

**Patient Participation Meeting
Minutes of Meeting
11 February 2016
12 noon**

Attendees:

Ken - Hankham - Chair
Michelle Kenward - Minutes - Deputy Practice Manager
Jo Evenden – Finance Manager

Carole - Pevensey Bay	Yvonne – Stone Cross
Ann – Westham	Terry – Westham
Denise – Westham	Carol – Pevensey Bay
Bernadette – Langney	Fred - Westham

Apologies for absence:

Sue – Langney	Liz – Polegate
Sue – Westham	Jane – Hankham
Carol.N - Eastbourne	

Minutes

Previous meeting 30th November 2015 minutes approved.

Update on actions from last meeting

Diabetic Nurse available at Pevensey Bay: MK confirmed that after meeting she has spoken to Danielle who runs the clinics who reassured her that the letter going out to patients informs them that if they would like the appointment at either Pevensey Bay or Westham to contact Danielle and she will amend the appointment.

Bike Rack: Michelle has spoken to the landlords to ask if they would provide a bike rack to encourage healthy living for patients. Sadly the landlords have said this is not something they would be prepared to provide however Carol mentioned for Michelle to contact the Council as they have money put aside for community projects and they may be prepared to help. MK to contact Wealden Council. **ACTION MK**

Shelter outside Stone Cross: Sadly this project the landlords have also turned down.

Care.data – no one has currently heard of any further information, therefore no current update

Fiona Durling – Westham Village Conservation Group

Fiona discussed with the group, her project of creating interest for a local group from Westham Village Conservation Group, Pevensey Villages Partnership and Action in Rural Sussex , who are currently working on producing a leaflet / notice board to increase awareness of a walk around the local area. Fiona asked Michelle for the Stone Cross landlords contact details.

ACTION MK

Telephone Appointments

Yvonne discussed a local surgery's appointment system and how well her friends had reported it working. The system is whereby patients contact the surgery and a GP would call back and triage the patient over the phone, this would involve the GP making the decision as to whether the

patient could be treated over the telephone, needed to be seen that week and booked or whether the patient should come straight down to the surgery.

Michelle explained that this system is called “Doctor First” and was something that the surgery had previously looked into. Michelle said that this system may be something the surgery would look into again once we had ensured we had a full team of GPs again.

Website

Yvonne asked if we could have clinical staff photographs added to the website. Michelle to ask GPs at next practice meeting on the 18th February 2016, however Michelle did not foresee a problem. Michelle hopes to have the photographs up by the next meeting. **ACTION MK**

Check in Machine

Michelle explained that she has contacted the computer system regarding the touch screen of the check in machine as to the touch facility not being very sensitive. The computer team have shown Michelle that currently it is at its maximum sensitivity for touch.

Michelle did inform all that we may be changing computer system in the future and therefore another system running through the system hopefully may be of a better sensitivity.

CQC (Care Quality Commissioning)

Michelle thanked the PPG for their support at the recent inspection. We are awaiting our report but shared with the group the positive findings at the inspection.

- We provide a quiet waiting room for our patients.
- All clinical rooms have key code entry.
- Our yellow card system.
- Our especially good provision of service for the elderly and well thought out provision of services.
- We have excellent communication with our staff and outside agencies.
- We have a good relationship with our PPG and they feel valued.
- Staff were knowledgeable about policies and where to find them and they felt the management was approachable. All staff felt part of a big team.
- All staff records around recruitment, induction, training and appraisals were all good.

AOB

Big Conversation

Yvonne discussed with group if they would like to attend The Big Conversation,, this is East Sussex Healthcare NHS Trust are inviting local people to get involved. Our closest meeting is Tuesday 22nd March 2016 at 6.30 pm to 8.30 pm Civic Community Hall, Vicarage Lane, Hailsham, East Sussex, BN27 2AX or you Can e-mail them feedback www.esht.nhs.uk/big-conversation

Tablets

Fred asked why some tablets come in packs of 28 and some 30. Michelle explained that this is due to the manufactures and is a bug bear to all that they do not streamline all tablets to either 28 or 30.

Scams

Bernadette informed all that she had been targeted by fraudsters and reminded all to be vigilant.

Clinics running late

Ken asked if the staff could let patients know when they book in for their appointments if the clinicians is running late. Michelle thought the staff did and explained that if there was a delay when you walked in the receptionist would say, "Just to let you know, Nurse Jo has three patients waiting before you so running about 30 minutes behind, hopefully though she will catch up". However, Michelle explained that if you book in and then the clinician starts to run late the receptionist will not know at this point that the clinic is delayed and will just inform patients after you. Michelle to just check with receptionists that all are informing patients if a clear delay when checking patients in. **ACTION MK**

Test results

Carol asked if there was a delay getting hold of your test results. Michelle said if anything she thought test results were coming through a lot faster. Carol explained that her husband had dropped in a urine sample and was told to call three days later for the result, which she did, however was told to call back four times, it was not until one week later that the receptionist said they are back but the GP has not had time to look at them. Michelle was surprised to hear this as the results should have been chased up for patient and not told to call back four days in a row. Michelle was also surprised that the patient had been informed that the doctor was too busy to look at the result. Michelle to check with the reception team to ensure all know that if the result is not back within the usual time, to chase the hospital for the result, especially if a urine sample and the patient is awaiting antibiotics and if the result is back to explain to the patient that as they have waited a week they will message the GP and call the patient back with the result. If the result is back at 3 days, we would explain to the patient that the result has come through the link but the GP has not had a chance to report back would the patient mind calling back after 24 hours to give the GP time to report on the result. **ACTION MK**

Next Meeting

Monday 25th April 2016

Chair of next meeting

?Ken

Next Meeting Dates for 2016

Monday 25th April

Thursday 16th June

Monday 5th September

Thursday 10th November