**Kingswood Surgery Patient Group Meetin**

9thJanuary 2017 @ 1.15pm

Attendees: Diana Wallis, Caroline Greaves, Cliff Smith, Kate Kennady, Sue Alcock, Joan Glassford, Peter Waywell & Liz Walker

Apologies: Helen Askwith

We commenced the meeting with a short talk and presentation by Helen Permain, Community Research Nurse, National Institute for Health Research (NIHR). Helen gave a brief overview of some of the national and local research projects which are currently running. She also told the group how they could get involved. Everyone thanked Helen for her time.

**Matters Arising**

Practice Logo – Liz explained that she had not heard anything back from Henshaw’s School and was reluctant to badger them any further as they were obviously busy. She contacted a firm in Leeds which have put together a couple of options for a logo. The group put forward a few suggestions about these designs which Liz will forward to the company and then the Partners. It was also suggested that the colour of the Practice name on the sign be different as the dark grey colour is likely to get lost when it is wet and miserable. Liz will email the revised logo round as soon as she gets it back.

Waiting Line – Liz thanked the group for coming up with this very cheap solution. It does appear to be working as both Liz and members of the group have witnessed it in action.

Waiting Times Audit – Diana and Liz carried out 2 pilot audits of patient waiting times. These were mainly to make sure we were asking the questions in the right way. The pilot audit did show that one GP was running an hour late by the end of her surgery, this was not helped by the fact that she did in fact start late. Liz will keep an eye on this as this is not good practice. Diana and Liz will look at carrying out a complete audit, over all surgeries, GP and Nurses, over one day.

Hearing Loop – Liz tested the hearing loop which has been in the reception area for a long time. None of the receptionists can remember ever using it. When tested though, Liz found it not to work. She has purchased a new one and is hoping to test this out with a member of staff soon. This is a portable unit and therefore can be moved round the consulting rooms.

Violent/Abusive Patients – Liz put the suggestion of offering these patients counselling to the Partners. It was agreed that this was not appropriate use of the counsellor’s time. The patients are not “struck off” after one incident, it is after the second letter these patients are asked to look elsewhere. Patients who are physically violent to any member of staff are reported to the police and are removed immediately from the list though.

Minority Groups – Diana contacted a friend who attends St Aelred’s church, they do not have a large Polish community. The largest Polish community attend St Robert’s church in town as they provide a Mass in Polish. Liz had put the notices advertising this meeting out in English and in Polish, with no response. Peter asked how we had tried to engage this group in the past. Liz was given a list of possible patients by Dr Brook who she contacted via email. Dr Brook also wrote a letter in Polish inviting them to join. We have had no response to any invites. It was agreed that maybe we should try and target the schools again. Caroline will contact St John Fishers and Liz will ask her son, who teaches at St Aidens. It was also suggested that we contact those young patients eg juvenile chronic disease patients, who may be frequent attenders, or their family if they would like to join. Liz will ask the GPs if they could perhaps identify these patients. This also made us look at the timing of our meetings. Lunchtime on a weekday is not really a good time for a young adult or working adult to attend. Everyone was happy to change the time of the meeting if it meant we were able to entice more people to join. 4pm was suggested as this would coincide with the end of school.

**Main Agenda Items**

Feedback from CCG Workshop – Peter gave feedback from the CCG meeting in September. He found the meeting to be informative. The challenges the CCG and the NHS were under were discussed. The relationship between the CCG Patient Advocate sessions and the PPG is yet to be fully understood.  Peter will follow this up with Jane Marchant and report back to the group.  Peter will also distribute the presentations that have been made at the previous sessions. There are to be future meetings held, Kate will attend if Peter can’t make it.

**Any Other Business**

Phlebotomy – Kate asked if it was true if the phlebotomy service at Sainsbury’s was being withdrawn. Liz explained that each practice have been told that the only patients they should be sending to the hospital phlebotomy service (this includes Sainsburys) are those patients with difficult veins, samples which have to be tested in a short time or emergency samples. The Practice have increased the Health Care Assistant appointments to accommodate the extra patients who will be coming through the Practice. If a hospital consultant requests bloods to be taken the patient should still go through the hospital service. It was felt that a “walk-in” system would be useful for this. Liz will discuss this with the Partners.

Results Line – One of the group rang the results line 26 times trying to get through. Liz explained that the Practice were looking at providing the receptionists with training so that they felt more competent at giving out results, this is going ahead in May. Liz also explained the text messaging system, whereby the GP could send a text to the patient when the result came in. Everyone felt that this would be the preferable system.

Online Access to Medical Record – Liz explained the access which was currently available to patients, detailed coded information – anything on the record which has a Read code eg results, diagnosis etc. Patients could also access their blood test result this way.

WiFi – Peter asked if this was going to be available in the surgery. Unfortunately it is not connected yet but when it is it will not be available for patients.

**Date and Time of Next Meeting – 19th June @ 1.15pm**