**MINUTES OF MEETING OF PATIENT REFERENCE GROUP**

**HELD ON 12th September 2015 at 11.00am,**

**AT ASHDOWN FOREST HEALTH CENTRE**

**APOLOGIES**

There were 6 apologies for absence received.

**IN ATTENDANCE**

John Durrant - Chairman

Nigel Carpenter

Brenda Leseelleur

Roger East

Georgina Rolls

Frances Potter

Andrew Cornell Practice Business Manager

Sally Payne, Patient Services/Deputy Manager

**2. MINUTES**

The minutes of the meeting held on 6th June 2015 were approved.

**3. MATTERS ARISING**

* **Check on circulation of PRG minutes by practice** Minutes of the meetings are emailed out to members and hard copy left at reception for any members experiencing IT issues.
* **Website Update** –Andrew has a telephoned call planned with CB for the coming week.
* **WiFi** WiFi is now installed at the practice, but is currently only available for practice staff and is password protected for individual users. This was a decision made by the CCG which the practice has no control over.
* **Car Park** A local resident is petitioning for parking spaces on the land adjacent to the practice. The practice has not supported this, but is continuing to support Propco with their petition to improve the access to the practice.

**4. CCG Report** Letters had been forwarded to PRG members. There is a public meeting next week – All welcome to attend.

**5. Comment from practice on government proposal for sevey day surgery opening -** Andrew read out the following statement provided by Dr Basely on behalf of the partners.

Basically supportive in principal of improved access but need for increased infrastructure, can’t be at the cost of diluting services at other times of the week – await to see how the government proposes to deal with this dilemma.

“Access is not about simplistically extending opening hours, but about patients being able to receive appropriate care and services at the right time. For an older housebound patient, access could be about receiving a district nurse in a timely fashion, or a GP visit them when they may a chest infection – the latter being undermined if GP’s are diverted into sitting in surgeries superfluous to need, open for seven days.

Access is also about practices having adequate non-clinical staff, for example, to handle increased volumes of phone calls and footfall in reception – a neglected area of investment by Government. And in current environment of inadequate capacity, access must be about reducing avoidable demands on GP’s so that we have more time and appointments for patient who need to see us. This involves reducing bureaucracy, and ending un-resourced and inappropriate workload shift from other parts of the system.”

**6. Practice Update for information to PRG**

New telephone system to be installed by then end of this year. The new phone system will have call waiting, patient information messages as well as the ability to divert calls for unplanned episodes i.e Snow days! – The number will remain the same.

Dr Fyfe has returned from her sick leave.

A new receptionist has started at the practice and is undergoing induction and training.

Flu Clinics are available for booking via reception or on-line: Saturday 3rd, 10th & 17th October.

**7. AOB** – There were the following questions from group members:

Q. There was some concern expressed by another patient who had received a distressing phone call from a doctor at the surgery at 5.40pm. The doctor discussed end of life care with the patient.

A. ATC explained the unplanned admission project and he felt the phone call would have included lots of questions to assist the doctor to create a care plan for the patient.

Q. Is booking appointments on-line available to all patients?

A. Yes, patients must register in person at reception with photo id.

Q. Has the PRG still go a function?

A. Yes! still has a role, ATC keen to keep the group going. The partners are very appreciative of the contributions that the group have made. The CQC would like to speak to a member of the group at the practice inspection. ATC reminded the group of valuable contributions they have made in the past: Opening at lunch-time and the confidential area at reception.

**8. Date of next meeting** Saturday 6th February 2016

The meeting **closed** at 12.15