

Dawley Medical PPG

Minutes of TEAMS PPG Meeting 24 June 2021

Present:

Denise Hallett - Practice Manager (PM)

Patrick Spreadbury – Chair (PS)

Barrie Allen (BA), Diana Clarke (DC), Neil Clarke(NC)

Apologies:

D.r D. Ebenezer, Dr.H. Bufton

1.Practice Update (DH)

Staff

The Practice has welcomed a number of new staff, some belonging to the Practice team and others shared within the Wrekin PCN.

Dr. Kathryn Lovett (Salaried) January 2021

Dr Oke Nwanneka (Salaried) May 2021 – will be working 6 sessions a week. This appointment will help reduce locum costs.

Sister Blodwen McKinnell replacing Sister Sandra Goulding who has left the Practice. Blodwen will be working the same days as Sandra used to

A new Health Care Assistant (HCA) Samantha Garbett will replace HCN Carol Sankey who retired, but still works 1-2 days assisting the nursing and Admin Team

The Practice will now be sharing the services of 2 physiotherapists, 3 pharmacists and 2 social prescribers with the other practices in the Wrekin PCN (Hollinswood Medical Practice and Wellington Medical Practice).This will mean that there will always be 2 pharmacists on duty which who will help relieve pressure off the GPs by doing routine medicine reviews, prescription queries , care home work and disease monitoring.

The Practice also now employs 2 receptionist apprentices and 1 admin apprentice

Some of the clinicians are undertaking a large amount of professional training and the Practice is taking full use of the opportunity to receive funding to backfill their hours with regular locums to ensure services are maintained.

Accommodation

The former Smileworks dental suite of rooms has now been re-commissioned and fitted out as consulting rooms. The larger ShropCom rooms on the first floor now belong to Dawley Medical.

The children's area in the main reception area will now be decorated and fitted out as a Health Hub to display healthy living materials

Appointments after 19 July 2021

The current system in operation for booking appointments will continue. All appointment requests will be telephone requests dealt with by trained reception staff, all of whom are bound by patient confidentiality regulations, and are then directed to the most relevant clinical professional for a follow-on triage telephone appointment. The clinician will book a face to face appointment with a nurse or clinician if appropriate. Temperature screening at the door will continue for the foreseeable. Dawley never closed its doors and has carried out over 8,000 face to face appointments during the pandemic so far which is approximately 32 patients seen per day. In addition to this the Practice staff have vaccinated over 4,000 patients to date and will continue to offer second doses. The vaccination programme has been managed and supported by WMP

BA asked if patients were now able to book appointments via the Patient Access/NHS apps. DH explained that there were limited number of GP appointments bookable online on a 'first come first served' basis. Patients could also now use the Online Consult option to contact a GP for assistance – urgent requests were answered within 24 hours and non-urgent 48hours. The link to the online consultations is on the Dawley Medical Practice website Home Page.

BA raised the sometimes lengthy wait times on the phone waiting to be connected to a member of staff. DC felt that the current wait times were greatly improved on what they were and wished to compliment the practice on this. PS reported social media reports/complaints about some of the much longer waiting times being experienced by patients at a small number of other practices in T&W. DH reported that the average wait time for Dawley patients was 10-15 minutes.

DH clarified that patients not able to use internet or have mobile/landline phones to make appointments or seek advice were still able to come to the Practice and book an appointment or request further signposting at the Practice but would be still required to complete covid screening at the door.

Other News

The Practice is continuing with its push towards achieving military veteran accreditation.

The Practice is signing up to contracts to support patients with long Covid, weight management, minor surgery, learning disabilities,

Work will continue with vulnerable patients, face to face learning disability reviews, continuity of care and end of life palliative care.

Dr Lovett has now completed her refresher training to undertake minor ops within the Practice.

Primary Care Network(s)

Dawley is now part of the Wrekin PCN together with Hollinswood and Wellington Medical Practices. The PCN has been carrying out an extensive Covid vaccination programme overseen by WMP.

The PCN partner practices are sharing their knowledge skills and will look at holding collaborative training days.

See above under Practice Update for information on shared clinical and admin staff

2. Integrated Care Records (DH/PS)

PS referred to recent media reports and patient confusion about government and NHSE plans for information sharing amongst medical professionals locally and third party research individuals/organisations nationally. This system is called One Health and Care.

The information that will be shared includes:

- Your name, date of birth, sex, address, telephone number, NHS number
- The name of your GP Practice and GP
- Medications, allergies, ongoing and historic conditions, immunisations and diagnoses
- Test results, hospital referrals, admissions, discharges and clinics attended
- Social and mental health information and care plans

DH explained that there will be 3 areas of patient data sharing once One Health and Care is introduced:

1. The local ICS constituent organisations – GP surgeries, SaTH, RJAH, Shropcom, Social Services
2. One Health and Care – shared over a larger footprint of Shropshire, Staffordshire, Stoke-on-Trent and Telford & Wrekin (see chart below)
3. Research and third party organisations. This shared information does not include patient identifiable information, but may contain age, postcode, the fact that your asthmatic for example.

It is proposed that all patients will agree to their records being shared by their Practice signing up to the above unless they inform their GP practice they wish to opt out. For systems 1 and 2 patients need to contact the Practice to opt out. For system 3, the patient will need to opt out online, or through a telephone service, which are separate to your GP Practice.



Integrated Care Record Staffordshire, Stoke-on-Trent, Shropshire, Telford and Wrekin

PHASE ONE LIVE	
DATA AVAILABLE AT GO LIVE: ACUTE DATA University Hospital North Midlands MENTAL HEALTH DATA Midlands Partnership NHS Foundation Trust and North Staffordshire Combined Healthcare NHS Trust	SOCIAL CARE ADULT ONLY Stoke-on-Trent City Council and Staffordshire County Council GP DATA EMIS Vision TPP
West Midlands Ambulance – View only	
FURTHER DATA COMING	
STAFFORDSHIRE AND STOKE-ON-TRENT ACUTE DATA University Hospitals Derby and Burton SOCIAL CARE – CHILDREN'S Stoke-on-Trent City Council and Staffordshire County Council COMMUNITY DATA Midlands Partnership NHS Foundation Trust OUT OF HOURS AND 111 SHROPSHIRE, TELFORD AND WREKIN ACUTE DATA Shrewsbury and Telford Hospital NHS Trust Robert Jones & Agnes Hunt Orthopaedic Hospital	SOCIAL CARE – ADULT ONLY Shropshire County Council Telford and Wrekin Council COMMUNITY DATA Shropshire Community Health NHS Trust MENTAL HEALTH DATA Midlands Partnership NHS Foundation Trust GP DATA EMIS Vision SOCIAL CARE – CHILDREN'S DATA Shropshire County Council Telford and Wrekin Council
FURTHER FEATURES	
Personal Health Record Business Intelligence Tools Care Planning	End of Life Realtime EMIS GP Data Multi-Agency Safeguarding Hub (MASH)

The roll out of the ICRs has been pushed back until September to allow more time for final decisions to be taken and for patients to be fully informed of their options.

The Practice will shortly be adding more detailed information and advice for patients to the Practice website.

BA questioned whether this would mean that the hospital would be able to access a patient's full medical record.

DH explained that this was not the case as secondary care (SaTH/RJAH) uses different software from primary care (general practice), although they can see a summary care record of medications, allergies, current problems.

BA suggested that the local MP, Ms Lucy Allen, should be lobbied to encourage the NHS to invest the necessary capital funds in new uniform software to make communication across NHS service providers easier.

Extended Access (PS)

Ps explained that the current contract for delivering Extended Access appointments in T&W comes to an end in March 2022. Once the NHS issues the new service specification for the new GMS contract for 2022 the delivery of Extended Access and Extended Hours will have to be negotiated. Going forward the agreed delivery

model for EA/EH will have to apply to both Shropshire and T&W. Currently the service in Shropshire is inferior to what is available for T&W patients (365 days a year). Any reduction in EA/EH provision for T&W resulting from joint local negotiations would be very unfortunate for T&W patients. PS informed the members that Telford Patients First group would be lobbying for the current system used in T&W to be applicable to the whole of the ICS.

BA wished it to be noted that he had found the service very useful and queried why it was that EA appointments were not always offered by reception staff if in-hours appointments were not available.

DH confirmed that Dawley reception staff have access to the available EA appointments on their appointment screens and have been instructed to book patients into any available EA appointments if they wish or to advise them of the EA booking line.

PS reported that it was a recurring complaint from patients across T&W that reception staff in a number of practices did not even mention EA appointments if there were no suitable in-hours appointments available.

Phlebotomy Services (PS)

PS reported that due to a rapid increase in demand for blood tests at the PRH Blood Testing suite sited in the Malling Health building, urgent talks have been ongoing to revise the current service where patients have to ring a central number to book their blood tests once their GP has either sent a request form directly to the phlebotomy dept or given the patient their blood request form.

It has been proposed that at some time in the coming weeks a new online booking system (Simply Book), already used in other NHS trusts, will be introduced at SaTH. This will reduce the pressure on the telephone call centre and will give patients the chance to book their blood tests 24/7 at a time to suit them. For patients with no access to the internet the telephone booking line will remain open. It is hoped that approx 75% of traffic can be covered by online bookings.

It had been hoped that this new service would be paper free but current NHS policy is that this will not be possible for the foreseeable until a paper free solution has been found. This means that patients will now have to present a blood test form when they arrive for their blood test. The new mantra will be: No form, no blood test!!! There will be a wide ranging publicity campaign across all media platforms prior to the system going live.

This change is intended an interim solution until the final report on the analysis of the Blood Test Patient Survey completed by approx 4,00 patients earlier this year (2021). The findings of the survey will determine if any other modifications need making to the service to provide a more permanent solution going forward.

Flu clinics 2021 DH

The Practice is signing up to the contract to deliver annual flu jabs to its eligible patients. Dates of clinics will be published later. Still to be decided by the government whether the flu jab will be combined with a covid booster or if a separate covid vaccination will have to be given to most vulnerable groups in spring 2022. Care homes will be prioritised.

Suggested that PPG members could help out at flu clinics in marshalling patients and/or organise a fund raising activity.

Musculoskeletal Service (MSK)-PS

PS reported that a complete revision of MSK pathways are being undertaken over the next 3 – 5 years. T&W patients have reported considerable problems with the Pain Management and Rheumatology services. New

working groups with patient representation are meeting regularly to look at the different pathways to be included in the MSK portfolio. It would be appreciated if any patients or their family or friends who have used the Pain Management or Rheumatology services could contact Telford Patients First on TPF@gmail.com with their name and e-mail address or contact phone number and the secretary will contact you/them.

Practice Fund Raising DH

DH -SNP Sally Gallimore is trying to raise extra funds for the Practice to buy a second ECG machine and also equipment to kit out the room for minor ops. It has been suggested that to boost the funds the PPG might be interested in assisting at a fund raising event in August/September possibly to be held on the Practice patient car park. Further details to come when date is finalised.

Patient Behaviour PS/DH

PS informed the group that the CCG had called a meeting of PPG chairs and Practice Managers from Shropshire and T&W. The meeting was held in early May to discuss increasing incidents in general practice of unacceptable threatening verbal and in some instances violent patient behaviour towards clinical and non clinical staff. The initial outcome of the meeting was the CCG press release which was an acknowledgement of the hard work of general practice staff during the pandemic and a plea to patients for 'a little bit of kindness' towards practice staff and a total rejection of any form of verbal or physical abuse towards practice staff. Patients felt that only one side of the problem had been addressed and that the causes of patient concern and frustration needed to be looked at too. A letter drafted by a group of patients from SW, T&W is to be included in the fortnightly Practice Bulletin and asks for recognition that there have also been challenges of the pandemic for patients trying to access primary care services. Very often this has been due to lack of clear communications and dialogue between practices and patients. The letter is urging all practices, especially those who still do not have an active PPG, to engage with their patients and set in motion the setting up of a PPG which is a contractual requirement. This is being backed by an initiative to be launched by the STP/CCG.

PPG Membership PS/DH

It was recognised by the members present that it has been difficult to hold face to face meetings during the pandemic but attempts have been made when necessary to keep members informed of important changes happening at the Practice. It was also recognised that there is a need to attract new blood into the current PPG to better reflect the demographic of the patient profile. The fund raising event mentioned earlier and the flu clinics were suggested as possible recruitment opportunities as well as some form of social media post. BA suggested that we contact the local secondary schools with sixth forms and the Telford university campus to recruit some younger members.

DH has agreed to promote the PPG in the Practice with posters and expressions of interest forms inviting patients to apply to join the PPG.

PPG Meetings DH/PS

DH asked if it might be possible to organise a lunchtime meeting which would make it easier for the clinicians to attend. PS suggested that the next PPG meeting could be arranged for a lunchtime 1.30 – 2.30pm. It is proposed to continue with online meetings via TEAMS until further notice.

