

## Minutes from Walkden and Little Hulton Primary Care Network Patient Participation Group meeting.

Date of meeting	Wednesday 05 October
Time	18:30 – 19:30
Venue	Walkden church
Chair	Debbie Johnson – The Gill Medical Practice
In attendance	<a href="mailto:steeton1@aol.com">steeton1@aol.com</a> Derek Cummins Aled Owen – Walkden Medical Centre Ed Nuttall Sharon Horan – Cleggs Lane Medical Practice Debbie Johnson – Practice Manager Sharon McCallan – Practice Manager Zain Harper – Chief Operating Officer
Apologies	Marlene Evans Eric Gater

### 1. Welcome and introductions

DJ welcomed everyone to the meeting, and all attended introduced themselves. DJ explained the purpose of the meeting was to seek input and engage with patients about services and care the practices and the PCN are providing.

DJ asked about setting the meeting frequency and how long the meetings should be for. The group agreed these should be held every 2 months and last no longer than 1.5 hours.

There then followed a discussion about how these meetings should be accessed to ensure all age groups are able to attend or input. It was agreed to look at this in future, but the group recognised further work needs to be done to publicise these meetings and consider virtual online meetings as well.

The group feedback that awareness of the meeting was low and suggested posters in libraries and other ways to promote the group.

**ACTION:** PCN to look at posters and other ways to promote the group.

## **2. PCN and Enhanced Access**

DJ asked ZH to explain about the primary care network (PCN)

ZH gave a brief overview of the purpose of the primary care network and how it is connected to the practices and the work that has been going on over the last 2 years.

This included delivery of the COVID vaccination programme, recruitment of the additional roles (pharmacists, physiotherapists, social prescribers, and mental health practitioners) into practices and the new enhanced access service.

ZH talked about the new living well mental health service which will see a team of 10 mental health staff based in Walkden and Little Hulton for patients with low level mental health issues to be referred to and seen quicker. The group welcomed this.

ZH talked through the commissioning arrangements for the new enhanced access service which operates every weekday between 18:30 – 20:00 and on Saturdays 09:00 – 17:00. The group feedback that they were not aware of this service and asked if this was the same as the GP out of hours service.

ZH explained the out of hours service is for urgent care which cannot wait until their GP practice opens. The enhanced access is for routine care, like what patients would expect from their GP. This includes referrals, tests, and investigations.

## **3. General opinion of primary care**

DJ explained the current opinion of general practice, referencing some of the political and media messaging. ZH explained practices are delivering more appointments than ever before, including above pre-pandemic levels. Most appointments are face to face.

ZH explained practices had invested significant amounts of additional funding into more appointments, however the real issue was finding the staff.

Patient informed the group that they have heard this before and that he was not happy with this explanation. Figures can be skewed and asked for the evidence. ZH agreed to bring appointment data to next meeting.

There was also a discussion about utilisation of the MyGP app and how this could be improved. Agreed to see if we can get data and bring to the next meeting.

ZH explained the new additional roles and now the new enhanced access service is real evidence of additional appointments. ZH explained that due to the pandemic practices had been unable to engage with and seek patient's views which was unfortunate, but that this group is to ensure we seek patients views and input into the delivery of healthcare services.

**ACTION:** PCN to bring appointment data to next meeting and to look at MyGP app data.

#### 4. Patient expectations

DJ explained the current model practices are working to in relation to telephone triage and face to face appointments. Patients' expectations where very high and there has been a significant shift in little self-care by the younger population as well as an ageing population, the pandemic, and backlogs at the hospital.

All these things have had an impact on practices who are often the first port of call. Practices have struggled with staffing due to COVID related absences and it has been a tough time.

Patient enquired about reordering prescriptions and this being 4 week short and the due date being misleading. Agreed we would take this away and investigate this.

**ACTION:** To investigate reordering prescriptions every 4 weeks and due date process.

#### 5. Any other business

One of the members explained they were hard of hearing. It was agreed to change the shape of the table to give more compact sound and see if this helped.

Agreed to send minutes by email and to also put on the PCN website.