Notes from Patient Group meeting held on Monday 21st March 2016

Present June Wheatcroft, Dorothy Wright, Walter Satterthwaite, Joy Riley, Helen Marriott, Dr Southcott.

Apologies Val Meredith, Sue Barrett, Pat Oldfield

1. **Health and Well being**

Neville Scholten from the Health and Well being service spoke about the Live Life better programme and how to promote the service to patients. They offer lots of support and can signpost patients to different organisations. Sally has done a display in the surgery but the group felt it needed to just have certain pointers on it rather than everything altogether.

It was suggested that we have a wipe clean folder in reception for patients to look at with various information in regarding self help and where patients can get other advise from.

The posters in reception possibly need sorting out as well, Walter said he would be happy to have a look at this with Helen and should possibly concentrate on 3 pointers and for the notice boards to be rotated around so patients look at everything, rather than everything being cluttered.

1. **Carers**

It was asked how much take up there had been regarding identification of Carers, HM says we are trying to push this and make as many patients aware to register themselves as Carers as possible.

1. **Survey**

The survey was discussed and to be published on the website. Points arising:

DNA’s change to 3 missed appointments in 12 months but each to be reviewed on an individual case in certain circumstances.

B/P machine in waiting room, lengthy discussion regarding this and where the best place it would be sited. Helen to ask other practices who have these where they have them positioned. Concerns expressed if other patients looking and taking note who is using it they may be self conscious about using it.

1. **Appointments**

We are still struggling with appointments, in April we are having a meeting with all of the staff at the surgery to see what ideas we can come up with to improve this. To have a total overhaul of the appointment system, to look at who can do what and making best use of clincians time. Chamge medication reviews to yearly, to have pharmacist in the surgery who can do medication reviews instead of the GP’s. Have appointments with the HCA for B/P checks and then the GP’s can review the medications. To have a note on the front of the patients notes to see who they need to see to have medication check. Once we have had the meeting we will feedback to the PPG so that they are aware of what will be happening. – There is a problem with recruiting GP’s at the minute. We should be getting another clinician to replace Dr Salako who has now left us to work elsewhere.

**5. Date and time of next meeting arranged for 25th April – to have the AGM for the first 15 minutes of the meeting. – This date may have to be changed now as the staff meeting to talk about appointments etc is not until the 27th April.**