

Leek & Biddulph Patient Locality Group
Notes of Meeting held on Tuesday 21st May 2024
Via Microsoft Teams

Presnt: L Roberts (LR) Chair, I Robbins (IR), P Price (PP), B Pickering (BP),
L Savage (LS)> S Tatton (ST), I Jones(IJ), T Parker(TP)(P/T), R Hurst(RH) L Dulson
(LD) H Potts(HP), D Cunningham (DC), A Radcliffe (AR),M Berry(MB), E
Shenton(ES),E Thomas(ET) S Brown(SB)

Apologies: M Cozens, J Samuels

BP reported that J Samuels was unlikely to join the next meeting as she was moving to live near her family in Sheffield. IR emphasised her long and loyal service for patients at PPG, PLG, CCG Patient Congress and as a lay Governor for the Midland Faculty of the Royal College of GP's was greatly appreciated in Leek and Moorlands.

1. Minutes of meeting held on 19th March 2024

These were taken as circulated.

2. Matters Arising

There were no matters that were not covered by Agenda items.

3. Proposed PPG Forum ICB & SMDC Health and Wellbeing Committee

IR reported that he had nothing further to add re SMDC Health & Wellbeing Committee but it remains to be seen what their involvement will be as Placed Based Partners for ICB/ICS.

BP reported that since the last meeting he had made contact with Werrington PPG, North Newcastle Locality Group, Alton & Tean PPG, and Cheadle Target PPG to encourage them to get involved with ICB PPG Forum and this seems to have had an effect. He read out the notes prepared by David Jones Moorland PPG representative at the Forum which are:-

PPG's should cluster on the lines of locality but extend across the county to embrace areas of concern e.g. develop a PPG cluster for the Moorlands if this becomes the place based Partnership area.

There has to be a mechanism for PPG's to link with ICB not through the Patient and Community Assembly,

The next meeting in September will need a senior member of the ICB to give the latest information on Placed Based partnership development.

There were 27 attendees although 38 requested the link out of a potential of 144 GP Practices.

LR attended the Forum and concurred with David Jones summary and commented that the PPG's in the South East of the county had pressured for the forum.

4. Update form Emma Ford, Healthwatch.

Emma failed to join the meeting despite have been sent an invitation.

5. Update on PCN developments

Recruitment –LD reported that the Board wished to recruit a full time Grade 7 Nurse to the PCN team and the Person Specification and Role Description had been compiled and approval for the role was awaited from the ICB.

Review of PCN performance in 2023/24

AR presented a series of slides showing the overall performance of the PCN and the contribution of each practice for the 5 Impact and Investment Fund (IIF) indicators. Copies will accompany Notes of meeting. The PCN met 4 categories and achieved 100% of the funding. In one category it looks like they will not achieve 100% but this cannot be finalised until all Laboratory results are collated. The shortfall based on current data across the PCN is £678 (2%) out of an overall total possible achievement of £52,739.44.

New contract for 2024/5

LD stated that this only arrived on 28th March for implementation on 1st April and was only for one year with no indication of continuity beyond March 2025. However, it did permit the recruitment of one full time PCN member and the Board had subsequently agreed to recruit a Grade 7 Nurse as stated above. The new Contract only had two IIF Category and Practices were already working to achieve the necessary standards. The main workload in the contract was the Capacity and Demand work and the PCN was currently working with Practices to identify the work required.

Pharmacists & Physiotherapists

BP stated that some patients found it difficult to understand the roles of theses specialists.

AR state that the Pharmacists carry out medicine review role for patients previously carried out by the GP and can where appropriate change medication doses or brand to suit individual without referral to the GP, they carry out cost saving exercises, reducing carbon effect of inhalers and supporting the Practices with their Medicines management.

Physiotherapists- these see patients with muscular skeleton problems such as back ache, torn ligaments arthritic knees etc. and can diagnose the problem and refer the patient for a course physiotherapy by MPFT. This saves the GP dealing with patients with these conditions.

LD noted that she would bring a review of all the roles to a future meeting.

6. PCN Based Patient Survey

All practices agreed that they would be happy for the PCN to devise a Patient Survey and LD stated that this was now in draft form and would forward to BP after the meeting for circulation and comment.

7. Report on latest Board meeting

LR reported that AR had brought the group up to date with the 2023/4 PCN performance earlier in the meeting and this had been one of the main items at the Board meeting along with a detailed discussion on the recruitment of a full time member of staff, the outcome reported by LD above.

8. Communication Group

BP thanked DC for the latest newsletter which was very informative. LR asked him to remember in future to remember that many of the readers were not NHS personnel so to try and avoid NHS terms and abbreviations.

HP reported that the group met on 4th April and discussed at length the need to ensure that the Patient Survey questions were readily understood by patients and that the survey was not too long. DC to attend the next meeting. BP stated that he now had regular monthly slots on Churnet Valley Radio and Leek Radio using them to update public what the PLG and PPG 's are currently involved in.

NHS Digital Support – PP reported that they had notified many patients via Text message of a support session and had 8 people book appointments but unfortunately he was unable to attend as a volunteer and hence could not report on the outcome for patients.

ST reported that Moorland were keen to engage Digital Angels (MPFT IT specialists) to offer support to encourage more patients to use NHS app. He stated that D. Jones has organised for Digital Angels to run a session at Portland Grange on 6th June and they would then assess how Digital Angels could be used in Moorland Practice.

9. Potential Speakers Future meetings

BP reported that for the July meeting we had two groups of speaker. National Institute for Health Research – outlining their activities in Primary care and MPFT – to update the group on the development of Leek Hospital as Care Hub.

10. Update from PPG's

Biddulph Doctors – PP reported that the Spring Covid booster had been carried out using normal appointments, He stated that the Practice had joined the Modern General Practice Scheme to try and develop ways round the 8am rush. DNA's dropped last month and the new phone system with Cancellation facility is now operational. Practice become Dementia friendly and all staff undergoing training.

Biddulph Valley- Unfortunately TP had to leave meeting due to technical problems.

Park Medical – IJ reported that as a result of their recruitment campaign they had a good cross section of patients with a wide range of useful skills. DNA policy has cut down DNA's and work has been undertaken to improve communication/education with Patients regarding the on line triage requirement to get appointments.

Leek Health Centre –IR reported that sadly their Secretary had died suddenly and also Judy Samuels was leaving the area so they were losing two stalwart members. They have installed the new phone system, LR commented that the call back system was great to prevent hanging on for ages. Practice carried out the Covid jabs for the whole Leek. And PPG members volunteered to help. .

Moorland Medical – ST stated that the new phone system had two good features ring back facility and option to press 2 to cancel an appointment. DNA 2.4% and hoped to reduce by making patients aware of phone cancellation option.

Discussed car in Community and difficulties of service being effective in rural area as identified by Werrington PPG.

11. Any other Business

BP reported his efforts to try and help an elderly lady who was sent to Royal; Stoke for Heart Consultation only to be asked to use a heart monitor for 24hours and then return it the next day. She had got to hospital by community transport hence costing her around £25 and then it would cost same again next day. PALs actioned and I have been in touch with department but although Leek Heart cases referred by GP are usually dealt with at Weekly Clinic at Park Medical other depts. At Royal Stoke will just refer patients to department wherever they live.

BP reported that he was still trying to get hold of the lady who was the subject of this situation but had no luck and hence cannot pursue the case.

12. Date and Time of Next meeting

13/00 to 15.00 Tuesday 16th July 2024 via Microsoft teams.