

Latham House Medical Practice Patient Reference Group

MINUTES OF MEETING

Meeting	LHMP PRG	Date Time	6 October 2022 10:30hrs
Location			
Zoom Meetings			
Present Jane Horn (JH) (Chair) Angie Phillips (AP) (LHMP rep Mike Kitching (MK) (Secretary	resentative) Tad Ste	rosbie (PC) enzel (TS) Culpan (SC) (LHMP)	
Louise Finn (LF)	y) Sarah (

ITEM		DISCUSSION	ACTION
1.	Apolog	gies and Welcome	
	a)	Apologies were received from Peter Roffey, David Hayton-Hill, Malise Graham and Michelle Howard.	
2.	Speake	er – Sarah Culpan – An overview of End of Life Care	
	- a)	The Chair welcomed Sarah and she introduced herself.	
	b)	SC started at the practice in 2014 in advanced care planning.	
	c)		
	d)		
	e)	There is a lot of work with care homes, ensuring that patient wishes are acknowledged.	
	f)	There is a multi disciplinary team, which SC chairs, that meets weekly.	
		a. Q. Do patients attend? A. The team has never been asked, but they would do if	
		requested.	
		b. The meeting discusses patients in need, ensuring that all their needs are covered.	
		c. Each patients priorities are different and the team is occasionally contacted before the G.P.	
		d. Q. How do patients get referred? A. This can be via the G.P., district nurse or	
		social care.	
		e. Q. How many patients are currently being reviewed? A. There are 50 on the visit	
		list at the moment and there is a continual flow of patients.	
		A flow of patients prefer a home environment.	
	h)	Q. Is it possible to die in their own home? A. Yes, but the team needs a plan so that all necessary people know.	
		a. There is a need for anticipatory medicine to be available so that the patient doesn't have to go to hospital.	
		b. The district nurse administers any medication.	
		c. Palliative care is organised, which sits with the Leicestershire Partnership Trust	
		(LPT), and links are created with LOROS.	
	i)	Q. If a patient has no backup do you contact social services? A. Yes, but this can be a	
		very difficult situation with a concern about safety.	
		a. A patient will be kept at home for as long as possible.	
	j)	Q. Do you think that everyone over 75 should have an end of life care plan? A. People	
		should think about their wishes, bt things can change very quickly.	

k) It was sugge practice web		
	ested that more information should be made available, possibly on the site	
	ers thought that it had been a very useful discussion, interesting and	
exhilarating.		
	ed that each patient is treated as an individual.	
n) The Chair tha	anked SC for her time and knowledge.	
3. Paul Crosbie – Updat		
a) New Surgery.		
	as spoken to the head of strategy at the Integrated Care Board (ICB).	
-	are not necessarily looking at a second provider but are looking at a second possibly on the MV16 Burton Road site.	
	will all be dependent on the Section 106 money, buildings and other finance.	
	one at LHMP is against a second site.	
	challenge will be recruitment, like the rest of the country.	
	ry of State's ABCD.	
	ning has yet trickled down from the Department of Health.	
	as noted that the two week referral target has been removed.	
	y new G.P.'s has the practice recruited? A. Three by the new year, taking the	
total to 19.	w and interval there C. D'a work? A. Normally 9 (4 days) but require now to	
6 (3 days).	y sessions will these G.P.'s work? A. Normally 8 (4 days) but moving now to	
	ecialisations do they have? A. Two are newly qualified and the other	
	elderly care.	
-	aining practice.	
g) Newly qualifi	ied get the support of their peers.	
	ting of 4 th August 2022	
a) The minutes meeting.	s of the last meeting were accepted as a true and accurate record of the	
inceting.		
5. Matters Arising – Act		
	eport – Healthwatch visit - It was agreed to invite Healthwatch to one of our	
	nce the report had been received and reviewed – link to the visit report.	ЈН/МК
	report is no longer available on the Healthwatch website – ongoing. e update - Can the hospital be used more? - Although the Hospital comes	
-	dary Care and the Practice is Primary Care it was agreed to investigate what	
	e available at the hospital. AP would email MG to see if information was	
available at N	Velton Borough Council – ongoing.	AP/MG
	ner business – full committee - AP, JH and MK to have a meeting with a view	
	g a way forward to a future PRG meeting – completed.	
	as agreed that we should concentrate on the survey for now – see next item.	
-	Arising – Action List - Should the PRG rerun the survey that we used to run vestigate – completed.	
-	Survey as an agenda item.	
	as agreed that we should use the survey to reinforce the practices social	
	la messages.	
	ne PRG agreed to focus on individual areas, it was agreed to create a survey	
c. As th aime	ed at patients Over 65.	
c. As th aime d. MK t	ed at patients Over 65. to create a proforma survey based on the discussions during the meeting.	МК
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	g) 9.a - Secretary's Report - It was agreed to start the 2003 meetings in February - Dates to	
	be published – see minutes and agenda – completed.	
	h) 10.a.a - Any Other Business - PPG meetings - NAG will forward the minutes of the last	
	PPG meeting to members – completed.	
6.	Items for Any Other Business	
	a) None.	
7.	•	
	a) All the items in the Chair's report have been covered in item 3.	
8.	Practice Update	
	a) Melton Times Article: Second Surgery News (28.09.22)	
	a. The Melton Times newspaper have recently posted a story about the health	
	authority formally committing to exploring a second GP surgery in Melton Mowbray.	
	b. STORY LINK HERE: <u>Plans for second Melton GP surgery move big step nearer </u>	
	Melton Times	
	c. Although we have not been formally involved in this discussion, we have been	
	asked to share a statement on the latest news.	
	d. Dr Matthew Riley, CEO of Latham House Medical Practice comments, "We are	
	supportive of any initiatives that aim to improve access to healthcare for the	
	community, but we remain concerned with the reality of the significant	
	recruitment challenges facing Primary care. The numbers of doctors entering GP	
	training has grown in recent years, but the overall strain in General Practice has	
	led to difficulties retaining these people in Full-Time General Practice, when	
	coupled with difficulties retaining GPs at the other end of their career, we are in	
	a recruitment crisis nationally. These workforce shortages and rates of turnover	
	inevitably impact on the GP services any GP Practice can deliver for patients. We	
	look forward to engaging with the ICB further on this topic."	
	 b) Latham House Medical Practice announce award winning nurse! (04.10.22) a. Latham House Medical Practice are delighted to announce that Lead Nurse Care 	
	a. Latham House Medical Practice are delighted to announce that Lead Nurse Care Co-Ordinator, Sarah Culpan has won a Cavell Star Award for going above and	
	beyond for her patients.	
	Cavell Star Awards	
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	66 People often say to me that I must	
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	the patients I do. Being able to make	
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	my job every bit worthwhile.	
	nurses' trust	
	b. Latham House Medical Practice are delighted to announce that Lead Nurse Care	
	Co-Ordinator, Sarah Culpan has won a Cavell Star Award for going above and	
	beyond for her patients.	

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	C.	Cavell Star Awards are given to nurses, midwives, nursing associates and healthcare assistants who shine bright and show exceptional care to one of three groups of people: Their colleagues, their patients or patients families. Teammate and Care coordinator Claire Dutton explains why Sarah is such a worthy winner, "I nominated Sarah because she is an exceptional nurse who goes above and beyond for her patients and their families. I have only worked with her for a short time but have been really impressed with her clinical knowledge and the relationship she builds with her patients and their families. "This trust without doubt helps enhance patient care. Equally she is a strong advocate, and this is evident in her collaboration with wider agencies and other health professional within the practice. She is an excellent role model for more junior nurses and a credit to the practice." Sarah leads a team of nurse care coordinators who provide support to patients with complex care needs. Sarah reacted to winning her Cavell Star Award, "It was an absolute shock and surprise when I realised, I was being presented with an award and that it was my	
		colleagues who had nominated me.	
		"People often say to me that I must have a hard job, but I feel like I have the most	
		rewarding job I could ask for. I feel very privileged to care for the patients I do.	
		Being able to make a difference in just a small way makes my job every bit worthwhile.	
		I have met some wonderful patients and their families, that have let me into their	
		lives to care for them at such a precious time. I feel very honoured and privileged.	
		They have made me the nurse I am today.	
		Kerry Eaves, Head of Clinical Services commented "I'm delighted for Sarah and her team, this is well deserved recognition for the exceptional care and support they give to our patients, patient families and their colleagues at work."	
		Paul Crosbie, Executive Manager at Latham House Medical Practice said, "This award is extremely well deserved for Sarah and her team who go above and	
	-	beyond for their patients and families."	
		More information about the award can be found <u>here</u> .	
c)		ruitment	
	a.	Recruitment of clinical staff remains a challenge with some roles achieving no applicants.	
	b.	We continue to look at how to utilize other clinical professionals appropriately within the Practice, with adverts out for additional Pharmacists, Paramedics and ANPs, but also exploring how we can make the GP job at LHMP more attractive to both rotain and rescuit great members of the CP team	
		to both retain and recruit great members of the GP team.	
d d	,	ecruits to the LHMP Team.	
		Laura Meadows, Medical Administrator Dr Wood Locum GP	
	D. C.		
	-	as Patient Experience Care Coordinator supporting the Management Team.	
	d.	Jahnavi Dabali is also returning to the Practice as a Coder & Medical	
		Administrator.	
e) Medica	al Students.	

	Aron Patrick Desmond Vinay Haris	
	DAVIES MACALLISTER TANNA MUHAMMAD	
f)	Enhanced Access: Improving Access to general practice.	
	 a. Enhanced access is now in place, starting 01 October. Enhanced hours are implemented across the PCN, ensuring that within the PCN enhanced access to services is available for all patients as required. At the Practice this means extended hours on a Thursday from 18:30 – 20:00 and all-day Saturday. b. Throughout October we will be using the Saturday hours to deliver the flu vaccines. c. From November onwards, we will be seeing support to maintain our extended 	
	access, limiting the impact to staff but still providing appropriate patient services.	
g)	Flu Clinics	
	 a. We will be running clinics for eligible patient cohorts on Saturdays throughout the winter months, starting from 1st October. b. Based on current vaccine availability we aim to deliver Eligible under 65's cohort- From 1st October 2022 Over 65's- From 8th October 2022 Over 50's- From 1st November 2022 	
h)	 Covid Vaccines a. The Practice are contracted to deliver covid vaccines to housebound patients and care home residents only. We are in the process of delivering this programme. 	
i)	Phone Stats: September 2022	
	Queued Answered % Answered Missed [%] Missed Missed From Queue For From Queue From Queue Group Queue	
Total:	13894 9613 69.20% 4281 30.80% 1734	
j)	 Practice key messages: Recent Communications to patients NHS Better Health Recruitment Reminder of the cancellation number to call if you no longer need your appointment – this is to continue to target DNA's (did not attend's - wasted appointments) Introducing new clinical roles 	

	Meet your Primary Care team	NHS	Meet your Primary Care team NHS	
	Advanced Nurse Practit	ioner	Clinical Pharmacists	
	Advanced Nurse Practitioners are Registered Nurse completed additional training and academic qualifie	es who have	Clinical plasmacists work as part of the general practice team to improve value and outcomes from medicines and consult with and treat patients directly:	
	able to examine, assess, make a diagnosis, treat, pr make referrals for patients.	rescribe and	This includes providing extra help to manage long-term conditions, advice for those on multiple medicines and better access to health chicks. The role is privata to improving the quality of care and ensuing patient safety.	
	They are qualified to be able to make a number of or diagnosis and treatment of patients.	decisions about	Having clinical pharmacists in GP practices means that GPs can focus their skills where they are most meeded, for example on diagnosing and treaking patients with where complex conditions.	
		Meet your Primary Care team	Na Support your local NHS.	
	Su Su		#LovePrimaryCare	
		Most GP reception staff are trained Care Na		
		patients receive the right care by the most a safe and effective way.	propriate person in a	
		Care Navigators help identify and signpost services and will help link you to the right h They will generally be the first contact with	althcare professional.	
		patients will come across.		
	Meet your Primary Care team	NHS	Meet your Primary Care team	
	Pharmacy Technicia	ans	Physician Associate	
	Pharmacy Technicians are professional, skilled, k and essential members of the pharmacy team wh supply your medicines, and make sure they are ri	ho dispense and	When you contact primary care, we may arrange for you to see a Physician Associate. An appointment with the Physician Associate	
	Pharmacy Technicians are healthcare profession. registered with the UK pharmacy regulator, the O	als who are	might be face-to-face, by video or by phone. A Physician Associate is here to help you stay on top of any health	
	Pharmaceutical Council (GPhC) for their licence t	to practice.	concerns. They are highly skilled at diagnosing conditions and can perform physical examinations if needed. They can also arrange tests and analyze results quickly, explaining everything in detail	
		Support your local NHS	before arranging follow-up appointments or treatments.	
	N	FLovePrimaryCare	Support your local NHS. #LovePrimanCare	
	Meet your Primary Care team		Meet your Primary Care team	
	General Practice Nu A General Practice Nurse is a registered nurse who works a Mubdisciplinary Team (MDT) within General Practice (G	sautonomously within	Paramedics in general practice	
	a Primary Healthcare Team.		A parametic in primary care can recognise and manage the detariorating patient and can manage patients with long term conditions, minor isjuries, and minor alters.	
	They assess, screen and treat people of all ages, including adults in addition to providing traditional aspects of nors and care, immuniations, visconiadors, Cervical ystion clinics for patients with Long Term Conditions such as ast and datestes.		They can also support picterts who require wound care, have failer, have MSX problem, and have unany fruct or requirer indications. Parameters can supply a range of medicines through PCOs, including antibiosca and analysis.	
	A key role of the General Practice Nurse (GPN) is to offer advice in areas such as contraception, weight loss and sm addition to emphasis on promoting Women's and Men's I	health promotion noking cesation in health.	Parametics can support PCNs in responding to an the day demand. They can also support PCNs to improve access to careful y serving mixor alternar and injuries in support PCNs to improve access to careful y serving mixor alternar and injuries in support PCNs with the default of careful y and the service of the service	
	Maat	your Primary Care team		
	Meet	your Frinary Care team	Support you now Mrs. #LovePrimaryCare	
		Mental Health Practitioner		
		A mental health professional is a health care practitioner or social and hu services provider who offers services for the purpose of improving an individual's mental health or to treat mental disorders.	an	
		Mental Health Practitioners working in PCNs take on a rest contact role often based on referrals from GPs within those practices. The role will involve liaison with practice clinicians, as well as liaison with secondary of		
		involve laison with practice clinician, as well as liaison with secondary to social workers and voluntary sector staff, where appropriate, and making best use of third sector and other community opportunities for promotio patient wellbeing and maintenance of mental health.	re, not	
	leet your Primary Care team	NHS Support your le	Meet your Primary Care team NHS	
	leet your Primary Care team	Support your la BLowePrint		
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	Care Coordinator The Care Coordinator The Care Coordinator are primarily reported for arranging supervising individual patient care.	contact for g and	Social Prescribers A Social Prescribers A Social Prescriber will help with any social need that's affecting with with they are three to listen to what matters to you and help find the support you need.	
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