

## MINUTES OF AUCHTERARDER AND DISTRICT COMMUNITY HEALTH GROUP

11.09.2018

New members of the group introduced themselves and were welcomed to the group. Minutes of the meeting of the 24<sup>th</sup> of July were considered.

**Transforming Tayside meeting was discussed.** - It was noted by a member of the group that it would be better to go to somewhere where a surgeon is experienced and therefore people would be willing to travel. Others noted that if you have an appointment you are glad to get it therefore again you are happy to travel even if it is early in the morning. However, there was still some disquiet about the distances involved in travelling to Stracathro for early and morning appointments. The issue of operations at the Golden Jubilee Hospital in Clydebank were raised. Patients are operated on there as part of the Waiting Time Initiative where, if a health board breaches its waiting time limit, patients may be offered an operation at the Golden Jubilee. Unfortunately, NHS Tayside has missed some of its targets because of shortages of personnel and a lack of organisation (to quote a member of the group) and this has led to a number of patients being operated on there. Problems arise in terms of post operative care when patients are discharged. There are also issues about the cost and how this is paid for in terms of health board budgets. This led on to a wider discussion about waiting times for appointments. Dr McLeay explained that several out patient clinic appointment specialities now appear to be exceeding the previous 12 week waiting time. There are particular issues with Child and Adolescent Mental Health Services (CAMHS) referrals and it was noted that this has become a Scottish Government priority.

### St Margaret's Health Centre.

**Audiology department letter** – Dr McLeay circulated a letter received from the audiology department about hearing aid maintenance and supplies.

**Open access X-ray visits** – PRI. Dr McLeay explained the system as it stands at the moment. For straight forward x-rays e.g. a chest x-ray, once a patient has been seen by their GP, the GP requests the x-ray electronically. No request form is required by the patient. Their GP should give them an information sheet with the date of the request on it, explaining that the Open Access X-ray Request will be valid for a month, along with information on parking at PRI. Results from the x-ray are sent back to the practice and can take up to 10 days.

**Patient Participation Group Network** – there was some discussion around how we might learn from other groups. Dr McLeay said he would circulate the report by email.

**Flu vaccine update** - Dr McLeay circulated information on the current flu vaccination programme for 2018/19. It is more complicated this year than in previous years in that there are different vaccines for different age groups. Essentially, those who are at risk between the ages of 18 and 64 get one form of the vaccine, those aged 65 -74 get a different form and those aged 75 and over get yet another form. This is because it is known that older people have a poorer response to the vaccine and are therefore getting a form of the vaccine which has a “booster” in it.

**Terms of reference of the group** – these were circulated for information, highlighting to new members of the group that the Health Group is there to support and assist the development of health care and allied services for the local population and to develop lines of communication between the local population of Auchterarder and District and those parties concerned with the provision of health care.

**St Margaret's Community Hospital (SMCH)** – There was some discussion about the role of SMCH and Dr McLeay explained that there are three main categories of patient admitted to the hospital. GPs can admit patients from the community; patients are transferred out from other hospitals (usually referred to as 'step down care'); and palliative care patients. Dr McLeay noted that a number of the step-down patients come from outwith our practice area. This may be due to the fact that there is not a community hospital in that patient's area, or that their family live locally and will be able to offer support during the time of their rehabilitation. Dr McLeay also explained that there is a Medicine for the Elderly consultant who visits the hospital once per week to give advice and support to the GPs. He also explained the relationship with the care homes in that patients who are in St Margaret's and are due to be discharged to one of the care homes would have a visit and assessment by one of the senior care staff.

## **AOCB**

**Neurocentral** – one member of the group highlighted the work of Neurocentral which provides support for individuals with neurological conditions. This support group is based around Stirling and Auchterarder and offers a support group in Auchterarder on the 2<sup>nd</sup> Wednesday of the month. It offers support for all patients with neurological conditions and their supporters and carers.

It was noted that the new head teacher (David Lambert) at the Community School of Auchterarder is keen to improve links with the health centre. Dr McLeay will contact him about arranging a meeting. This led onto a discussion about the interaction we currently have with the school and the need to ensure that pupils at the school know that absolute confidentiality is maintained at the health centre and that doctors will assess the capability and capacity of children when they are seen at the health centre which means that they can be seen without a parent present, even if they are under the age of 16, in certain situations.

Feedback was given from a member of the group about patients who were grateful for the care they had received from the practice.

**DNA poster in the waiting room.** It was noted by a member of the group that it is perhaps not strictly true to say that the time of these DNA appointments has been wasted and that there is a measurable cost associated with them. Dr McLeay agreed that none of the doctors or nurses are looking for extra work when there is a DNA patient in that there is always something they have to catch up with, but it does mean that these appointments are not available for other patients who are looking for them.

Dates for the meetings for the remainder of the year.

Tuesday 13<sup>th</sup> November 2018

Tuesday 15<sup>th</sup> January 2019