

Minutes of Patient Participation Group on Wednesday 23rd October at 17:00

Apologies: KM

Present: Christine Sanderson (CS, Practice Managing Partner), Sharon Crouch (SC, Practice Manager), Mandy Lavin (Clinical Care Co-Ordinator), Michael Land (MJL, Administrator), CO'S, BO'S, CA, MF, MMF, WW, MW, JM, BJ, JS

Previous Minutes

Minutes recorded as correct.

Role Changes

CS explained there had been a recent change to Mandy's role from office manager to clinical care co-ordinator. Mandy had been providing some level of care co-ordination to some patients while the office manager; however the opportunity arose to take this on as a full time role to help deliver better patient care. The role involves helping patients to access services outside of General Practice, e.g. if they need social support, carer's support, mental health, housing, etc which is known as social prescribing. The role is new within the Practice and still being developed, therefore we can't provide a public contact for Mandy yet – however, she is helping patients referred by the GPs and other members of staff. If we're successful with Mandy's role, it may even be replicated across our Primary Care Network so patients across the Normanton, Castleford, Knottingley, and Methley will have a similar service.

Prescription Ordering

CS informed the group that the Partners had decided the Practice was going to be stopping the option for patients to order their prescriptions over the phone from January 1st 2020, due to safety concerns from the rising demand of prescription requests and complex medications and increasing pressure from the CCG, NHS England, and the legal indemnity providers such as the BMA and MPS. The Practice would be pushing online ordering, as well as repeat dispensing, the use of prescription counterfoils, or ordering through their pharmacist if they're unable to get to the surgery / use the online service. Mandy Lavin will also be able to help organise support for prescription ordering if needed.

JS responded that she'd written to the CCG for an explanation as to why the Practice was no longer providing the telephone service. The CCG responded politically stating that they couldn't force the Practice to end the telephone service and provided the options that patients can order their medication while omitting the telephone service from that list of options despite the Practice not yet having removed it at the

time. JS explained she then wrote to the Matt Hancock (MP for the Department of Health) who responded similarly to the CCG that they can't force Practices to end their telephone service and that it's ultimately up to the Practice. CS added that removing the telephone ordering option was a decision taken lightly.

Primary Care Network

CS explained the Network had finalised its governance requirements (how the network will be structured and operate) and was starting to identify and work with other providers to start providing services to the patients throughout the Network. One of the services being rolled-out is Social Prescribing provided by Live Well Wakefield and Spectrum People. Social Prescribing is an umbrella term which describes helping people to be healthier both physically and mentally by accessing community services and groups. E.g. helping with social isolation by supporting the patient access interest groups, which in turn helps their mental health, which improves their physical health, and hopefully they feel better. Social Prescribers are not clinicians, and will refer people who need medical help back to the Practice.

BJ had previously raised concerns over the pollution levels across the Normanton and Altofts area, and how it is increasing over time and what affect that is having on the local population. CS described a project that is going to be happening, thanks to the funding and resources that the Primary Care Network provides, to look at testing people for lung health problems, to get an early diagnosis and better treatment.

CS will be continuing the role of manager lead for the Primary Care Network when she retires from the Practice on December 31st and will attend future PPG meetings to provide updates.

Continuity of Care

MJL explained the Practice had been given new software which allows it to understand its workforce and appointment usage better. The software highlighted that a very significant number of patients were being seen multiple times by GPs throughout the year, with a small sample of patients averaging twice per month. This affects the capacity of the GPs for patients to be seen sooner (aside from the Sit and Wait clinic) and especially the continuity of care for patients who wish to be seen by their usual GP. The Practice will be looking at the data and working on a plan to improve both general access and continuity of care by reducing unnecessary appointment usage.

Document Process

JM asked what the process was for hospital letters due to a problem he'd experienced. CS explained the letters the Practice receives, which average 250-300 per day, are prioritised

to those which need prescriptions / actions, then scanned onto the relevant staff e.g. prescription changes to Haroon, referrals to typists, asthma exacerbations to the nursing team, etc. However, due to recent changes in the office and other staff taking on completing the letters (instead of the whole lot going to a GP), a backlog has developed and some letters may unfortunately be delayed from being dealt with.

Any Other Business

CS and SC noted they'd recently been at the Town Council again to discuss about the local changes to service provision and how the Practice is coping. Further, SC added that she'd recently been at a meeting regarding the housing developments across the Normanton and Altofts area and shared her concerns that no infrastructure had been planned by the council for the significant population increase.

The next meeting will be held on 29th January 2020 at 17:00.