**Kingswood Surgery Patient Group Meeting**

18th January 2016 @ 1.30pm

Attendees: Susan Alcock, Frances Senior, Peter Waywell, Clifford Smith, Frances Staniforth, Dr Tinsley, Liz Walker

Apologies: Ivor Johnson, Caroline Greaves, Simone Ladha & Vienna Terry

**Introductions**

The meeting was opened with brief introductions.

**Matters Arising**

Minutes from previous meeting were agreed – to be published on the website and displayed on the notice board.

**Composition of the Group**

We have not had any response from either St John Fisher or St Aiden’s schools. It was therefore agreed that we should contact the other senior schools in the area. Liz will do this. **Action Liz**

**Main Agenda Items**

1. **Terms of Reference**

Peter agreed to update these to reflect the discussions at the meeting. Membership of the group will include, where possible, a GP. Peter emphasised that the group should have clear objectives and that they should be; Specific, Measurable, Achievable, Realistic & Timely. It was agreed that we should set out the principals of the group. It was suggested that we target the areas highlighted in the Practice CQC report (when we get it) for improvement as a starting point. It was agreed that the group could learn from other PPGs with regards to which areas they found best to concentrate on. Liz said she would contact the other practices in the area to ask if they would be willing to be contacted by a member from our group. **Action Liz**

*Liz spoke to the CCG patient engagement lead with regards to attending one of our meetings. He is trying to set up a joint meeting of patient group representatives in the various sub-groups. As soon as Liz has any further information she will pass it to the group. Liz has also contacted all the other local practices, as already discussed, there are quite a few who have a “virtual” group. The practices which have an actual group will ask their representatives and get in touch with Liz.*

1. **Administrative Systems in the Practice**
   1. **Telephone**

It was suggested that it would be useful if patients were given a waiting time when they were on hold – unfortunately the system does not have this facility.

Frances asked if the telephone system could accommodate “Type Talk” as she was aware of someone who was partially deaf who had been told we didn’t use this system.

*Liz checked with the receptionists and has been told that we do have a number of patients who use “Type Talk”. If this patient has any further issues regarding this they should talk to the Practice Manager.*

Peter reminded the meeting that we should be looking at how the systems used by the Practice affects the general population. If the telephone system could provide us with audits on waiting times and call statistics it would be useful. Unfortunately the telephone system does not have an audit facility.

* 1. **Referrals**

Frances brought an issue to the meeting which had been raised by a patient. Again Peter reminded the group that individual issues should be raised with the Practice.

* 1. **Test Reminders to Patients**

Frances asked how the Practice reminded patients that they were due for their review/check-up. Liz explained that every patient on any of the clinical registers are sent a recall letter to make an appointment for their review. Some disease groups only require a blood test, in these cases the doctors would add a reminder to their repeat prescription when it was due.

1. **Online Access to Medical Records**

Liz had already circulated an application form and an information leaflet to all the members of the group to act as a pilot for online access to medical records. Patients already have access to appointments, prescriptions and their summary care record. The next phase, which the Practice should have up and running by 31.3.16, is to have access to coded information on the medical record. Liz explained that this pilot was to test the Practice’s process for this and also to allow the receptionists familiarise themselves with the registration process.

1. **Frequency of Meetings**

It was agreed that, to be effective, the group should meet at least every 6 weeks. For the next meeting, everyone should try and come up with an idea on how to improve communication.

1. **Any Other Business**

Frances raised the issue of charging patients for copies of their results. She felt that it was unfair to charge patients when, if it was available, they could access this online. Liz explained that this was an administration charge and if the Practice did not have the online facility up and running by 31st March 2016 they would then review the charge.

Newsletter – when we publish our first letter, it was agreed that we should include a question so that we can gauge whether it has been read or not.

Fran had met Dr Layton who is involved in Research, which includes patient participation, and is very keen and positive about patient participation in all aspects of the NHS. Apparently research and patient participation is a target for all GPs. Fran is meeting Maggie Peat, Lead Nurse in Research, and will report back to the group at the next meeting.

Frances (Staniforth) brought up the issue of access to the check in screen for wheelchair users. Liz asked if they could explore different positions for the screen at the end of the meeting.

*Unfortunately Frances left before we had the chance to look at this further. Liz will try different positions in the meantime.*

1. **Date and Time of Next Meeting – 29.2.16 @ 1pm**