with problems that they felt couldn't wait until Monday. This stretched an already exhausted set of doctors.

A suggestion was made that perhaps there should be a cut off time to book an emergency appointment, say around 3pm. The PPG felt that this was a difficult problem as there was no easy access to a GP over a weekend and they could understand if it were a child or an emergency then it is very difficult to wait until Monday. It was agreed that this was a tricky one but it was felt that perhaps a 3pm cut of time should be trialled.

3. Dr Ben explained that some patients had had their nominated doctor changed and this had not gone down at all well with some patients. He told us that this had had to be done as some doctors had too many patients on their lists and some not enough. As new doctors were joining the patients were being redistributed. Again, it was felt that better communication was needed to explain to patients that this didn't mean that they couldn't see a particular doctor and that by law, everyone has to have a nominated doctor. Hilary suggested that better communication between the practice and its patients was not the job for an amateur and that maybe they should think about engaging a PR/marketing person to take a look. She also explained that she appreciated that this may be too costly but though it may be worth investigating. She felt that it may help also with communications in the future re the new Lace Hill premises.