**Brook Lane Surgery**

**Patient Reference Group (PRG)**

**Minutes of the meeting 22nd February 2012**

**Those present:-**

Michele Sharpe (MS) - Chair

Carolyn Hill (CH) - Practice Manager

Jill Durnell (JD)

Pauline Eliot (PE)

Carol Shires (CS)

Stephen Whitewood (SW)

**Apologies received from:**

Claire Chambers (Secretary), Steve Hill (SH)

**Minutes from previous meeting**

Approved

**Patient Survey 2011**

CH highlighted that the Patient Survey results were pleasing overall and the doctors scores are, on the whole, weighted as excellent. The results for the Practice highlight some areas for enhancement – although there are some very easy, very quick wins e.g. trying to make the waiting area more user friendly and less ‘dismal’, ensuring that there is always someone on the reception desk, increasing the speed at which the telephones are answered and better execution of the telephone appointments facility.

Telephone Access

JD’s suggestion of developing a questionnaire to explore further the issues raised about ‘Telephone Access’ was accepted by the meeting. This will provide information on whether the areas for enhancement are relating to making appointments, telephone appointments, prescription requests or other activities. Information obtained will also quantify the level of awareness/usage of the on-line appointment facility.

**ACTION: JD to write questionnaire and circulate to PRG members**

Telephone Appointments

SW proposed that the telephone appointments could work more efficiently if the onus is with the GP to call the patient back, rather than the patient. SW highlighted his own experience that demonstrated that getting through on the Practice main phone line, at a set time, is difficult, as the phone is engaged. This proposed change would also let the GPs build the telephone consultation around their other work commitments. CH is to discuss with the doctors.

It was also suggested that CH ask the clinical staff to monitor how many of their consultations could have been dealt with using the telephone appointment facility rather than face to face consultation.

**ACTION: CW to discuss the above with the doctors**.

On-line Appointment Booking

The meeting acknowledged that this is an under- utilised facility and it was proposed that nominated Brookfield School pupil(s) could be invited to offer waiting patients the opportunity to be shown how to use online appointment booking. This would give an opportunity to enhance their CV/Personal Profile, especially if they are looking towards a career in healthcare.

CW said that a computer and programme could be made available for this activity. In addition the student(s) could ask patients about the methods they used to make their latest appointment.

CW said that patients could then get their personal access numbers from Reception so patients can utilise on-line appointments.

**ACTION:**

* **SW to contact Dr Hutchings at Brookfield School to discuss involvement of pupils as shown above.**
* **JD to write questionnaire for students to use.**

Waiting Room

PE enquired about the possibility of the television being used again in the waiting room. JD proposed that making changes to the Waiting Room is a good way of demonstrating to patients that their feedback is listened to and acted on. This, in turn, could encourage more respondents for the 2012 Patient Survey.

**ACTION: All members to come to the next meeting with ideas for enhancing the Waiting Room.**

Publicising the Excellent results

It was agreed that MS should make local MPs and Councillors aware of the excellent results from the Patient Survey.

**ACTION: MS to contact local MPs and Councillors that she is already in touch.**

**Hampshire Health Record Preparation and Timetable**

In order to ensure adequate time allocation for the fundraising item, MS proposed that this item was only briefly discussed at this meeting but picked up more fully at the next one.

MS showed outlines of posters proposed for the notice board in the Waiting Room and it was agreed that all forms of communication should be utilised. Communication should be big and bold.

CW informed the meeting that there is a piece about the Hampshire Health Record in the latest Newsletter.

It was reiterated that information would be sent out with the ‘flu letters and CW said that Pharmacy2U (P2U) manage this mailing. JD suggested that, as P2U will have generated income by the uptake of Practice patients using them for their repeat prescriptions, CW could request that they do additional mailings for free.

**ACTION:**

* **All members are asked to come to the next meeting with suggestions as to how patient awareness can be increased about the Hampshire Pateint Record**
* **CW to speak to Pharmacy2U**

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

CH reported that it has been announced that Locks Road Surgery will be closing and the PCT are looking to set up a new Practice within Fareham Community Hospital. This has to go to Tender, which takes time, so it is anticipated that the new surgery will not be operational until late 2012, earliest. The impact of Locks Road Surgery closure is being assessed by Brook Lane Surgery e.g. staffing, utilisation of first floor consulting rooms.

CH is continuing to assess the changing of the catchment area for the Surgery and it looks likely that Priory Park will be captured within the boundaries. Lockswood Surgery has announced that they are now only taking new patients from Warsash.

**Post Office Parking**

MS reported that she has received several letters from MPs and Councillors in response to her communication about the problems since the Post Office banned customer/staff parking on their premises. It appears that it was accidents on the Delivery Office site that drove the Post Office to make this decision.

Measures have been made at the Surgery to deter parking inappropriately on Surgery grounds e.g. flower beds but, if these are effective enough other methods will be used.

**ACTION: MS to follow up MPs and Councillors to reach satisfactory outcome**

**Fundraising**

MS informed the meeting that, in discussions with CW, it was felt that the fundraising event would be an opportunity to inform patients of various items e.g. Hampshire Patient Records. It was agreed by the PRG that this also offered an opportunity to heighten awareness of the on-line appointment facility.

It was agreed that fundraising should be for the Waiting Room enhancement and the 24 hour Blood Pressure Monitor.

SW instigated a discussion about the PRG’s role as fundraisers for the Surgery as the Practice is, in essence, a business. CW explained that there are ‘fringe’ items e.g. 24 hour BP monitor that are outside the general Practice costs. Pharmaceutical companies have, in the past, provided such ‘services to medicine’ but are now not allowed to. This has created a need for fundraising.

There was a feeling, within the group, that there is uncertainty as to how readily patients would attend a Funday, which would entail considerable preparation. In light of this, SW suggested that a stall could be obtained at Sarisbury Green fete which is less labour intensive and a way of monitoring patients’ willingness to take part in fundraising. This stall would predominantly be used to inform patients rather than fund raise.

JD suggested that a children’s poster competition could be held which would be judged at the fete. One suggested theme was ‘Keeping Healthy’ and the winning poster(s) could be used in the waiting room.

**ACTION:**

* **CW to check with the Partners about attending Sarisbury Green Fete**
* **SW to find out details about Sarisbury Green Fete and pass them on to MS**
* **All – come to next meeting with any ideas.**

The meeting closed at 8.00pm

**Date of next meeting: Wednesday 28th March 2012 at 18.30**