

Neighbourhood

DF had previously advised patients that there was to be an increased focus on neighbourhood working which was no surprise as this has been the plan in Salford for some time, but the idea had been reinforced in the government's "10-year plan" for the NHS

This will include practices working together to develop more efficient ways of working and ultimately better outcomes for patients across the whole range of clinical conditions and has already been discussed at some length within the CCG and will continue to be on the agenda at various neighbourhood meetings

Further developments now include the requirement for practices to form local Primary Care Networks (PCNs) and these bodies will ultimately be responsible for the commissioning and provision of a range of services suitable for a local population. This requirement has resulted in a significant amount of work for practices in the last few weeks as there is a very tight timescale to organise the network creation, appoint a Clinical Director to lead it, construct a draft Terms of Reference and submit the initial paperwork for ratification from the Salford Clinical Commissioning Group (SCCG). The network has been set up under the name of "Broughton Health Alliance" and will evolve over the next few years so further details will be provided once known.

ND enquired about funding for this network and the group was informed that, at the moment, it is understood that the network will indeed be given funding to commission services although we are on a very steep learning curve and need to further establish how this process will work and be governed.

It was also mentioned about the possibility of having a neighbourhood Patient Group or at least, involving patients in some form of consultative way about provision of future services. This was going to be a proposal made by DF to colleagues in other practices and as yet has not been discussed at the network level, but may be an option for the future.

Salford

DF felt it may be informative to the group to give a quick update on some of the work that is going on across the city as whole. This included:

- A review of which over the counter items that may not be routinely prescribed by Primary Care
- Analysis of the Salford Wide Extended Access Project (SWEAP) to determine any issue and if/how the system can be improved
- Closer working relationships between SCCG and Salford City Council who are now working on joint commissioning decisions across several areas

	<ul style="list-style-type: none"> • The quality of care provided by Care Homes across the city is showing a steady improvement • Mental Health is seeing a continued increased focus 	
<p>6. Staff</p>	<p>DF gave the group an update on the situation regarding recruitment of practice staff:</p> <ul style="list-style-type: none"> • A new Healthcare Assistant started at the practice in February to support the clinical team • Interviews for new GPs are taking place at the current time and we are hoping to make one or more appointments to the position in the near future • Interviews have recently been held to recruit a Pharmacy Technician and again, we have shortlisted some candidates with a view to having someone in post by July 2019 <p>The practice continues to look to recruit staff that will assist to improve access for patients. This does mean that some patients can be seen by appropriately qualified clinicians who may not necessarily be traditional GPs as there is a well-publicised shortage of doctors nationally.</p> <p>Members were also advised of internal changes as our Assistant Practice Manager (APM), Sarah Smith is changing her working arrangements and role within the practice and as a result we have appointed Jennifer Collins to the position of APM, a role in which she has ably deputised for over the last few months.</p> <p>DF was also pleased to report that both members of our team who are currently away on Maternity leave have now given birth to healthy babies (one girl and one boy) and that mums and children are all doing well. NB asked that congratulations from the group be noted and passed on.</p>	
<p>7. Patient Experience</p>	<p>DF acknowledged to the group that the practice website update had not gone as well or as quickly as had been hoped and there have been a number of challenges in getting the site reviewed and changed. It is anticipated that this will be addressed in the near future. NB kindly offered to advise on this issue if the practice required some assistance in the creation of the new site.</p> <p>ND commented that the practice had not issued any messages through the Twitter application lately and DF has agreed to look into this to determine if and how more key messages can be sent out through this medium.</p>	<p>DF to review usage of Twitter</p>

	<p>The group were informed that the practice is currently looking into procuring a new telephone system as the existing one is nearing the end of its useful life and there are better options that give improved service to patients and better possibilities for call handling, educational messages etc. As part of the project, it is possible that the telephone number for the practice will change, but of course appropriate communications and diversion options will be employed as and when that happens. DF did also advise that from March 2020, practices are no longer allowed to use fax communications and so a decision has been made in the practice that we will be ceasing all fax usage after November 2019. The few patients who use this method of communication will be able to sign up to use online services and any secondary care providers who send information in this way will also be having to review their processes to ensure a seamless flow of data.</p>	
<p>8. A.O.B.</p>	<p>RB asked about the situation regarding the merger with other practices in the building and DF confirmed that the decision had been made that nothing would be going ahead at this time.</p> <p>DR asked about the provision of minor surgery in the practice (one of the GPs used to carry out minor cryosurgical procedures e.g. wart removal) and was advised that this is unfortunately a procedure that is suspended at the moment.</p> <p>AK & GK presented a prepared document about problems experienced with parking at the health centre and the company that manages the parking system. DF stated that the practice understands the frustration experienced by some patients over this matter but reiterated that the practice does not control the system or has anything to do with the issue of parking notices and that any appeal can be made to the controlling organisation. It was also made clear that patients are not charged for parking at the centre and there is more than adequate signage to advise any visitors about the parking system.</p> <p>ND commented on the 10-minute “grace” period in which legitimate visitors need to input their vehicle registration numbers in order to allow the free parking and asked why this could not be done at any point in the two hours as there may be occasions when, by the time a visitor has entered, found a space, parked and made their way into the building, that 10 minutes could have elapsed with the then potential for a parking notice to be issued. DF agreed to contact the parking company to clarify the situation and see what can be reviewed if necessary.</p> <p>Members asked about the possibilities of getting a councillor to attend the meeting? DF felt this may be unlikely at the moment although it could be explored, particularly in view of the closer relationships between healthcare systems and the City Council.</p>	<p>DF to contact the parking control company to review and confirm the timescales around entering vehicle registration details</p>

DF advised the group that one option available to them would be to attend the East Salford Community Committee (ESCC) meeting which occurs once every two months either at the Broughton Hub or the Beacon Centre where a number of organisations (e.g. Council, Police, Community Groups, Healthcare etc.) come together along with the general public to discuss a range of issues.

DF also suggested that the general public are also allowed to attend part of the SCCG's Governing Body Meeting, again held every two months and usually at St James House (near Salford precinct) or the Civic Centre in Swinton.

JC asked about the patient self-check-in screens in the waiting areas and if they could or should be shrouded in some way to prevent personal data such as date of birth being seen by others. It had not been thought of before now to be an issue as the screens have been installed in many practices but DF can look into the matter to see if any alterations are required

Meeting adjourned at 8:15pm

Date and Time of next meetings (provisional):

Thursday 26th September 2019 @ 6:30pm

Thursday 16th January 2020 @ 6:30

DF to confirm date of next ESCC meeting

DF to speak to CCG I.T. Dept. to determine if and what alterations can be made