**MINUTES OF MEETING OF PATIENT REFERENCE GROUP**

**HELD ON 25 MAY 2013**

**AT ASHDOWN FOREST HEALTH CENTRE**

APOLOGIES

Five apologies for absence had been received.

IN ATTENDANCE

Chairman

Vice Chairman

Eleven members of the group

Andrew Cornell, Practice Manager

MINUTES

The minutes of the meeting held on 9 March 2013 were read and approved.

MATTERS ARISING FROM MINUTES

1. Driveway – It was queried whether any progress had been made on widening the driveway. AC explained that the PCT had been disbanded on 1 April and therefore were no longer owners of the building. A company called NHS Prop Co now hold the lease. It had therefore not been possible to proceed with seeking permission to widen the driveway but AC confirmed that he would keep trying to achieve this.
2. Health Education Events – The first event has not yet been arranged and priority had been given to the topic of diabetes. However AC explained that this topic may not now be the first one as a new upgraded inhaler drug for COPD was being introduced and he felt that this would be the first education topic for the Saturday event.
3. Local Pharmacy – AC confirmed that he had met the manager of the local pharmacy and given him the comments from the survey. He also stated that AFHC had a good working relationship with the pharmacy.
4. Saturday Surgery Opening – It had been thought it would be beneficial to publicise the dates of the Saturday surgery openings on the website. AC pointed out that all Saturday surgery appointments are booked in advance and so these are not clinics where patients could just turn up on a Saturday. He felt that if these dates were published on the website, patients might just turn up without an appointment expecting to be seen. It might therefore be advantageous to state on the website that Saturday morning surgeries are for pre-booked appointments only.
* AC – Saturday Surgeries
1. Television – The television had arrived and been installed on 23 May. AC pointed out that messages could be displayed along the bottom of the screen below the advertising for any Health Centre related information. It could for example be indicated in this area that a particular GP’s surgery was running late. This would also be where Health Centre information would be displayed such as the need for patients to ring for blood test results after 10 am leaving the lines free before this time for patients wishing to make appointments.

A member of the group pointed out that the advertisements could not be read as the screen changed from one to the next too quickly. AC confirmed that he was aware of this and that he would be arranging for this to be rectified.

* AC – rectify television advertisement screenings

CCG REPRESENTATIVE

The Chairman said that a new representative would be needed for CCG meetings. SCM volunteered and the members approved his appointment. SCM will provide routine feedback on the meetings which usually take place every 6 weeks. There is a meeting scheduled for 29 May the subject matter being “Shaping Health Services”.

ANY OTHER BUSINESS

It was suggested that members should think about the patient survey for 2014. The 2013 patient survey had been rushed and members were asked to think about what they thought should be included in the survey and come back with ideas at the next meeting. AC said that next time the survey should be held over a longer period of time, for example over the winter months.

MS again raised the question of after care and its cost for patients. The Chairman suggested that anyone wishing to help MS should contact her directly.

AC explained that once a patient was discharged from hospital there was support from ICAP, the district nurses and social services. Sometimes patients might feel that they need more care but they do not fall into the categories for district nurses, social care, etc. AC said that leaflets are available indicating services that are available but there is no blanket rule. After care also depends on which hospital the patient has been in as it is the hospital which initially decides on the care needed.

The Chairman brought up the subject of an open meeting in the Village Hall in order that all patients could be updated with what happens in the surgery.

AC said that he had received an email from CB regarding the new IT system. CB was querying why the Health Centre’s new IT system did not allow patients to book appointments on line at this time. AC said that the new system had been installed in December and that staff members were only just beginning to feel comfortable with the system. He had therefore replied to CB explaining that time was needed to adjust to the new system and that we would now be looking into patients being able to book or cancel appointments online within the next 6 months. Mondays, however, would always be book on the day. CB also raised the subject of NAPP and AC suggested that this could be discussed at the next meeting.

AC said that the new 111 system for out of hours hadn’t been a great success initially as it was hoped that this service would reduce A & E attendances. AC remained confident that this new system, which replaced NHS Direct, would improve.

A member queried what sort of minor surgery was undertaken at the Health Centre and AC said that Dr Baxter performs minor surgery of a dermatological nature, other various procedures and also microsuction of ears.

AC informed the group that Chiropody services would be leaving shortly and that they will be taking all their equipment. Funds would therefore be needed to replace the bed. Members were keen to progress the fundraising idea, raising funds for the Practice.

A member queried whether it might be possible to have an appointment at which the GP could be seen and all blood tests performed rather than making separate appointments. AC said that sometimes blood tests needed to be spaced out but that if a patient had a number of concerns, then Reception could be asked if a double appointment could be booked.

DATE OF NEXT MEETING

Saturday, 14 September at 11 am.