

## Minutes of PPG Meeting 3<sup>rd</sup> April 2019

Present: G.Pungenti, P.Holowczycki, K.Baker, P Horner, G Horner. Apologies: H. Patel

Minutes of the meeting of 19<sup>th</sup> February were signed. DNA's Feb. were 70.

Website: P.Hol. thanked K.B. for changes to the website and suggested she should monitor Facebook and Twitter. He made the following further suggestions: Publish out of hours details and how this can be accessed. Possible additional tab on home page for with details of walk-in centres, extended hours and out of hours arrangements. Current presentation could be more user-friendly. Add DNA's to home page and add minutes from GH to website. Hinal has been given finance to print access details leaflet. KB agreed to look at all these and reported that a new web provider was being sought. Certification and security issues appear now to be solved.

Quality Outcome Framework: Very satisfactory 100% approval by CQC as monitored by CCG. NHS England uses this information with financial implications for the surgery. 95% of all Pxs (May 2018 to March 2019) have been reviewed and recalled where appropriate. Some decline recall (Dementia sufferers being the most difficult group). All surgery staff are engaged in this process.

Medication: RX details are uploaded to the 'Spine System' (in the Cloud) and may be downloaded by any pharmacy. If Px's. are on repeat Rx each supplier may issue 2 or 3 sets of Rx. If 2 suppliers do this in error (possibly by 2 prescribers or through lack of vigilance at surgery or pharmacy) over supply occurs. This risks Px. overdose besides an avoidable additional expense. Px's. can obtain DOSET boxes (especially for dementia PX's).

Px's. not being acknowledged immediately: Electronic checking-in system being considered by CCG but questionable whether surgeries want this. Height of desk top is an issue. One phone has been moved to back of reception office but staff often have to input info from phone call at front desk.

Open days: Themed plan; simple first aid course (targeting schools?); training on use of the 3 village defibrillators; discussion time with dementia carers were all suggested.

Surgery staff: Natasha Higgins has joined as an HCA. Currently on phlebotomy course and will undertake BP and ECG and phlebotomy. from 1<sup>st</sup> or 2<sup>nd</sup> week May. (Hours 9.30-2.30 Mon, Tues. and 8.00-6.00 Thurs.). New junior pharmacist joining shortly for 3 days per week. Clare Larter currently deals with Diabetes, Asthma, Chronic illness and Cardio vascular issues. Clare W. has left for at least 1 year. Dr Tannor is on annual leave and Dr O. is temporary relief gp.

Car parking: Still an issue both for staff and Px's. Some local residents use car park illegally. Where identified, notice is attached to their car. Suggest stronger wording on notice plus permanent sign. KB to seek finance for this. Ownership of car park appears uncertain. Extension to car park could be discussed with Roger Clark (if elected as councillor) now Ben Stokes has left the district. Ken Parker (legal dept. at Swale) may also be helpful. Proposal to build care home now seems to be resurrected and may be part of a solution.

