MINUTES OF CREWKERNE HEALTH CENTRE PATIENT FORUM (PF) HELD ON WEDNESDAY 12th MARCH AT CREWKERNE HEALTH CENTRE

Present: Sylvia Allman, Rick Canning, Kerry Cousins, Joan Farris, David Hughes (Chairman), Annie Gleeson (Secretary), Jayne Nicholas, Louise Walker, Anne Needle, Dr John Horne.

The Chairman welcomed Ann Needle to the meeting. Ann was attending the meeting with a view to joining the PF group.

1. Apologies for absence were received from Neville Adams, Tesa Budd, Geoff Clarke and Bob Meades.

2. Minutes of last meeting and Matters Arising

LW confirmed that the Newsletter has been circulated more widely as agreed at the February meeting. JN commented that it would be more efficient to send it out by email where possible. AN suggested sending a copy to the U3A group (University of the Third Age).

DH suggested that the Minutes of the Annual General Meeting should be considered and these were passed as correct. LW referred PR members to the new Terms of Reference on the Health Centre website.

3. Appointment System Flow Chart

Details of a draft ASF Chart had been circulated to all PF members. LW confirmed that the draft had also been presented to a Practice Meeting for consideration. She confirmed that on-line appointments would not be available until later in the year. Dr Horne explained that these would form only a small proportion of routine appointments and that there was some preparatory work to be done to establish a system that works efficiently and integrates well with patient records. CHC is one of the first practices locally, that has moved from the Synergy system to Emis Web, to show an interest in the on-line appointments system. In response to AN's question about the proportion of patients who were computer literate, Dr Horne said that, judging by the number of people who use the on-line repeat prescription system, this was likely to be a popular option for making some, routine, appointments.

A number of issues were raised about the proposed ASF chart. There was concern about whether patients fully understand the difference between a "Routine" and a "Medically Urgent" appointment and a recognition that managing patient expectations could be quite difficult at times. AG suggested that, if the ASF chart is to have any chance of making the appointment system more fair and efficient, it might be necessary to produce an additional information leaflet for patients, with clear guidelines about how to decide whether a visit to see the GP is either urgent or routine.

RC suggested changing "Booked" future telephone conversation to "Book". It was generally agreed that patients should have a reasonable expectation that the 'convenience' of the appointment for the patient and the 'availability' of the appointments at the surgery should be realistically achievable.

JN suggested that it might give a clearer message if the two options are listed as "Routine - Less Urgent - See a doctor within 2 days" and "Medically Urgent - See a doctor Today

Dr Horne reminded the PF group that it is possible to book either a face-to-face or a telephone appointment at least 2 months in advance.

AG suggested asking patients with non-urgent calls to ring after 9.00 a.m. so that just emergency calls could be dealt with between 8.30 a.m. and 9.00 a.m. This might reduce the rush to get through to the surgery, which often results in the phone line becoming 'blocked' and sometimes makes it difficult to get through to the surgery for long periods of time. This might also have the added benefit of focusing patients' minds on whether their need to see the doctor is "urgent" or "routine".

LW confirmed that a second draft of the Appointments document will be presented at the next PF meeting.

4. Parking

It was generally accepted that there is no realistic way to increase the numbers of parking spaces for the Health Centre at this time. It was felt that the matter had been adequately dealt with in the March Newsletter.

5. Fridge Magnet Update

After some discussion, it was decided to defer a decision on producing any more magnets for 6 months, when the current 'flux' about which NHS numbers should be used will, hopefully, be resolved. It was suggested that a new 'launch' of the fridge magnets could be timed to coincide with the Flu Fun Day in October.

6. Protected Groups Discussion Document

DH confirmed that this initiative had come from the County PPG. It raises the question of what plans the Crewkerne practice might put into place to deal with these protected groups. It was generally agreed that there are very few people from other countries living and working in the Crewkerne area. Dr Horne suggested that although it did not make sense to keep a wide range of translated documents at the Health Centre, it is important to know how to get hold of the appropriate literature as and when a need is identified. LW commented that there is quite a wide range of on-line services that produce suitable translated documentation.

JN and KC commented on the importance of CHC's awareness of the needs of all categories of disability and impairment within the patient group. KC mentioned, for example, the possibility of supplying audio information for people with visual impairment and enhanced services for patients with hearing difficulties. JN suggested that, where a specific impairment was identified, perhaps 'volunteers', from within the patient group, could be asked to help patients deal with any difficulties they were encountering in accessing services in the Health Centre. LW suggested that it could be up to the GPs to ask specific patients with a disabilitiy if they felt they needed additional help to access the services of the Health Centre. This could then be fed back to the PF group for further consideration.

7. Any Other Business

(1) JF raised the issue of the possibility of Stroke Services for Somerset being centered at Musgrove Hospital. Dr Horne said that the centralising of services was likely to become commonplace within the NHS in the future. In response to concerns regarding the time it could take for a stroke patient to be transported to Taunton, Dr Horne expressed the view that, in the majority of cases, this was unlikely to have a serious impact on a stroke patient's recovery.

(2) AG reported that she had recently taken up the offer to visit the new Jubillee Wing at Musgrove Hospital and had been very impressed with the quality and design of the new facilities. The three new wards - Hestercome, Barrington and Montecute, have been built to accommodate 112 surgical patients, each having an individual room with en-suite facilities. She also mentioned the open day for the public to view the new community hospital at Bridgwater on Saturday 4th April.

(3) Following a discussion on possible future health events, one suggestion was to attach a Men's Health event to any of the Movember activities which might take place. Attention was drawn to the fact that a number of other PPG's had had disappointing responses to this type of event, despite putting a lot of time and effort into the organisation. It was agreed that any future health event should be a half-day rather than a whole day event. It was also suggested that a focus on a particular health issue, for example Diabetes, could be organised by the PF group at the Flu Fun Day.

(4) LW informed the group that the Federation has organised a Dementia Day at the Henhayes Centre on Wednesday 26th March, 2.30 - 4.30 pm.

(5) DH asked RC and AN if they would like to present a short, personal profile to the PF group at a future meeting.

(6) AN drew attention to the open day being held in Crewkerne Hospital in July and suggested that the PF might like to have a stall there to promote their activities.

(7) There was a short discussion about the usefulness of appointment reminder calls from the Practice to reduce the level of non-attendance. Some PF members were unenthusiastic about receiving these calls. JF suggested that if any patients did not want to get such calls, their records could be marked, for example with a red cross, so that they were not bothered with a call.

(8) JN commented on the staff photos that were included in the March Newsletter and suggested that, perhaps, a group photo would look more appealing in future!

The next meeting will be held on Thursday 10th April at 6.30 p.m.