**Brook Lane Surgery**

**Patient Reference Group**

**Minutes of the meeting 19th October 2011**

**Those present:-**

Michele Sharpe (Chair)

Rosemary Bonham-Smith (Vice)

Claire Chambers (Secretary)

Carolyn Hill (Practice Manager)

Carol Shires

Steve Hill

Pauline Eliot

Jill Durnell

**Apologies received from:**

Tracey Plumridge and Adam Prebble.

**Welcome**

MS opened the meeting by introducing herself as the new Chairperson for the group and thanked everyone for attending.

MS introduced Toby Cave (IT Project Manager) for the Hampshire Health Record.

Toby Cave showed a power point presentation to the group, to explain about Hampshire Health Records. This is electronically maintained information about a patient’s health history and care.

Some discussion took place during the presentation and in summary:-

* *Hampshire only*

With a paper-free system, it would mean records could be accessed from other locations. Whilst at this time, the Hampshire Health Record only operate the system in Hampshire, MS hoped that it would go further afield at some point in the future.

As the system does not operate in other Counties yet, it was a concern, that if someone was taken ill out the of the area, then there could be a delay in obtaining a patients notes.

* *Security*

Security is paramount and CH advised that coding would be done - confirming that a system is already in place. CC asked if there were any staffing issues that needed to be budgeted for. CH advised that it was very simple to upload the records from the current system to the Hampshire Health Record and there would be no issue doing this. CH expressed her concern was more about moving the data without the patient giving consent. At the moment, anything that needs to be done for a patient cannot be acted upon without consent from the patient. CH therefore feels a great worry for patients that will not know their records have been uploaded. The group felt there was a great necessity to compile marketing material for each age group. The message was not clear on the current presentation and marketing material and the group voiced their concerns about this.

* *Marketing*

All members of the group felt the message from the presentation was not completely clear. There was nothing visible to highlight the benefits of having medical records readily available through a computer system. This important point needs to show patients that this system could improve patients care and in some circumstances, could save lives!

**Minutes previous meeting**

Approved

**Involvement and Engagement in the Patient Reference Group**

MS explained the importance of all members voicing opinions and taking on any roles that may occur ie fund raising, surveys, minutes of the meeting etc. MS asked if someone would take on the role of Secretary to do minutes at the meetings, four times a year. CC offered and MS accepted.

MS asked for commitment and said the group are here present a reason. MS said that the group need to think about how to inform patients of matters that arise from the meetings. One possibility is to include any messages on the letters that go out to advise about flu injections. These letters often target the most vulnerable of the community and so any messages could be included on these letters.

MS advised that any information gathered by the group; results of any surveys; fund-raising ideas; minutes of meetings etc will be placed on the notice-board for patients to read.

**Signing of the Confidentiality Agreement**

All members signed the Confidentiality Agreement

**Distribution of the Practice Questionnaire**

CH distributed a sample of the Practice Questionnaire and explained the importance of getting the views/concerns of the patients. These would be distributed and returned so that the results could be published before December. CH advised that the questionnaires would be handed out by the GP, whilst the patient is attending a consultation. The patient would then complete and return it to the surgery and place in a box, so the questionnaire remained anonymous. CH said the surgery is given 375 questionnaires and a certain percentage needs to be returned. In order to encourage patients to return the completed form, it was suggested they would be entered in to a Free Draw for a prize.

**Discussion on the Hampshire Health Record**

As previous.

**Update on potential closure of Locks Road Surgery**

CH reported she had met with Silvia Macey and James Bawn from the Western Wards PCT. No final decision has been made yet about the potential closure, but the Locks Road Surgery does need quite a bit of money spent on it, of which funds are not available. With the new Community Hospital in Brook Lane, it is possible surgeries could be operated in that building, as many rooms are currently empty and not being utilised.

CH said that Brook Lane Surgery will need to expand, to deal with additional patients, which could be between 5000-8000 in the next 10 years. The catchment for the surgery will have to be changed to facilitate more people moving in to the area, particularly with the proposed new development Strawberry Fields and other smaller developments in the area.

CH said it was being considered at Brook Lane Surgery the possibly of utilising some of the empty rooms which are on the 1st floor. However, the problem with the rooms on that level, is the difficulty with access, particularly for patients who may have a mobility problem. CH said a lift would be in the region of £140,000.

**Issuing of group contact details**

CH had compiled a list of contact details for all members of the group, which were distributed.

**AOB**

A discussion took place about items that could enhance the services of the surgery:-

1. The possibility of having a water machine in the Waiting Room for patients. It was thought this could incur some issues with waste and cost. MS asked if there was a possibility of having one on a trial period and will investigate if this is possible.
2. A 24 hour blood pressure monitoring machine. CH explained this allows patients to continue normal

daily life, whilst the small digital blood pressure machine monitors the pressure. Cost is approximately £2000 (incl VAT). CH said this was an extremely important diagnostic tool for the GP’s and Nurses.

1. A calling board to advise patients of any delays; any fundraising events taking place; messages;

surgery updates etc. CH advised the cost is approximately £2500 (inc VAT)

MS concluded the meeting by thanking everyone again for taking part. MS suggested that the group think about how they feel a marketing message could be improved to advertise the benefits of the Hampshire Health Record and to bring some ideas to the next meeting.

The meeting closed at 8.30pm

**Date of next meeting: Wednesday 7th December 18.30**