

	<p>PATIENT PARTICIPATION GROUP MEETING Held on Tuesday 6th June 2023</p>
	<p><u>MEETING 6th June 2023</u></p> <p><u>NOTES</u></p>
<p>1</p>	<p>Apologies and Acceptance of Minutes</p> <p>The Minutes of the last meeting (8th March 2023) were accepted.</p>
<p>2</p>	<p>Matters Arising</p> <p>2.1 Changes in Services Letter</p> <p>The latter detailing the changes to services at Whiteladies Medical Group (WMG) has been updated and will be available to patients before our next meeting in September</p> <p>2.2 Prescription Presentation</p> <p>A presentation on the prescription process and the prescription hub has been arranged for today's meeting. Many thanks to the Prescription Hub Manager and the Pharmacist for the time today.</p> <p>2.3 The "Named" Doctor</p> <p>Each doctor is allocated a certain number of patients, however patients are not restricted to accessing their care only via their named doctor and may see any doctor. Remaining with the original diagnosing doctor during any extended episode of treatment may prove beneficial in sustaining Continuity of Care and better outcomes.</p> <p>Consultants' letters and enquiries will always be directed to the doctor who was responsible for the original referral. Where doctors are away or on holiday, letters will be processed by other doctors so that there is no delay in attending to them.</p> <p>2.4 "HealthClick" Project</p> <p>It is felt beneficial were more patients to use the technology available to access health care services. The PPG has been in contact with Family Practice (FP) and Pembroke Road (PR) to establish whether the three PPGs might coordinate efforts to proceed with the Healthclick initiative in training patients in the use of the online system and the NHS App. The long-term objective would be to run courses for patients on setting up the NHS App on their phones and utilising the online "Patient Access" system.</p>

	<p>2.5 How can Patients be educated on how to access Practice services?</p> <p>The Whiteladies Medical Group (WMG) website was not as user friendly as it could have been. One of the benefits of being part of the Primary Care Network (PCN) is that the WMG website has been able to amalgamate with our neighbouring practices (FP and PR) so that changes made to the websites are made across the whole system benefiting all in sharing the latest information.</p> <p>2.6 Pembroke Road's piloting of a computerised navigation system</p> <p>A specific software package has started to be rolled out across Bristol as there are significant benefits in its deployment. The system, designed by doctors follows a format similar to a 999 call in the way that it leads the patient navigator (receptionist) towards deciding what type of response is called for in the particular situation. e.g. face-to-face, telephone or pharmacy appointment.</p> <p>There is a significant cost however although bulk buying across the Bristol area may mitigate this. A decision to utilise this as WMG is yet to be made but a visit to PR to assess the system's potential has been arranged. FP are at a similar stage. Adoption of the system may offer savings in training time. The practice is currently spending considerable time training Patient Navigators (Receptionists) in how to handle telephone enquiries.</p> <p>2.7 Test Results</p> <p>Where WMG have a patient's mobile contact number, a text is sent to inform the patient of the result. Patients may also see their results via the NHS App and the online Patient Access system.</p>
--	---

<p>3</p>	<p>Prescription Hub</p> <p>Patients have experienced some difficulties with their prescriptions.</p> <p>The following are some of the problems encountered.</p> <ol style="list-style-type: none"> 1. Patients have difficulties with the dispensing of their prescriptions 2. The prescription is wrong 3. There is a shortage of drugs (NHS responsibility) 4. Problems with dosage size availability. 5. Pharmacies have their own processes in handling prescriptions 6. Lack of any communication between pharmacy and practices. <p>The patient is sometimes caught in the middle and the Prescription Hub often receive complaints for a wider system failure.</p>
-----------------	--

The prescription process was described by the lead pharmacist as follows:

1. It is usually sent electronically direct to the pharmacy
2. It may be handed to the patient. Some patients prefer this and sometimes this is necessary.
3. The Pharmacy regularly clicks on “updates” and downloads all prescriptions from multiple surgeries in the order in which they have been sent
4. Pharmacies do not know of any priority prescriptions and will deal with the prescriptions in the order in which they have been received
5. A copy of the prescription will be handed out to the patients along with the medications
6. Alternatively, the patient will present a printed prescription and be provided with medications

Queries relating to the prescription process were as follows:

- Q. Is there any way a pharmacist could distinguish between a routine and a priority prescription?
- A. The pharmacist has an “urgent” button to contact the practice, in addition the GP has the option to write a “pharmacy note” on a prescription and is visible when the pharmacist starts processing the prescription.
- Q. Do prescriptions go immediately to the pharmacy or is there a “batching up” process?
- A. Prescriptions go straight from the prescriber to the NHS spine. They then go to the nominated pharmacy. Delays may occur during peak periods. However if given the relevant NHS number, a particular prescription can be accessed immediately.

In general pharmacies operate their own systems.

In the out-of-hours service, WMG have a policy that with any urgent prescription it automatically sends a code with NHS number to the patient. The patient can take this to any pharmacy. Consideration is being given to whether an urgent prescription might follow a similar practice. For example a course of anti-biotics that needs to be commenced immediately

The Prescription Hub (HUB)

A large part of the work is in processing repeat prescriptions, monitoring and completing tasks assigned by the GPs, for example arranging blood test for patients on certain medications. The HUB handles changes of dose and problems with the synchronisation of medications. It deals with practice-based matters such as claiming on vaccinations.

The HUB has one student technicians going through training in primary care such training is essential as one of the main problems faced by pharmacies at present is the lack of such trained technicians.

	<p>The HUB follows up hospital letters and deals with queries from patients and from pharmacies. The patient would have dealt with this themselves prior to the introduction of the HUB.</p> <p>The main enquiry from patients is, “Where is my prescription?”. A simple enough question, but there could be as many reasons for its not being immediately to hand. Repeat prescriptions present particular problems. Early ordering or overlapping of prescriptions can be problematical and delays in the system are not uncommon. We generally allow seven days for the processing of a prescription and try to get this message across to patients, but patients may feel that they want the prescription more urgently.</p> <p>The HUB has regular meetings with the pharmacies, and these are some of the issues that can discuss with them.</p> <p>Should a patient have a special reason to have a prescription issued early a note can be added to the prescription request. For example going on holiday during which time the medication might run out.</p> <p>Although a 7-day turn around of prescriptions might be considered long and cause some patient concerns, it is rare that a prescription request is rejected for being early. Rejection is only done where drugs are abusable or where there are particularly strong monitoring requirements calling for a shorter interval between issue of medications.</p> <p>During Covid WMG adopted the practice of signing repeat prescriptions for a whole year so that they could be collected every three months. This is usual with many patients who simply go to the pharmacist to order their repeat prescription and do not involve the prescribers’ participation.</p> <p>Prescriptions are ordered electronically but the patient may be presented with the vagaries of the pharmacy’s methods. The Hub then has to deal with the difficulties that arise, this is an issue across the NHS and not just at WMG.</p> <p>Some information is available on the website, but it is clear from this discussion that WMG need to consider whether revision and expansion of information is needed for greater clarity.</p>
<p>4</p>	<p>Practice Report – presentation by Nigel Cutland</p> <p>4.1 Staffing</p> <p>WMG is now fully staffed, notably on the clinical side. 2 new doctors have recently started obviating the needs for locums and reduction in administrative workload for other doctors. The benefits are in greater opportunity for continuity of care, resource planning and sustainability within the practice.</p>

	<p>Training for staff to become Nurse Associates is in progress and includes a two week placement every couple of months reducing the overall workforce in the treatment room, this has had an impact on our blood lists. The practice is mindful of the problems caused by short staffing and aim to recruit to address this situation.</p> <p>The practice benefits from the services of trainee doctors in the treatment room. When these return to university in the autumn the practice we will need to employ a phlebotomist to fill the gap.</p> <p>Replacement staff have been recruited within Reception.</p> <p>In general the staffing situation is good within the practice.</p> <p>4.2 Premises</p> <p>Hot desks are being created in the conference room releasing space for clinical staff, the desks are primarily for PCN staff. The practice has requested more student teaching based at WMG working with Bristol University students in Years 1,2,3,4 and 5. The Conference Room refurbishment will make this possible.</p> <p>4.3 New Telephone system</p> <p>In conjunction with the PCN the practice is looking at an alternatives telephone system, the system has superior functionality, for example, patients will be given the opportunity to be called back rather than holding on, is linked to the computer system with the patient telephone number recognised, displaying the patient records immediately obviating the need for many routine questioning. GPs can access the system from home, call recording is available which will benefit both patients and the practice.</p> <p>Installation is targeted for 1st January 2024 for at all three Practices simultaneously. It will be significant development for patients and Practices.</p>
<p>5</p>	<p>Any Other Business</p> <p>5.1 New PPG Board</p> <p>This is now in place, many thanks to the practice for arranging for this. We now need to think about what we are going to put on it. The existing boards are have professional presentation and we would want to work with the person responsible for their creation. Following our recent discussion about prescriptions and test results, the first thing we should focus on is information about the NHS App.</p> <p>The PPG will be using the board as an educational tool,</p>

	<p>5.2 “HealthClick”</p> <p>Online Patient Access and the NHS App is transformative in the way patients can management their health services including , test results, repeat prescriptions, appointments, Covid vaccinations, and health care information. The patient now has a complete history of their health care.</p> <p>5.3 Heathwatch</p> <p>Healthwatch are collecting information concerning changes to the health services following the pandemic. At WMG there was a great deal of concern over the loss of Open Access, but the services we now have access to far exceed what we have lost. We are no longer hearing complaints about the loss of Open Access.</p> <p>5.4 Annual PPG Elections</p> <p>Elections for the role of chair and secretary will be held at the next meeting. Please send names of candidates to the Secretary prior to the next meeting.</p> <p>5.5 Future meetings</p> <p>Should future meetings return to face-to-face or remain on Zoom? The majority of the PPG membership prefer Zoom. Advantages of Zoom are convenience for all especially guest-speakers who would no long need to travel.</p> <p>5.6 Membership</p> <p>Membership numbers were once healthy but are now dwindling. It is critical that the PPG stay representative of the wider patient community. Please do all you can to encourage new members to join our PPG</p> <p>5.7 What’s App group</p> <p>Please contact me if you want to be a member of this group.</p>
<p>7</p>	<p>Next Meeting</p> <p>The date for the next meeting is 12th September 2023.</p>