

PPG Meeting Minutes  
11<sup>th</sup> September 2024  
Avonside Health Centre 18:00

**In attendance:**

Dr Kirsten Scriven  
Sarah Hargreaves  
Lauren Field  
Kim Willis  
Lesley Passantino  
Colin Richardson

**Apologies:**

Maggie Wagstaff	Victoria Sherry-Garnett
Kevin Smyth	Anne [Last name TBC]
Mustak Hafiji	Jennifer Mikulsky
Cathy Rogers	Katherine Booty

<b><u>Subject</u></b>	<b><u>Notes</u></b>	<b><u>To Action:</u></b>
Welcome / Apologies / Previous Meeting	<ul style="list-style-type: none"><li>• Last meeting we covered the new GP appointment system which had launched the week previous.</li><li>• We discussed why Avonside has not turned on automatic online prospective access to medical records</li><li>• We briefly discussed the GP Contract and funding and agreed to cover that in more detail at the next meeting</li><li>• We discussed the role of the PPG and how PPGs are used elsewhere. Still need to confirm a chair, secretary and PCN representative</li></ul>	
Appointment System	<ul style="list-style-type: none"><li>• Generally going well and had some excellent feedback on how it has improved access.</li><li>• We had to make adjustments over summer due to clinical resource but the new system allows for flex.</li><li>• LF query if anyone has had to use the system yet. Yes, have used it and was super quick and efficient.</li><li>• Discussed DNAs and if it has improved since the new system. LF explained no changes which is disappointing. All patients get a text reminder (providing they consent to SMS/email) or details are confirmed over the phone.</li></ul>	
GP Contract / GP Funding	<ul style="list-style-type: none"><li>• SH presented a presentation on General Practice as a whole across the National Health Service and how at Avonside we are set up.</li><li>• Explained the struggles we face within general practice i.e. workload, resource</li><li>• Colin queried why someone would want to become a partner given the liabilities and KS explained how it works and realistically why not many people become partners. LF suggested this may be a cause towards ~90 practices closing in merging over last 12 months (~800 GP practices across NHS England).</li><li>• Discussed pros and cons for PCNs i.e. shared workload but also a lot more workload.</li><li>• Another presentation followed to go over GP finance briefly.</li></ul>	

	<ul style="list-style-type: none"> <li>Discussed in depth weighted lists and how it can vary location to location based on demographics. Is great for some Practices as they may get paid for more patients than they have but unfortunately we're paid for almost 1,000 less.</li> <li>LF explained how some QoF targets are sometimes unachievable despite all the possible work put in – one patient can cost the Practice thousands i.e. family declining child immunisations.</li> <li>SH and others actively campaigning for better funding particularly for enhanced services.</li> <li>Important to balance providing a service for interest of our patients as well as costing to ensure the Practice is able to survive. SH explained example of phlebotomy – funding doesn't cover cost although would be good service to have for patients. We have decided against as a result as Warwick Hospital is close and would cost too much for AHC to run.</li> <li>The presentations only cover a fraction of what general practice is and funding overall.</li> <li>All agree more complicated than first thought.</li> </ul>	
Latest Patient Survey results and FFT results	<ul style="list-style-type: none"> <li>SH discussed through last 12 months of Friends and Family Test feedback (patients get a text following a visit to the practice). Best month in August with 98% rating the service positive or 2% negative. We are hoping this is reflective of the new system and will continue to improve.</li> <li>SH explained what the National Patient Survey is and how it works. All of Avonside's stats have improved over the last 12 month and hope next year this will improve further.</li> <li>One area to work on is patients getting to see their preferred GP. KS discussed how we hope the new system will help with this as patients can state their preferred clinician.</li> </ul>	
PPG Objectives	<ul style="list-style-type: none"> <li>Unsure yet on a practice PPG project.</li> <li>PCN PPG working on promoting covid/flu/rsv vaccinations. Important to share covid is still a problem and important to protect ourselves and relatives etc.</li> <li>LF to email to ask for input from non-attendees too i.e. who wants to get involved in XYZ, thoughts on ABC.</li> <li>Kim suggested a menopause group as so many people are affected and not enough awareness.</li> <li>Colin suggested IT support group</li> <li>KS suggested cancer support group</li> <li>Kim suggested using the GAP centre for support groups – Kim to share details over to see if something we can do.</li> </ul>	
Chair / Secretary / PCN PPG	<ul style="list-style-type: none"> <li>Query if any volunteers for each of the roles. Appreciate may be difficult with some absences today – LF to pop a deadline on an email to decide.</li> </ul>	
Next Meeting	<ul style="list-style-type: none"> <li>Date TBC</li> <li>Hopefully have some decisions made prior</li> <li>LF queried if whatsapp comms already set up – will try and obtain consent from all. Should help improve comms across the group beforehand.</li> </ul>	