**Minutes of the PCN PPG AGM meeting**

 **Thursday 8th June 2023**

 **New Hutte Neighbourhood Centre**

**In Attendance**

Jayne Birkett – The Hollies Practice Manger

Madeline Bolton – Cedar Cross Practice Manager

James Allen – Patient Experience Care co-ordinator

Hollies Chairperson

Park House Chairperson

Dinas Lane Chairperson

Tarbock Chairperson

Cedar Cross Chairperson 1

Cedar Cross Chairperson 2

**Introductions**

Jayne opened the meeting by welcoming everyone and introducing herself and offering refreshments. Everybody then took turns in introducing themselves and gave a bit of background to their role if applicable. It was agreed that minutes would be taken and people where also free to take their own notes if they wanted to.

**Ideas**

* Open Forum

The Hollies CP gives a brief update on Kirkby PCN who opened up their local PPG to all patients in a forum style. It was explained how the forum discovered local collective issues and how they set out to address them.

Tarbock and Park House CP’s expressed it was a good idea theoretically but may not work rolled out in their PPG’s incase large numbers attend and if the meetings go off topic and get centred around individual issues instead of a collective theme.

Cedar Cross CP1 said Kirkby PCN may have different barriers to ours

Idea not dismissed but future discussion and fine tuning is best for now

* Building Relationships

Jayne explains the barriers around getting all demographics to engage in Local PPG’S, building relationships is difficult but key to get representation. This is a common problem that has occurred for ages and many ideas have been put forward to address this but failed. i.e attending mums and toddler classes and colleges

Cedar Cross CP2 expresses how hard it is to engage the young and mothers

The Hollies CP explains this is the same in Kirkby PCN but sees themselves and other CP’s as influencers in their practices and community and wants to work to move forward in addressing the demographic issues

All agree a structured plan is needed to try and access these groups so that everybody is fairly represented

* PPG’S

Cedar Cross CP1 asked if all PCN’s have PPG’s

Jayne explains that contractually yes but again due to disengagement from patients and poor fair representation they are not in contact often or some have disbanded altogether due to low numbers

Park House CP talked about their experiences and confirms their issues off retaining members who seem to come and disengage once the issue that affected them directly has been addressed

* Acronyms and structure of NHS

Tarbock and Park house CP’s express their confusion at the acronyms used in explanations and ask for them to be explained

Jayne and The Hollies CP explain the structure of the NHS on a regional level. Health watch is also mentioned and discussed about the role it plays.

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* What a PCN is

Notes are made on the nine practices that make up our PCN and Jayne adds to this by explaining how our local practices working together instead of independently gives us a better chance of solving common themed issues.

It is also explained by Jayne where this PPG meetings fits in with local PPGs and also Managers meetings and how it all ties in to try and be as transparent and efficient as possible

* Enhanced access

Tarbock CP states extended hours are advertised but patients have expressed when they ring up it is not offered and its all a bit vague

Jayne explains it is currently outsourced but will be brought in house, but it is being offered in our PCN as it is contractual, these bookings are not made on the day and can be scheduled in advance

Park House CP expresses they feel it may be impractical if a patient from a different practice has to travel to another within the PCN for enhanced access

Jayne responds by saying the NHS is trying to modernise to keep with differing work times and schedules, added spaces where people can travel and don’t want to take a day off work for an appointment will free up spaces for those who can’t travel but can attend in normal operating hours

Cedar Cross CP2 expresses concern it may only happen on a Saturday but is reassured that Sundays will be available just like the successful covid clinic roll out which was also on a Sunday

* Preferred Practitioner

The Hollies CP told the group that patients have previously expressed their want to see a doctor, but sometimes do not need one, going forward it will be a multidisciplinary team, which id doctors supported by ANP, Nurses and pharmacists to assess patients and who it is most necessary to see

All agree education needs to happen surrounding this for patients

The Hollies CP explains Kirkby forum had the same issue and brought in an ANP to talk to patients at the forum and explain how highly qualified they are, which hopefully will be taken out into wider society, so people are more accepting of not seeing a doctor if somebody else is qualified to see them

**Conclusion**

* A more accessible GP surgery is essential, enhanced access and education around other healthcare professions was discussed
* Being able to communicate as a PCN and not individual practices allows us to address wider common themes and helps us to combat it better collectively
* Engaging other demographics is essential for fair representation which will help create a wider picture of barriers and successes which can be communicated back to lots of different demographics

**Additional Business**

* Local PPG meetings will need to be close to the PCN PPG meetings in time so things can be relayed efficiently
* Meetings to be arranged quarterly
* Next meeting Thursday September 7th 1-3pm – New Hutte Neighbourhood Centre