

ROSMELLYN SURGERY
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**Minutes of the meeting of the Rosmellyn Patients' Panel
Held at Rosmellyn Surgery at 16:30 on 11th September 2018**

Present: Liz Berryman (LB - Chair) Patti Evans (PE -Secretary)
Barbara Whittaker (BW) Carol Scott (CS)
Peter Levin (PL) Di Hillage (DH)
Lorna Nicholas (LN – Practice Manager)

**ACTION
BY**

Apologies: Jan Shearn

Minutes of the last meeting:

The last meeting was held on site at St Clare to inspect progress of the building. As such there were no minutes taken.

Progress at St Clare.

LN told members present that the building is all now watertight and beginning to have rendering put on outside. The granite fascia has been started and the builders have begun the internal partitioning. The Practice is to move in during the last weekend in November and be open from Monday 3rd December. A firm of specialist companies will assist in the move. PPG will be invited to look around and volunteers may volunteer to help out front. There will be a private wing to include two big meeting rooms that will be available for hire. Office equipment from Rosmellyn will be sold off.

Patient Awareness of Online Services

LB said that some PPGs had helped make patients aware of the online services available and wondered if this group could do something similar. LN told the group that the website would be undergoing a complete overhaul, but at present the online services available are the ability to order prescriptions and make appointments. Online patient records will be available in the future. Some other practices are using Skype consultations to diagnose some conditions such as skin rashes. Rosmellyn currently uses text reminders the day before appointments if the patient has provided a mobile telephone number. It was suggested that after the move to St Clare the PPG could consider putting on an online services event to make patients more aware of what is on offer.

Flu Clinics

These are being held on 6th October for over 65s and 13th October for under 65s. This is because the over 65s will receive an Adjuvanted Vaccine which is more effective for this age group. If patients cannot attend on the dates offered they should ring up for an appointment on an alternative date. LB and (who?) volunteered to be at the clinics to talk to the patients.

**LB and
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Surgery's use of FaceBook.

LB thought there was little content and that the page could be better used. LN said that she and Dr Penfold were keen to develop the FB page and would be doing so after the move.

Prescriptions by post.

LB asked if this service cost the NHS money and LN said it did. Better to use the "Spine" as prescriptions could go direct to any chemist in the UK and be picked up

locally. Most pharmacies offer a delivery service too.

Information on the TV screen in the waiting area.

PE said she had been watching it and that some pages had a lot more text than others and could not be read fully in the time the slide was on screen. It was suggested that pages with more text could have a slower rotation time.

LN

Future of the PPG

It was felt that there would be a change and that the purpose of the group could be looked at more fully after the move to St Clare. LN thought the group might amalgamate with the PPGs from Alverton and Sunnyside Surgeries. LB said that there was no group at Sunnyside and that although Alverton have a group it meets very rarely. LB said she would attend Stennack and Praze an Beeble group meetings to gain an idea of what other groups do. It was agreed that a meeting would take place after the move where ideas could be thrown around. LB stressed the need for the group to feel valued.

AOB

Social Prescribing

Joining with other people for social activities. PL asked if it was used by the surgery. The walking group was used as an example and after the move it may be possible to set up other groups. Reception should use social awareness to signpost people to activities.

Triage process.

PE pointed out that the paragraph in the newsletter described this process well, but it would be better if it had pointed out that the calls were not answered and discussed by the Receptionist in the waiting area, but in a private area where details could not be overheard by the public.

Waiting Area

BW asked if there would be a common waiting area in the new premises where everyone from all three practices would wait as it raises the question of cross contamination of infectious diseases. LN assured everyone that there would be private consultation rooms where infectious patients would be put to wait to be seen.

Next Meeting; To be arranged after the Surgery moves to St Clare.