

MINUTES OF THE ANNUAL GENERAL MEETING OF LISTER MEDICAL CENTRE PATIENT SUPPORT GROUP WHICH TOOK PLACE ON WEDNESDAY 3<sup>RD</sup> MAY 2017 AT ST JAMES CHURCH AT 12 NOON.

Present: Officers – Brian Cooper (Chairman and Treasurer), Sheila Smith (Fund Raiser and Caterer) and Moyna Strowman (Secretary). Members: Margery and Eddie Collier, Barbara Foster, Margaret Remfrey, Patricia Robey, Doreen Smith and David Swallow. Practice Representatives: Bethany Wilson (Deputy Practice Manager), Teresa Jones (Reception Supervisor Afternoon Shift), Deborah Howarth and Amanda Richie.

1. Brian welcomed everyone and thanked them for coming.
2. Apologies for absence were received from Karen Cakmak, Lyn Merrell and Lillian Swallow.
3. Minutes of the Annual General Meeting of the Group of 11<sup>th</sup> May 2016 had been circulated before the meeting. There were no amendments and Brian signed them as a true record of the proceeding
4. There were no matters arising not on the Agenda.
5. Annual Report by Chairman: Brian said that it had been a difficult year. On two occasions now we have been promised a speaker but the person booked has not appeared. I have lost count of the number of my e-mails and telephone calls trying to secure a speaker. I am only able to express my sincere apology. We have very good support from the Practice Manager and Karen's Deputy Bethany Wilson who will be reporting later on and this situation encourages me to think that the future of the Group is secure and there are steps that we can take to enliven the Group and take it forward. I remain committed to this purpose. Things that have occurred since our last meeting include a meeting of the Harlow and District Health Care Forum on 22<sup>nd</sup> March. A talk was given by a senior pharmacist employed by the West Essex Clinical Commissioning Group (the CCG) which wishes to improve patient care at pharmacy level. Across the country 3000 small pharmacies will close as Government funding will be withdrawn. This will not affect Harlow. In some cases people needing a pharmacy will have a long walk to reach one if they do not have access to personal or public transport. A court case is pending against the Government in respect of these proposed changes which has not yet been heard. It is intended by the CCG that pharmacies tap into the general health agenda and improve their services beyond dispensing, medicine checks and general advice.

Some services suggested were: monitoring side-effects of newly prescribed drugs; care plans for asthmatics; courses on self-management of medication; referring patients back to their GP when necessary; monitoring diabetes and blood pressure medication; providing information to enable people to understand why a drug has been prescribed, what it does, when to take it, coupled with lifestyle requirements when taking the drug. This is an ambitious plan which is matched by taking on the dispensing of drugs in hospital. A current proposal is to allow patients suffering from Parkinson's disease to self-medicate on the ward so that their drugs are taken when needed and at the proper time (often they are not as the rigid ward regime for dispensing does not permit it). This idea of Self-medication may be extended to some other patients. If this proposal is introduced and proves successful it will not only improve the lives of patients but also will aid smooth discharge.

In addition a plan is in operation to improve medication within care homes, including keeping the home informed daily when a client is in hospital and ensuring a home is continuously well stocked with essential drugs. A frailty Unit has been established at the hospital. This may be used for interim care sorting out a problem and returning the patient home without the need for admission. Another initiative is making sure medication for discharge from hospital is considered as soon as a patient is admitted to a ward, thereby, facilitating smooth passage to discharge. All in all, this is a widespread programme of improvement.

The CCG also wish to encourage on-line communication with the surgery whenever possible. A leaflet is available on the subject and if anyone would like a copy, please give me a ring. Brian quoted a passage "wouldn't it be great if you could look at your GP records on-line? Well you can! You can go on-line and see information including, your medications, allergies, test results, immunizations and illnesses. You can also book and cancel appointments and order repeat prescriptions".

Another representative of the CCG gave a talk about the hospital being in special measures under the watchful eye of NHS England since October last and the measures that had been taken to transform the situation. Improvements include: dealing with bed blocking including intermediate care at local hospitals and homes; the closure and re-location of the surgical preparation ward with less beds (if beds were unoccupied they could not be used for general use as the ward generally would have needed re-sterilization) freeing the whole of the old ward for general use; re-organising the various aspects of social care into a single hub instead of in various locations within the hospital; re-locating the discharge lounge and the Emergency Assessment Unit; involving consultants and particularly nursing staff in providing ideas (which have been successfully implemented) improving treatment and staff morale; senior management has changed and a new Chief Executive has been employed (he previously turned round a failing hospital). It has been necessary for staff to report almost daily to NHS England and a regional director from that body has worked in close contact with the staff. While the 95% target for diagnosis, treatment and discharge within 4 hours has not yet been reached the hospital has come very close and expectations are that it will be reached soon. Most of March has been in the ninety percent range and spare bed capacity has at times been a feature (an incident in March interrupted progress when on one day 300 patients attended A. & E. in one and a half hours). Also the discharge to care target has yet to be reached but again it is expected it will be very soon.

The next meeting of the Forum is 14<sup>th</sup> June 2017, at 6.30pm at the conference room at Harlow Fire & Rescue Station and everyone is welcome to come. One of the topics will be the merger of the two local bodies dealing with mental health.

6. Treasurer's Report: Brian indicated that our accounts for the period ended 31<sup>st</sup> March 2017 had been certificated with the assistance of Bethany Wilson and Gill Jackson (Finance Lead) at the Surgery. We are very grateful to them for giving up their time and expertise to enable this to occur. Our current credit financial position is: Stan Batho Account £1389.25. (no activity this year); General Account £1024.26. (thanks to the most generous donation by Doctor Mistry). We have a total of £2413.51.at the bank and at 31<sup>st</sup> March cash in hand was £14.89.

7. Fund Raiser's Report: Sheila Smith said that it had not been possible to carry out any activities this year but in the current year she will be looking into the possibility of a quiz night.

8. Practice Report: Deputy Practice Manager Bethany Wilson reviewed the management restructuring that had taken place. A new Lead Practice Nurse has now been employed Emma Harnett who will take on travel vaccinations and the role of line management for the nursing team including our health care assistants. Two new salaried GPS have joined the Practice. We have additional pharmacists associated with Stella Healthcare who are available to deal with prescriptions and answer question from patients. We have 2 apprentices in training in administration and IT. As to the new surgery, it is expected that building will soon commence with completion expected by September 2018. Brian raised a question concerning the lack of information on the Practice web-site relating to the Friends. Previously there had been a lot of useful information available. Also there is not sufficient information on the call system about us. It was agreed that Brian will meet with Karen and Bethany to discuss all these aspects and the Notice Board very soon. Doctor Mistry is coming back to work part time in May and has confirmed her wish to keep in touch with the Group. Brian referred to the telephone, reception access and other feedback survey and went through the form with suggestions but they did not find favour with the Practice. Patients that did not attend their appointment numbered 300 in March and 311 in April. The Practice now has 18,800 patients on their list. NHS England is due to cut resources presenting us with a challenge but we are determined to do our best for our patients nevertheless. Mention was made of the Hub providing out of hours services during the week and the Hamilton practice service dealing with routine cases at the week end. Brian thanked all attending from the Practice for all of their assistance.

9. Election of Officers: Brian said that as there were no candidates other than those seeking re-election he proposed to deal with the election on a composite basis and asked for a proposal for Brian Cooper for Chairman and Treasurer, Sheila Smith as Fund Raiser and Moyna Strowman as Secretary. These candidates were proposed by Barbara Foster and seconded by Patricia Robey. On a show of hands all three candidates were unanimously re-elected to their respective offices.

10. There was no other business save for the date of the next meeting which has to be changed to 26<sup>th</sup> July 2017 and a speaker for the next meeting "Healthy Minds" which Bethany said she will organise.

11. Brian Closed the meeting and thanked everyone for coming.