



Minutes of the Friends of the Crawley Down Health Centre (PPG)

Monday 3RD June 2013

Present: Peter Dodds/ Glynn Roche – Joint Acting Chair, Caroline Custard – Secretary, Jane Armstrong, Dr Dan Jefferies (doctors rep), Nicky May (practice rep), Eve Rowat, Florrie Grimwood, Mollie Tavani, Liz Wigzell, Jennie Bleach, Anne Cull.

Agenda Ref:	Minutes	ACTION
1.	<p>Apologies and Welcome New Members: Peter welcomed new members Jennie Bleach and Anne Cull. Anne will represent Sharpthorne and West Hoathly. The new doctor, Dr Kanga, came and introduced herself to the Committee. Peter explained that as we had called a public Annual Meeting, the Agenda had been revised, so that ‘public’ matters could be discussed first. However, as no ‘public’ members were attending, he would revert to the previous Agenda. Mollie pointed out the Constitution makes no provision for holding a public meeting. This should be investigated.</p>	<p style="text-align: center;">PD</p>
2	<p>Amendment of Constitution/Election of Officers: Peter and Glynn have agreed to be Co-Chairs and this option has been inserted in to the Constitution. As we have two Co-Chairs, it was decided it was not necessary to elect a Deputy Chair, but the post would remain in the Constitution if a Deputy was needed at a later date. Peter and Glynn’s election was proposed by Caroline Custard, seconded by Jane Armstrong and it was unanimously passed.</p> <p>The Aims , quoted in the Constitution, were exactly the same as the Terms of Reference, so these will be removed and quoted as Terms of Reference.</p> <p>Mollie pointed out some amendments that should be considered:</p> <p>Item 1 The name of (delete ‘proposed’) - agreed Item 3 Mission Statement – ‘health’ to now read ‘care’ – agreed Item 6 Membership – delete ‘staff’ Item 11 - Annual Meeting or ‘appropriately convened extraordinary general meeting’ – agreed Item 12 donated to CDHC Equipment Fund – agreed</p> <p>The Constitution was proposed by Jane Armstrong and seconded by Liz Wigzell – accepted unanimously</p>	
3	<p>Minutes of Meeting held on 15th April 2013</p>	

	<p>AOB item a) change Pasad to Pasan Minutes proposed by Glynn Roche, seconded by Eve Rowat Peter to publish minutes on Notice Board and website</p>	<p>PD</p>
4	<p>Matters Arising: Suggestion Box: Glynn showed the new sign for the box, which the doctors had agreed , with the emphasis on non medical issues. It was suggested it was made bigger, more dynamic. It will also be on the website. Jane agreed to be in charge of it. She will empty it once a week, acknowledge the contents and pass them on to be dealt with. Mollie asked who would deal with the queries. If the committee can help, it will, otherwise they will be passed on to the practice. Mollie's friend has still not had a reply to her query and Mollie feels very embarrassed. Nicky said she had rung her but got no reply, so will write</p>	<p>NM/GR</p> <p>NM/DJ</p>
	<p>Newsletter Sub Committee: This will be made up of Nicky and Glynn,who will be editors and Dennis in a consultative role. No other members volunteered to join. It will go on the website but there will also be hard copies available in the surgery (possibly in a laminated form). Anne, Florrie and Peter will distribute hard copies to Sharpthorne, West Hoathly, Turners Hill Park, via their Parish Magazines. Caroline to ring the vicar to see if it can be printed in the Village Newsletter or the hard copy inserted free of charge.</p> <p>It will be published quarterly with simple, relevant articles, members are asked to contribute.</p>	<p>NM/GR</p> <p>CC</p>
	<p>Baby Clinic/Health Visitors: Nicky and Debbie reported in their meeting with Peter on 29th April there was a new health visitor, Margaret O'Connor, who is very aware of the problem. One of the issues was the lift which is not owned by the doctors but by the old PCT. The CPRG will be discussing non use of facilities at its next meeting on 11th June, which Nicky will attend. The lift design has proved to be faulty in many of the new surgeries it was used in. Nicky to report back on meeting. Dr Jefferies felt the lift was just an excuse as there is a very suitable room downstairs and he hopes Margaret will be willing to discuss the matter with the practice. Jennie reported that only two mums stayed after the toddlers group to see the Health Visitor, who can't come any earlier. They can't wait long as it's their childrens' lunch-time. Nicky forwarded patients' comment to the Health Visitor. Peter suggested she keep pushing the health visitor, Liz Wigzell suggested an item on it goes into the newsletter to make the patients aware of the situation and hopefully make the Health Visitors realise how important we think it is.</p>	<p>NM</p>
	<p>Appointments Situation: Peter made the committee aware that an electronic appointment system will be introduced in April 2015. People will use it for routine appointments. It may free up the phones but a phone call can sometimes answer the problem straight away via triage. Nicky is investigating available systems and the costs.</p> <p>Mollie reported a friend was asked to make two separate appointments for two separate problems, quite far apart, rather than being able to make one 20 minute appointment. Dr Jefferies reported this had always been a</p>	

	<p>problem, often the second one is more important than the first or they may be linked and patients are poor at judging which is the more important. The NHS directive dictates 10 minutes per person but it has always been contentious. Glynn suggested possible newsletter item.</p> <p>There was no further Matters Arising.</p>	GR/NM
5	<p>Chairman's Report (copy attached): 'Patients' choice' is at the fore front of the new NHS and it is therefore important to CPRG and PPG. The bi-monthly meetings with Glynn, Peter, Nicky and Debbie will keep things moving between the committee and the practice. Glynn said that it was important to keep making progress while at the same time respecting the Constitution .</p>	
6	<p>Dr Jefferies Report: The practice feels the committee is working very well with them, the bi-monthly meetings with Nicky and Debbie are very positive. PPG's are an important voice and need to be heard. Funding for commuter clinics will stop next April. He suggested that the committee could use their 'voice' with the CPRG on this. This could be brought up by Peter at the next CPRG meeting. The PPG needs to let the CPRG know what they are trying to achieve.</p> <p>Caroline understood there was no early morning commuter clinic now that Dr Pasan had left. Dr Jefferies said the other doctors were unable to start that early. He was still running the Saturday clinic. Caroline asked if there was enough interest, could an early morning clinic during the week be arranged. Glynn said it was good for the doctors to be seen meeting the needs of their patients. (NB Caroline's daughter was not offered the Saturday morning clinic when she asked for a commuter appointment. Does that mean the receptionist was unaware of it or is it only for emergencies?)</p>	PD
7	<p>Organisation Chart on Notice Board: Peter asked if members would have any objections to their contact details on the notice board – there were none.</p>	PD
8	<p>Becoming a public member of the CCG: It's free and we would receive the latest information, eg it is Patient Participation Awareness Week this week. This information could be put on the notice board and in the newsletter.</p>	PD
	<p>Perpetual Survey: The annual survey is held on 31 March every year. Glynn suggested we could have a rolling survey. The questions could be changed, made relevant to the time of year. The results could be brought to our meetings. The annual survey is a lot of work for Nicky and ends up being rushed as they all come in at once to be analysed. Nicky and Glynn to set a new one up with suggestions from the committee, eg commuter clinics? It could also be an item for the newsletter.</p> <p>There was a comment on the last survey from a patient, complaining about the dispensing of prescriptions and the receptionists and asking if a specific</p>	NM/GR

	<p>section could be included in the next survey, which Nicky will do. Nicky advised there is a procedure in place for complaints, an incident report is written and a full investigation is made. Often the patient had made a mistake. Mollie reported her husband's prescriptions have sometimes been wrong but she has never complained. Maybe a newsletter item should request patients to advise the practice is prescriptions are wrong, either from the dispensary or pharmacy. Caroline reported the e mail repeat prescription system had never let her down. Mollie said she doesn't always get an acknowledging e mail that it is being processed.</p>	NM/GR
10	<p>Funding: We have no funds so Nicky does not need to make a Treasurer's Report. There needs to be an allocation for ink/paper. The practice used to have a collection jar for their 'equipment fund'. Doctors are not allowed to accept any 'freebies' any more. If money is left in a will, or at a funeral collection, then it goes into the equipment fund and if there is a short-fall the doctors make up the difference. Dr Jefferies explained there were a lot of items that are not funded by the NHS that the practice has to pay for, eg ECG and blood pressure machines and they pay the nurse to operate the ECG. Patients do not realise this. As a result, it was decided to form a fundraising sub-committee, Jane and Liz agreed to run it.</p> <p>A specific 'equipment fund' could be an item for the newsletter/website and on the new TV screen. A 'Just-giving' account could be set up with a list of those donating.</p>	JA/LW NM/GR
11	<p>TV in Waiting Room: It will carry basic information. The third party, ie advertisers, chooses content. Committee will suggest items to Nicky. There's a 2 year contract. Nicky to ask if we can sell our own advertising space and take the contract over in 2 years. Peter to send Nicky an item to include on it.</p>	NM/PD
12	<p>Anne Cull's Update: She has put up 8 posters around Sharpthorne and West Hoathly and needs more. Feedback she has received includes</p> <ul style="list-style-type: none"> • the Costcutters prescription service is appreciated • Patients are worried that the village surgery might be reduced further or even closed, it operates twice a week and is a lifeline for many • Waiting times for appointments are about 3 weeks, same as at Crawley Down and people are asking if the practice can employ more doctors. • The bus timetable problem in West Hoathly and Turners Hill doesn't help as more people must now drive to Crawley Down. <p>Dr Jefferies replied there are no plans to close the surgery at present but appreciates it is inefficient, the appointment situation will only get worse in the whole practice if there is no increase in resources but an increase in demand. The new housing will bring new demand but the new national health set-up is trying to cut costs.</p> <p>Nicky advised appointments situation is improving slowly, some days are</p>	

	<p>worse than others. If a patient will see a student doctor, it's only one day's wait, Dr Kanga is 3 days. If it's urgent, the triage system comes into operation. The texting arrangement is improving things slowly. In December there were 116 missed appointments; in April 61, it started up in February.</p> <p>Anne also asked if there were specific epilepsy clinics. Dr Jefferies explained that patients are assessed annually but there is no specific clinic. Mollie is going to sort the medical literature into lever arch files for easier access and check on the epilepsy leaflets.</p>	MT
<p>A</p> <p>B</p> <p>C</p> <p>D</p>	<p>Any Other Business:</p> <p>Empty Rooms in Surgery: The building is owned by what was the old PCT and the surgery effectively leases forty percent of the building capacity. Martin Hill, the dentist, showed an interest when it was first built. He would put money in.</p> <p>Website: Can we access it without going through the webmaster, who would limit our space, like the TV screen. If we have to contact Nicky every time, it increases her workload. Can we link it to a website of our own? Nicky and Glynn to discuss this. Glynn would like to find out how often it is visited and which pages are most visited.</p> <p>Dispensing Campaign: Peter reported questions were asked in the House of Lords and a debate ensued, which gave it publicity. Whilst the Which report on pharmacies was very damning, pharmacies are a very powerful lobby.</p> <p>New Committee Members: Mollie asked that if all patients are members, should we restrict the number of committee members. Peter said anyone who shows an interest can join the committee. Nobody showed up for the Annual Meeting.</p> <p>There was a Vote of thanks for Jane for bringing wonderful refreshments.</p> <p>The meeting closed at 9pm. The next meeting will be held on Monday 5th August at 6.30pm.</p> <p>CRC/11th June 2013</p>	NM/GR