



## Cleobury Patients' Voice

*"Bringing together patients, health professionals and voluntary groups to improve the health and social support services of our community."*

### Minutes of Meeting – 24<sup>th</sup> April 2017 at 6.30 pm

Present: Mark Radford (MR), Joan Fisher (JF), Kevin Burrows (KB),, Rod Stewart (RS), Pat Greig (PG), Simon Harris (SH), Jo Booton (JB), Paul French (PF), Dr Andrew Allsop (AA), Mark Dodds (MD)  
Apologies: Rosie Bond, Sue Del Mar (SDM), Katie-Rose Stone (KRS), Jenny McCrorie

<p><b>Welcome</b></p> <p><b>Practice Update (including associated Agenda Items and/or Matters Arising)</b></p>	<p>MR welcomed members to the meeting and apologies were noted.</p> <p>AA/MD provided an update:</p> <ol style="list-style-type: none"> <li>1. Practice had been concentrating on <b>March year-end activities</b> and had little to report.</li> <li>2. <b>Patient WiFi</b> – MR cited national roll-out and asked what if any plans were in place for Cleobury. AA not sure of advantage for patients. Monies in support of this have been devolved to Shropshire CCG who are also looking at new telephone systems.</li> <li>3. <b>Removal of low-cost prescription items</b> - MR asked about this (which would include OTC painkillers such as paracetamol, and gluten-free products). AA pointed out that the latter were now much more widely available and that the former cost the NHS far more than they would cost the patient. However, no specific instructions had yet been received and, currently, still only proposals.</li> <li>4. <b>Continuity of care for older patients</b> - MR asked about NAPP item that indicated a reduction in hospital admissions when such patients consistently saw the same GP. AA explained that this happened at Cleobury as much as possible. SH asked how people choose their GP. AA said it was a matter of patient preference and not necessarily related to the GP with which patients were formally registered</li> <li>5. <b>Medical record access</b> - Access from hospitals to GP records was discussed, together with police access for people with mental health issues. AA advised that a police doctor would assess in the case of the latter. MR to research current status and access provisions for Summary Care Record.</li> <li>6. <b>Television screen</b> in waiting room – content now on monitor although still ongoing work. JF said she thought it was a good addition.</li> <li>7. <b>Coffee/tea vending machine</b> – as SDM was not at meeting it wasn't known if the survey on usage and pricing had been done.</li> <li>8. JB asked about the <b>volunteer who visits practice's patients</b>; concern about those with dementia who may be unaware she is going to visit. Lack of clarity about her role and how she knows who to visit – part of CoCo but practice-specific. MD to investigate.</li> </ol> <p>AA/MD were thanked for the update and left the meeting at 7.15.</p>	<p><b>MR</b></p> <p><b>SDM</b></p> <p><b>MD</b></p>
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<p><b>Remaining Action Notes and Matters Arising – 20th March</b></p>	<p><b>Local Community Healthcare Meeting 9th March</b> - SDM yet to circulate a copy of her account of the meeting, prepared for Neen Savage Parish Council.</p> <p><b>Pharmacy delivery charges</b> – MR unable to locate copy of the letter he was handed; clarification should be sought from the pharmacist.</p> <p><b>Healthy Friendships</b> – JB asked for more details; advised that KRS had previously circulated these – JB to check.</p> <p><b>People2People Hub</b> – Madge Shingleton had advised that this was still going ahead in Cleobury but currently on hold due to staff shortages.</p>	<p><b>SDM</b></p> <p><b>MR</b></p> <p><b>JB</b></p>
<p><b>Other Agenda Items</b></p>	<p><b>Defibrillator (VETS)</b> – PF explained that power feeds would be available at Butler's and also at pillars across the road, fed from the Butler's location. Gwilym Butler had agreed in principle to a defibrillator cabinet being mounted on the wall of Butler's but the leasehold of same is in the process of sale and it isn't clear whether new owners will agree too. KB asked who paid for electricity used by the defibrillator/cabinet and PF confirmed this was Cleobury Parish Council. Funding/provision of the defibrillator/cabinet itself would come from the Village Emergency Telephone System (VETS) scheme run by the British Heart Foundation. MR asked about lead times; PF unable to confirm re power but said would chase at next council meeting; KB thought that defibrillator equipment currently available almost immediately (and has subsequently supplied contact details to MR/JF).</p> <p><b>Community Day 10<sup>th</sup> June</b> – MR summarised the day which included a wide range of activities and community groups. PF said all health-related groups would be based at the medical centre and concern was expressed as to remoteness from core events. PF said a treasure hunt was planned such that people would be brought near the medical centre. Volunteers would be needed for the event.</p> <p><b>NAPP</b> – MR briefly reported on further useful insights from the bulletin including issues encountered by older carers, key barriers to successful STP implementation, and challenges for health and wellbeing in rural areas.</p> <p><b>Clarion Update</b> – Farmers Support Network suggested as a suitable topic.</p>	<p><b>PF</b></p> <p><b>All</b></p> <p><b>MR</b></p>
<p><b>AOB</b></p>	<p><b>Posters</b> – KB has prepared posters on sepsis, heart attack and Farmers Support Network. AA had previously advised some changes and once revamped by KB it was suggested the posters should be laminated for the waiting room.</p> <p><b>Patient Comments</b> – none received.</p> <p>The meeting closed at 7:45 pm.</p> <p style="text-align: center;"><b>Next Meeting – Monday 15<sup>th</sup> May at 6.30 pm</b></p>	<p><b>KB</b></p>