

# **GROVE HOUSE PRACTICE**

### Patient Group Meeting: 22<sup>nd</sup> February 2016

<u>Attendees:</u>	Ann Turner-Culverhouse (Chair) John Lawrence Christine Owen Deborah Kelly	Jacky Slator Toni Johns Joanne Hughes Darren Shearer

<u>1. Apologies:</u>	Sydney Broxton	Ken Ramsden	Sharon Hearty
Mandy Devine	Tony Hayes	Edward Rawlinson	Terence Watkinson

#### 2. Matters arising from minutes/actions of previous meeting:

All actions from previous minutes closed.

#### 3. Communication:

#### a. Patient Feedback (Ann)

Ann wished to discuss feedback she had heard regarding issues at Castlefields Health Centre and how apparently patients are leaving the Practice due to them being unhappy. Ann felt that maybe they are modernising, relying too much on systems and losing their personal touch. She discussed that she has also heard that Tower House Practice have not lost their personal touch and still do things such as phoning patients when they have been discharged from hospital. Ann fears that if Grove House loses their personal touch things could go wrong for the Practice.

Jacky explained that recently, we have only had two new GPs, Dr Brown and Dr Williams, and that they have now been here for over a year. We do have the Registrar and they will change every 6 months. Ann felt that Tower House have a hard core of GPs that do not change and that keeps their stability. She also explained that she knows it has been hard to get an appointment with Dr Forde recently. Jacky explained that Dr Forde has been absent due to illness, which means cancelling and rearranging her appointments, this then does fill and impact future appointments with her. There has also been sickness within the Nursing Team and this has had an impact on appointments available and it is difficult to come back from. Joanne Hughes felt that Dr Sprott leaving the Practice could also been seen as a big thing to patients.

Debbie suggested that we could possibly state that our GPs and Nurses are full time staff on the main sign at the front entrance, so that they can see this as they come through the doors. Jacky explained that at one point the Practice did lose a significant amount of patients and that patients maybe do not realise that the Practice is not in the same position now as it was back then. We are looking to recruit a new GP, though GPs who have been here a while are involved with other things which is good, but can lessen the amount of appointments available. Christine asked how these other outside things help the Practice. Jacky explained that they help to formulate the health for Halton. It can also be useful as we hear first-hand information from meetings that could be useful for our patients. Debbie asked if there is a key person a patient can go to if there are problems getting an appointment. Jacky explained that for most you would speak to Jacky or Joanne unless you are a patient on a care plan. Jacky explained that the Practice will add 'personal care/touch' to what we can work on for next year.

#### b. Halton CCG Forum 9thFeb (Christine)

Christine informed the Group that she attended the forum, but the organisations took over which made it hard for her to hear everything. She explained that from an organisational point of view she was a bit disappointed and would attend an evening one next time. Christine had also spoken to CAMS with regards to doing a course with them as she is interested in mental health. She felt that it is worth attending these events as she has booked on courses through it.

#### Action: Christine will check the CCG website to see if they have any information on there and come back to the Group with an update.

#### 4: Update on priorities for 2015/16

#### a. Access – Online Services

Joanne informed the Group that from 1<sup>st</sup> April 2016 it is contractually mandatory for a patient to be able to view their medical record in more detail, but they will not be able to view freetext notes. At present they can book appointments, order prescriptions and view allergies and immunisations. Joanne explained that this facility has to be switched on and there are things that we need to consider, such as, it could be harmful for a patient to view their record and maybe a GP would need to check the records prior to them doing so. This is Government driven and it comes from patient demand and David Cameron, so it is political. The Government have given certain criteria and patients cannot do anything with the information without having a full copy of record, if a patient wants a full copy they would have to complete a 'Subject Access Request'.

Joanne informed the Group that the Practice has been advised to test it and was hoping that the Group would like to do this. She explained that they would need to fill in a form before testing it, if they could do so and bring feedback to the next meeting. Joanne demonstrated the online access using a test patient to show format and how it works. Documents and freetext are not available at this time. Patients will have to sign a new form to enable them to view medical records. Joanne felt that the new service will bring complications, which is why we want to test it first. If the Group are happy to go ahead with testing it they can sign a form at the end of the meeting and Joanne will turn on access for them.

Ann felt that there were members of the Group who were not present at the meeting who would like to test this. Joanne explained that this will be only from a pilot point of view and she will need feedback by 5<sup>th</sup> March.

# Action: Joanne to e-mail those signed up to let them know when they have access.

#### b. Older People – Living well course

Next Over 75's meeting will take place on Tuesday 1<sup>st</sup> March.

#### c. Mental health - Dementia Awareness Week

Jacky informed the Group that the Practice would like to add a library of events to our website and that one of the first would be advice on Dementia especially for the upcoming Dementia Awareness week in May. Jacky explained we want to do an event for Dementia Awareness week and that maybe this is something the Group could get involved with, we could get people such as Admiral Nurses to come in also. Ann felt that we would need to publicise and advertise this event.

#### Action: Add onto the agenda for the next meeting.

#### d. Men's Health - survey

Jacky informed the Group that Simon is again leaving the Practice as he feels acute and crisis management is more his field. The position has been filled by Sharon Crowley, who has been a District Nurse, and we will have a locum nurse starting next week until Sharon starts. Jacky explained that we do have the Men's health booklet and Simon was the main reason this was put in place.

#### Action: Bring booklet to next meeting for updates.

The Group felt that it's a shame that he is leaving as it was helpful having a male nurse as male patients would be happier talking to him. Jacky informed the Group that the Practice is looking at offering Dr Brown's husband some locum work, so that would be another male.

#### 4. Wellbeing Practice Update:

Darren Shearer introduced himself to the group and handed out a programme of activities. Most of the activities are coming to an end, but they have had a good mix of people who attend. He felt it can be difficult to get men involved.

Darren is trying to get dates for future courses so that he knows what he is working with. He is also working on a plasma screen sign so that it is the same for all Practices, creating a poster for courses and he needs to work on a small flyer or card that patients can take away.

Oli will still be working on stats. Darren explained that he can bring cases to the meetings, but will need to hide information due to confidentiality. **Action: Add to the agenda to discuss one.** 

#### 5. Patient suggestion/comments box:

None to discuss.

#### 6. AOB - future meeting dates/times

None to discuss.

# Date of next meeting: Tuesday 22<sup>nd</sup> March <u>4.30 – 5.30pm</u>