

Wellfield Health Centre

Patient Participation Group Meeting (PPG)

18.09.24

Present:	<p>Alison Flannery (Practice Manager) – AF Jennifer Collins (Assistant Practice Manager) – JC Irsa Zubair 5 x PPG Members</p> <p>BS CO LS BD CB</p> <p>Apologies from MP and FM</p>	
Agenda Item	Discussion	Action
Introductions	PPG member re-introduced themselves for any new members.	
Review and agree previous minutes and actions	<p>Continuity of care – Alison advises that there hasn't been much more communication regarding this.</p> <p>Abtrace – Alison fed back that she has sourced a piece of software that will hopefully automate recalls so patients are not called in again for a blood test that they have already attended for.</p> <p>Rejected medication requests – Jenny explained that it seems communication has improved now that patients are ordering their medication more often.</p>	
Practice Pharmacist Role – Irsa Zubair	<p>Irsa explained her role within the practice and how she assesses patients with their medications. Irsa discussed her collaborative work with the PCN Pharmacists and how their reviews are different. Irsa explained that her role is much around medicine safety and developing policies for this, and assisting staff when escalation in medication regimes are needed. Irsa also supports the GP's with the process of certain blood results. Irsa also clarifies any medication queries with other stakeholders.</p> <p>BS queries if patients can book in with Irsa. Patients can do this in the normal way.</p>	

BD asks if Irsa review blood results following their annual reviews. Irsa does review these results and is able to follow up on certain conditions e.g blood pressure, cholesterol but anything that needs a diagnosis will go to the GP's. Alison clarifies that the GP's still review several blood results as there is just so many.

CB questions if our prescribing costs have reduced. Alison confirms that our cost has reduced due to our Patient Led Ordering of prescriptions implemented in April 2024. Irsa explains the workstreams that are ongoing for us to switch out for more cost-effective medications. CB says there's a particular problem with nutritional drinks due to not reviewing what they still have left before ordering the full amount every month. Irsa explained that we have undertaken some work where Interface came in and reviewed all our patients on this type of item to check they were still appropriate. CB has particular concern regarding care homes.

BD queries if certain medications can be added to variable repeats as some items don't need to be prescribed every month. Alison explains the importance of the GP's having to review patients taking any medications as this will always have to be the priority despite it sometimes being irritable when the items expire on the medical record. Irsa also explains that certain items available over the counter are designed that way so that if for a short-term issue, we are advised not to prescribe.

BS raises the point that sometimes a more expensive form of a medication is actually better for the patient. Irsa confirms that we always need to put the patient first over cost if this is what works best for them.

Alison raises that the practice is currently working on reducing our antibiotic prescribing and increasing our patient education to work against antibiotic education. CO asks why we think its so high. Alison responds that we feel its due to old habits and

Alison will escalate this with the Medicines Optimisation team.

	<p>patient expectations when they believe antibiotics have helped during previous illnesses. The GP's are undertaking some training and implementing techniques to try assist during their consultations as its not unknown for patients to become aggressive with the GP or even reception.</p> <p>Alison advises we have also recruited a Pharmacy Technician Sally in July to work alongside Irsa for further support and resources.</p> <p>Sally and Irsa also support reception also work collaboratively when it comes to shortages.</p>	
Feedback from PPG regarding telephone upgrade	<p>Upgrade to telephony system – call back feature is up and running. Jenny shows figures since June 5th and states that the practice has answered over 20,000 calls in this timeframe.</p>	<p>Alison asks the PPG members to be conscious when using the phone system, the next time as we are happy to hear some feedback.</p>
2024 National Patient Survey	<p>Alison – 528 patients invited to feedback and 126 surveys were returned.</p> <p>LS ask if we work collaboratively with other local practices. Alison details the practices in our PCN and share ideas and processes, though sometimes the smaller practices may need to use a different approach to a bigger one but we still bounce off each other.</p>	<p>Alison is hoping to get a similar survey together to do our own now that we have made improvements.</p>
Flu, Covid and RSV Clinics	<p>Alison presents eligibility for all 3 vaccines. The practice will be giving RSV on its own as its believed to work best like this. Then the practice will administer Flu and Covid together with a two-week interval. If patients don't want them together then they can still book separate appointments. There will be Saturday clinics throughout October with some throughout the weekdays.</p>	
AOB	<p>BS queries our partnership set up. Alison confirms we have 6 GP Partners and 2 salaried GP's. The Partners are paid after all bills and salaries are paid. BS asks if we are paid per patient that we have. Alison</p>	

	<p>explains that we are to a point but as the numbers of patients increase, we must then expand our clinical team to ensure we can provide appointments for them.</p> <p>CB informs us that her husband loves using Patches. Jenny explains that its useful on the practice side and its much easier to communicate with the patients this way. Our usage of Patches is increasing each month.</p> <p>BS raises the benefit of continuity when seeing the same doctors. Alison advises if both patient and practice align then the receptionist will always try to arrange this. BS asked how far ahead appointments are booked. Jenny advises that we try to keep routine appointments within a two-week timeframe.</p> <p>Alison – would like to be able to recruit more PPG members. BS suggests putting a notice on the TV and Alison suggests a noticeboard. CB suggests limiting the number of PPG member we will accept to avoid an unrealistic number of people joining. CB wonders if language barriers are standing in the way. Jenny advises that the website comes in handy because the language can be changed on here so we have been using it to communicate. BS asks if it's a cost to the practice and Alison confirms the ICB funds this.</p>	
Ideas for next meeting:	A day in the life of each role within the practice.	
Next Meeting	Next meeting 22 nd January 2025 / 5.30pm start.	