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| *Item* | *Description* | *Action* | *Completed* |
| Apologies | Heather was unable to attend as she was omitted from the initial invite. Apologies sent to Heather for the error. | To ensure all participants are invited. | CW updated. Future invites to be double checked by CL |
| Previous Minutes | Car Park signage for surgery users onlyThe additional roles information is now available on the website. Facebook to be updatedTelephone message has been updated, including info on ordering repeat prescriptions. Newsletter not yet commenced | CL to ask DC (caretaker) to organiseCL to organise FB updatesCL to organise | Caretaker aware |
| Staff update and changes | There are several changes to report. Dr John Crompton and Dr Helen Rees both retired at the end of March. Dr Yasmin Gant, who has been a salaried GP is our newest Partner. A new salaried GP has started this month, Dr Emma Gees. We have 6 Partners and 6 salaried GPs.HCA Abbey Dawson has left to pursue further nurse training. | Nil |  |
| Appointments and access | CMP led discussions around the current situation within the surgery regarding access and pressure on the service.He explained the new contract requirements with a 2-week appointment time frame specified and the need to signpost patients at first contact.The difficulties around this were discussed and the ever-increasing patient demand and expectation.MC felt the surgery was more efficient than others, but a continuity of care was important.RC noted there needed to be a change in patient's expectations. Suggested we try Public Health type announcements. MC suggests we give appointment times in minutes, which would demonstrate to patients that we are working on a tight schedule. | Facebook/website to continue to be used for announcements. (CL)New rota being created, appointment with specific minutes will be used. (CL & Partners) |  |
| Helperby Update | CL explained the vision was to re-open Helperby branch 5 mornings per week with a GP, nurse and receptionist. The dispensary would not re-open, but it will be possible to collect medication. This is all still in the prep and planning stage, and an advert is currently out for a receptionist. CL asked Roger if it was possible for the surgery to be in possession of the code for the defibrillator which is on the wall of the Helperby branch.Roger explained that as the mobile phone signal is poor at Helperby, the defib does not need a code to use.Should there be an emergency within the surgery then staff would be free to use the defibrillator without needing a code.Roger explained to the group that whilst cleaning of the cobbles outside the surgery was in progress it was discovered that some of the cobbles did in fact show the date of the building. The Parish Council are the owners of the cobbled area. The cobbles are broken and in need of repair, and Roger asked if the Partners would be happy to make a donation of £150 to help towards the repair of the cobbles and inset date. CMP agreed this would be possible. | CL to finalise | Helperby reopenedCompleted |
| Covid Spring Booster update | CL explained we would be holding 2 spring booster clinics. Over 75s and severe immunosuppressed patients will be eligible and invited via text to book their appointment. Clinic dates are 9th and 16th May depending on vaccine delivery. There have been some issues with securing the amount of vaccine required. Vaccines will also be available at Chain Lane pharmacy in Knaresborough if anyone is unable to attend on those dates. | Nil | Spring booster vaccine clinics completed at the surgery |
| PPG moving forwards | CL asked the group what we could do as a group moving forwards. CQC are increasingly looking at patient feedback as measure for acceptable service.RB suggested an annual survey, similar to ones previously carried out. She has a copy and will forward to CL for reference.AT suggested a survey monkey data collection exercise. Perhaps an incentive to complete could be offered, eg a basket of fruitAT offered to collate data collected via a survey CL suggested a text message survey post appointment; however the feeling was these were not popular and not likely to have receive much feedback. CMP noted also that there may be some safeguarding/confidentiality issues with this method.CL asked the group if they would spend some time reviewing the website and highlight any conflicting information or outdated information to assist keeping patients informed with correct information. |  |  |
| Any other business | Nothing further | Nil |  |
| Date of next meeting | To be confirmed in July 2023 if possible. We agreed to aim for a meeting within each quarter as a minimum. | CL to send date suggestions nearer the time |  |