**HIGHLANDS SURGERY PATIENT REFERENCE GROUP**

**Meeting held at The Estuary Club, 1386, London Road, Leigh on Sea SS9 2SQ**

**MINUTES OF MEETING HELD ON 29.1.19.**

1. **MEMBERS IN ATTENDANCE:**

Dr H Dr S KB Practice Manager RD PH Chair KB BG PHa AJ DJ AL EM HN CP MP LS JS PS-S PS MS SW

**Apologies:** LB WH ML-B RL-B JSk MS BW

**New members:** VJ DT JdT

1. **MINUTES OF LAST MEETING**

The minutes of the last meeting were read and agreed by all to be a true and accurate record.

1. **MATTERS ARISING**

The PRG noted how sorry they were to lose Debbie W, previous Asst Practice Manager, and expressed what a great loss she would be to the PRG. All present felt she had been a great asset & friend to us for a long time. We wish her well in her career break.

1. **SURGERY MATTERS**

Dr H read out a statement from Dr G stating that with considerable sadness he would be leaving Highlands Surgery as of the end of May 2019, after sixteen & a half years at the practice. The PRG immediately responded with dismay & felt that Dr G’s departure would be a great loss to the surgery & the patients.

Dr H advised that this would obviously cause a few problems as, from the beginning of June, there would only be 2 partners. Therefore Highlands Surgery would now be looking to change in line with other practices within the town and in fact practices nationally. For some time we have been the only surgery not in line with current changes.

Highlands Surgery would be advertising for new staff, including Nurse Practitioners(NP). He explained there would be more use of NPs to treat minor illnesses, and more referrals would be made to them. The NP can always contact the GP, & the duty Dr would always come in if deemed necessary. NPs will need to be recruited as it would be 2 years before our own surgery nurses, could be trained.

He explained that we are very fortunate with current locum care, 2 Drs have been GPs in the town for over 20 years. He said that locums were often not so available in the summer months as many, being retired, wished to go away then. He said that the practice wouldn’t employ locums if they weren’t happy with their qualifications. He also advised that one of our GPs would be going on maternity leave from the end of May.

Dr H explained that, as with any big change, there were bound to be teething problems. It is currently very hard to recruit GPs as many Drs just want locum work, where they are salaried and able to just work a certain number of hours a week & leave. It is hoped that in time we will be able to use other health care professionals such as trained pharmacists & emergency care practitioners to share the load.

He explained that changes would need to be made to the appointment system. These changes needed to be implemented speedily & so would take place from 11th February 2019. Phone appts would be available a week in advance with some available on the day. When daily appts have gone, then an appt would hopefully be made for the next day. There would also be standard pre-bookables on line. It was probable that telephone clinics would be used more. He stated that emergencies would always be seen on the day, and the frail elderly would not be affected. He said that obviously the changes were a shame, but there were no other options. He was aware that it was probable there would be a cohort that like the changes and a cohort that did not.

He advised us that the idea of the ‘family practice’ really had gone. Patients had changed in their requirements & there was now a much greater demand for instant access.

A question was asked about receptionists relaying information to Drs. It was explained that all receptionists received Signpost Training, to assist them to relay information correctly.

Another question was asked as to how the message of the changes was going to be put across; it was agreed it would be good to put it on the front page of the website, on the television screen & also possibly to put notices up.

The Drs were thanked for coming along & providing us with such clear & up to date information. As a PRG we recognise the difficulties for the surgery, and we will seek to work together with them.

1. **FLU CLINIC UPDATE**

We were informed there were a few vaccines left for anyone who had not yet been vaccinated.

1. **GETTING THE SURGERY WEBSITE AS AN APP**

KB said they were currently looking at the website provider & this was likely to change.

The surgery would also be changing its clinical system. It is currently with Emis, but most surgeries are on Systm 1, so we will be coming in line & changing to Systm1. She explained we need to be on the same system as others in the area to provide effective service. This will definitely be for the long-term good of the practice. KB said she is constantly looking at ways to improve. Reception has been sorted successfully, so now that the focus is on admin staff, it is possible that a new prescription clerk may be needed. Of course help & advice will be sought from others who have been through the process. Pall Mall Surgery changed to Systm1, 18 months ago, so will be able to offer advice.

She explained that Babylon will still be in operation, but that they are now not prescribing because of expansion.

1. **WORKING WITH PRG**

KBexplained that she would like to work a little differently with the PRG this year, so that we can get a greater understanding of roles & specialities. In February the Reception Manager will be coming to speak to us. It is hoped also to have a Muscular-skeletal Practitioner come to speak to us.

1. **A.O.B**

A question was asked about patients seeing vaccines in their records when on line. KB said these should be available. In the case of a problem it was best to call at the surgery.

There was also a question as to whether there was any update on the availability of liquid nitrogen, KB said not at present.

We were told the extension to the building was on hold at present as staffing matters needed to take precedence.

**Time and date of next meeting**

The next meeting will be at The Estuary Club on **Tuesday February 26th at 12.30pm.**