

The *AshgrovePatient* Group

MINUTES of Meeting

Thursday 17 November, 2016, 5.00 – 6.00pm

Present: Steve Carter (SC – Chair) Terry Hopper (TH), Pat Jones (PJ) Roy Davies (RD), Robert James (RJ), Barbara Morgan (BM), Sarah Powell (SP)

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| 1.0 | Apologies for Absence – Eluned Jones, Romana Khalid, Moira Moore | |
| 2.0 | Confirmation of Minutes (15/09/16) – approved | |
| 3.0 | <p>Matters Arising (15/09/16)</p> <p>5.0 – Access – Patient Questionnaire – Results – It was felt that one area of access people found difficult was booking an appointment to follow-up results. SP explained that results might be marked “Routine appointment” or “Urgent appointment”. The group felt that whilst even non-urgent results can be worrying for the patient they accepted that being advised by the receptionist that it was non-urgent provided some comfort and accepted that the GP workload needs prioritising.</p> <p>Suggestion – could the practice send SMS messages to those with normal results?</p> <p>Follow-up appointments requested by GP - It was suggested by the group that when a GP asks to see a patient back in surgery that the GP book the appointment at that time. SP explained that this was not best use of the GP resource and receptionists were best placed to book appointments. It was requested that diaries be open far enough in advance for this type of appointment to be booked. SP explained that DNA rates increase when appointments are booked too far in advance and also such a change to the diary system would require a huge change in practice protocol.</p> <p>The group would like the suggestion to be put to the Practice.</p> | <p>MM</p> <p>MM</p> |
| 4.0 | <p>Rowena Miles – Community Health Council - Guest Speaker</p> <p>Rowena gave a very informative overview of the CHC role in both secondary and primary care. She explained that they look at things such as the patient environment, patient dignity, privacy, etc. They visit premises at different times of the day and do so unannounced in secondary care. An example of the types of issues where the CHC input has raised the profile was nursing shortages on wards.</p> <p>Rowena advised the group that patients can use the CHC to help them raise any concerns they may have with the Practice. She advised that it is usually best to approach the Practice Manager in the first instance, and that is the advice they give, but if the patient doesn't feel able to, or simply would like advice about whether their concern is reasonable, then the CHC are there to help.</p> <p>The group asked Rowena how they can get more involved with forming local health services. Rowena advised that they could contact Sharon Jeynes at Cwm Taf UHB holds details of forums and consultations.</p> <p>Suggestion – The group requested that the CHC advocacy service be advertised on the TV display within the surgery.</p> | <p>SP</p> |

Dates of Future Meetings – 6.00 – 7.00pm

- 19 January, 2017
- 27 April, 2017
- 13 July, 2017
- 19 Oct, 2017