

Sunderland Clinical Commissioning Group**Sunderland West Locality Patient Group
Pallion Health Centre, 22nd May 2013****Meeting Notes**

Jaclyn – please add attendance list

Summary of main themes / decisions made

- The group agreed they were happy with practice representation at the group for the time being. This will be reviewed in due course (November 2013). The group hopes that representation from different practices will be increased before this date.
- The structure and staff roles in the CCG is required for the next meeting (JW)
- AS offered to bring a summary of the CCG response to the Francis Inquiry to the next meeting
- Monthly dates will be set for the next 6 months after checking against the Corporate Calendar (JW)
- The draft Locality Action Plan for West Sunderland will be drafted by late June and will be available in July (DP)
- Dr. Gilmour (CCG Executive lead for West Sunderland) took the group through the planned changes for urgent care.
- DP outlined a request from Ailsa Nokes requesting patients who would like to be part of developing the Minor Injury Unit Service Specification. AN to provide more detail.

Dr. Gilmour covered the following topics:

- To maintain the GP practice service as we know it will involve recruiting 40% more GP's. Many are due for retirement and some choose more lucrative positions outside general practice
- At Dr. Gilmour's practice GP's 'phone back' (when patient calls a GP will ring back quite quickly to see what is the best course of action) has increased the number of appointments available as some people don't need to visit the GP
- Early & late appointments were intended to help working people but as they are pre-bookable they are often taken by others.
- Another option is: AM – drop in, PM appointments only
- At Dr. Gilmour's practice a child under 2 years would automatically be seen
- Repeat prescription arrangements have also saved unnecessary appointments
- The CCG are trying to increase repeat dispensing, it is easier for all. Some medicines need checking – but the chemist can do this.

- Whilst the CCG do not contact the GP practices they do contract the Out of Hours Service. They could commission more evening & week-end working if this would better meet the public need.
- 111 – whilst there has been some national problems with the roll out of 111, Dr. Gilmour thought this was not such an issue the North-East.
- Alternate patient appointment systems have been successfully trialled. When patients can easily access GP practices then the problem is attended to early and saves money in the NHS system further down the line.
- It was noted there is an option to hold bigger meetings, perhaps quarterly or 2x / year, to enable more people to offer their opinion, but with less time commitment. This idea will be re-visited.
- Dr. Gilmour identified the group could have input on future specifications being developed e.g. Local Enhanced Services (LES – these are local initiatives to improve local services) and the Locality Action Plan which will shortly be developed.

Group member comment & opinion

- More same day access to GPs is required
- It is important to have pre-bookable appointments as well as same day appointments
- It was agreed patient education was important in helping people know the best place to go for treatment.
- The group may be interested in helping with a patient survey regarding GP access at a later date.
- One person advised they had been told to attend the Walk in Centre or A&E by their GP practice.
- Comment was made regarding virtual patients groups. By definition they do not enable people to come together as a group! This was acknowledged but they do enable working people / those who can't get to meetings to offer comment. Ideally a practice would have both & enable them to communicate with each other.
- One member is active in the Duke of Edinburgh Award Scheme & thought there was an opportunity to engage with young people through this. JW will follow this up. Dr. Gilmour suggested linking into the 'Summer of a Lifetime' programme.
- School nurses are able to gather the views of young people & schools have general education programmes. Are these opportunities being adequately exploited?
- A member told a tale of 'educating' a younger family member to use their GP rather than A&E. We wondered if there was any room for a 'virtual grandmother' (slightly tongue in cheek)!
- Younger people were perceived to have a different attitude to the NHS (& services in general). Younger generations may have been trained by society to expect instant responses when need is identified.

Next Meeting

- Tuesday 26th June, Pallion Health Centre, 10.30am -12.30pm