

Minutes
STOCKTON HEATH MEDICAL CENTRE
PATIENT PARTICIPATION GROUP
Wednesday 11 May 2022
5.00pm – 6.00pm (remote on TEAMS)

Attendees: Mary Chuck, Derick Acton, Susan Scales, Richard Utley, Joanne Price, Karen Chriscoli, Bernie Wilkinson, Lauren Haslam, Care Co-Ordinator, Clare O'Neil, First Contact Physiotherapist
Hannah Thomas, PCN Support- Project Manager, Quay Healthcare, Matt Roberts, Engagement Officer,
NHS Halton Clinical Commissioning Group
NHS Warrington Clinical Commissioning Group

Apologies: Kath Douglas Furner, Jane Brown

Extended Access – Hannah Thomas, PCN Support- Project Manager, Quay Healthcare

Local NHS launches consultation on plans to enhance Warrington's extended access service

Warrington's five Primary Care Networks (PCNs) have launched a consultation on Warrington's extended access service to ensure proposed plans meet the needs of local residents. *You can find out more information regarding PCNs via the NHS website PCN page:* <https://www.england.nhs.uk/primary-care/primary-care-networks/>.

At the moment all GP practices must provide some additional appointments every week before or after normal opening times (8.00am – 6.30pm) for their own patients; this is known as extended hours.

In addition, Clinical Commissioning Groups must make sure that patients can access appointments with primary care clinicians and staff in convenient locations across the town again outside of the hours that you can go to your registered practice; this is known as extended access.

From October 2022 NHS England has also decided that these two services should come together and form one service that will be known as **Enhanced Access**, therefore the Primary Care Networks in Warrington are consulting with their patient populations to ensure the new enhanced access service is fit for purpose and meets the needs of Warrington patients.

What is changing?

Your Primary Care Network currently offers some appointments at Bath Street Health and Wellbeing Centre. Our new proposal offers a "hub and spoke" model of care, with the aim of allowing patients to access primary care in their locality.

Currently the service at Bath Street is operated at a fixed location. The proposed 'hub and spoke' model will offer appointments from various practices across the PCN (known as the spokes) and Orford Jubilee Neighbourhood Hub, 1st floor, Jubilee Way, Warrington, WA2 8HE, (known as the "hub").

Orford Jubilee Hub has been chosen for a number of factors:

- bus routes are available to the site, with the bus stop at the front of the building.
- Large car park, which is free of charge if your visit is under 3 hours, giving ample time for patients to ensure all their concerns are addressed and do not feel rushed.
- ample clinical rooms are available, which will enable the service to expand over time. A variety of primary care services will be available, including blood collection, smears etc.

Before the service launches in October 2022, Warrington's PCNs are asking people to consider whether the following are convenient:

- Times of appointments
- Appointment days
- Location of appointments

You can access the extended access service consultation on [Enhanced Access Consultation 2022 \(haltonwarringtonccg.nhs.uk\)](https://www.haltonwarringtonccg.nhs.uk/Enhanced-Access-Consultation-2022)

For more information and queries, please email warccg.halccg.commseng@nhs.net.

The closing date is **Tuesday 26th July 2022**

Frequently Asked Questions:

- **What is extended access?**
Extended access is the offer, to registered patients of a GP practice, of pre-bookable ROUTINE appointments outside of core contractual hours, either in the early morning, evening or at weekends. These appointments will be provided at a location in the town that you live. Extended access to primary care was introduced by NHS England in 2016 to ensure everyone has easier and more convenient access to GP services, including physical and digital appointments at evenings and weekends.
- **What are extended access appointments for?**
Extended access appointments offer our patients the chance to access primary care services outside of core contractual hours, offering greater flexibility and choice to our patients. Extended access appointments also aim to reduce the current pressure on our busy GP practices through increasing local capacity.
- **What can I expect from the service?**
Patients can expect an extended access service that is run by a team of dedicated and professional staff, ranging from experienced *local*

clinicians, such as GPs and nurses to our helpful administration team. Furthermore, patients can expect a mixture of face-to-face and remote consultations, ensuring every individual patient can get the care they need. As the service matures, wider members of Warrington's primary care workforce will become available, e.g. paramedics, clinical pharmacists, mental health practitioners and Physiotherapists.

- **Can I make an appointment to see my GP?**

Yes - your GP practice remains open and accessible to all of its patients and you can still book to see your GP.

If you chose to accept an appointment at the new Extended Access service, you will not be seeing your practice GP, it will be another clinician.

- **Can I make an appointment to see a GP who's the same gender as me?**

Yes – patient choice is still highly important to us. When booking your appointment at extended access, please inform the call handler of your wish to see a GP who is the same gender.

- **Will the GP I see have access to my medical records? Or will I have to explain everything to them?**

Every effort has been made to make your journey as seamless as possible. Depending on what clinical system your practice uses, the clinician will be able to see your medical records.

System 1 – This clinical system allows the extended access clinicians to view the patient's full GP record.

Emis Web (used by Stockton Heath Medical Centre)– This system does not allow full access, however clinicians can view a 'Summary' of your medical record, showing your conditions, medication, allergies and your three most recent consultation notes. From speaking to local GPs in Warrington, it has been agreed that this does not put any patients from an Emis practice at a disadvantage or significant risk and the highest possible standard of care can still be provided.

- **Can I only see a GP, or are there other healthcare professionals / clinicians that I can see?**

Patients can enjoy access to a range of healthcare professionals. As the service begins, available appointments will predominantly be for GPs/Nurses, however as the service matures and develops, patients will be able to access paramedics, clinical pharmacists, mental health practitioners and physiotherapists – an offer we are really proud of.

- **Can a Carer, friend or family member accompany me for the appointment?**

Yes – If you require the support of a carer, friend or family member at your appointment they are more than welcome. We want you to feel at ease and well supported.

- **How do I make an appointment?**
Appointments can be made through your GP practice. The receptionist will be able to offer you an appointment outside of core contractual hours if you are unable to access the practice during the day.
- **How long are the appointments?**
Appointments are 10 minutes in length.
- **Can I book a double appointment?**
Yes, however this depends on the availability of appointments.
- **How far in advance can I book an appointment?**
You can book an appointment up to 14 days in advance.
- **Can I book an appointment on behalf of someone else?**
Yes – If the patient is unable to book an appointment themselves, a carer or family member can book an appointment on their behalf.
- **Can I just walk in and be seen?**
No walk in appointments are available, this service is strictly by appointment only.
- **What does the service cover?**
This service is for routine appointments only; not for urgent or emergency care.
- **Does this mean practices are opening seven days a week?**
Individual practices are not open 7 days a week. This service is an extension of primary care, meaning that primary care in Warrington will be open 7 days a week.
- **Is the service also open on Bank Holidays?**
Yes, the service will be open for patients on bank holidays.
- **Does this mean I will be guaranteed an appointment when I want it?**
Unfortunately, we cannot 'guarantee' an appointment when you want it due to a range of factors, e.g. capacity. However, GP practice staff will endeavour to give you an appointment at a time/date that suits you.
- **Where can I get more information?**
More information of the consultation is available on Warrington CCG's website

Separate models – Collaborative Model

- **Why have you chosen this location?**

‘The collaborative’ extended access service has decided to operate a ‘hub and spoke’ model, with the aim of allowing patients to access primary care in their locality. The existing service at Bath Street is always operational from one fixed location.

The proposed ‘hub’ will be based a Orford Jubilee Neighbourhood Hub (1st floor, Jubilee Way, Warrington, WA2 8HE). Orford Jubilee Hub has been chosen for a number of factors:

- It’s central location means that patients do not have to travel too far, whether they live in the North, East, South or West.
- Direct bus routes are available to the site, with the bus stop at the front of the building.
- Large car park, which is free of charge if your visit is under 3 hours, giving ample time for patients to ensure all their concerns are addressed and do not feel rushed.

The ‘spokes’ aspect of this service is how we ensure patients can access primary care within their locality.

The table below shows the proposed new venues and timings for the enhanced access service. These venues will be available for all registered patients of:

- Birchwood Medical Centre
- Fearnhead Cross Medical Centre
- Padgate Medical Centre
- 4 Seasons Medical Centre
- Chapleford Medical Centre
- Culcheth Medical Centre
- Guardian Medical Centre
- Parkview Medical Practice
- Springfields Medical Centre
- Westbrook Medical Centre
- Brookfield Surgery
- Lakeside Surgery
- Latchford Medical Centre
- Stockton Heath Medical Centre
- Stretton Medical Centre
- Cockhedge Medical Centre
- Fairfield Surgery
- Greenbank Surgery
- Holes Lane Surgery
- Manchester Road Medical Centre

Venue	M	T	W	T	F	Sa	Su
Latchford Medical Centre	6.30pm – 8pm						
1 Manchester Road	6.30pm – 8pm						
4 Seasons	6.30pm						

Medical Centre	- 8pm						
Latchford Medical Centre		6.30pm - 8pm					
1 Manchester Road		6.30pm - 8pm					
4 Seasons Medical Centre		6.30pm - 8pm					
Stockton Heath Medical Centre			6.30pm-8pm				
1 Manchester Road			6.30pm-8pm				
Parkview Medical Centre			6.30pm-8pm				
Stockton Heath Medical Centre				6.30pm-8pm			
1 Manchester Road				6.30pm-8pm			
4 Seasons Medical Centre				6.30pm-8pm			
Orford Jubilee Hub					6.30pm-8pm		
Orford Jubilee Hub						8am - 2pm	
Orford Jubilee Hub							10am - 2pm

- **Will there be ample parking onsite at the venue for my appointment?**

Ample parking will be available to patients, when deciding the venue part of the decision making process involved the accessibility of parking, including disabled parking spaces.

- **Is it easy to reach the venue using public transport?**

Patients can easily access the venue using public transport; there is a bus stop right outside the front of Orford Jubilee Hub.

- **Will there be a Receptionist or other Staff Member to support me when I arrive?**

Yes – receptionists will be on hand when you arrive to support you and answer any questions you have. All of our receptionists will have received training and are looking forward to welcoming you to the service.

- **Is the approach to the Practice well lit?**

There is lighting outside of the site to ensure that patient's feel safe when arriving/leaving.

- **Is there a Pharmacy at the same venue? If so, will it be open at the time of my appointment?**

At Orford Jubilee Hub, there is a Pharmacy onsite and you have to walk past it to get to your appointment. It's a Rowlands Pharmacy and is open Mon-Fri (9am-6pm).

- **Is the venue accessible to all?**

Yes – the venue is accessible to all our patients. Those who struggle with mobility can access the 1st floor via a lift. In addition, the car park has plenty of disabled parking spaces, ensuring those who need it don't have to walk too far.

Comments from SHMC PPG members:

Concerns about distance for travelling to Orford Hub – can take 40 minutes to get across town.

Many elderly cannot navigate 2 buses – not always running from outskirts of South Warrington.

Concerns added pressure for SHMC telephones/receptionists.

Is there to be a central number for patients to book?

PCN update on Additional roles:

Additional Roles in SWAN

Role of the PCN nurse Mental Health -Heather Rahman/Sophie Hussain

1. The PCN MH nurse completes assessments within the gp setting to explore the services users difficulties/needs and formulate an appropriate treatment / support plan.

2. This can be provided through interface working and utilising third sector services such as the outreach team and Warrington well being service.
3. Signposting to primary care psychological services (IAPT)
4. Working collaboratively with our primary care colleagues – social prescribing link workers who are also based within PCN network.
5. Referring to other MH services – (Urgent Care – HTT, Recovery Team , EIT, Perinatal, ASD, Eating Disorders, Later life and Memory Service (LLAMS), LD team, Criminal Justice (Liaison and diversion service. Inclusive of drug and alcohol services (pathways) and linking in with other agencies that the service user may be involves with (probation , social services etc)
6. PCN MH nurse can discuss cases they see in clinic within the daily PCN MH team MDT meeting if required .

STEPPED CARE MODEL

	WHO IS RESPONSIBLE? FOR CARE?	WHAT IS THE FOCUS?	WHAT DO THEY DO?
Step 1	GP	MILD DEPRESSION/ANXIETY	ASSESSMENT, WATCHFUL WAITING. GUIDED SELF HELP, EXERCISE, REFERRAL TO SOCIAL PRESCRIBER-LOCAL IAPT TEAM FOR BRIEF PSYCHOLOGICAL INTERVENTIONS
Step 2	GP / PCN MH NURSE	PERSISTENT MILD DEPRESSION/ANXIETY	PROVIDE ADVICE AND GUIDANCE TO SUPPORT GP'S ASSESSMENT AND TREATMENT PLAN- JOINT CONSULTATIONS
Step 3	PCN MH NURSE	MODERATE OR SEVERE DEPRESSION	ASSESSMENTS, MEDICATION, PSYCHOLOGICAL INTERVENTIONS, SOCIAL SUPPORT
Step 4	PCN SPECIALIST TEAM VIA NHS.NET REFERRAL	SMI / COMPLEX MH PRESENTATIONS – NO SIGNIFICANT RISK	ACCESS TO SECONDARY SERVICES,MEDICATION, COMPLEX PSYCHOLOGICAL INTERVENTIONS, COMBINED TREATMENTS

Points to raise

- Appointments are being booked in by admin/ secretaries and other professionals without e-consults attached or reason for appointment. Either an e-consult or reason for appointment is required to identify a start point for the appointment.
- Patients are not always being told about what day their appointment with the MHN is booked for, creating multiple missed phone calls and delay in patient care.
- Please could we discuss the role of the MHN with the patient – I have had numerous appointments in which the patient thinks they are receiving a call from a CPN or a counsellor. So we can manage patient expectations.
- Lastly a number of patients are having full comprehensive appointments with GPs or practice nurses, commenced on medication and then booked in with a mental health nurse within 24hours or on two

occasions within the same day. This does not allow the patient to consolidate on information they may have been given at the appointment with the other health professional and does not allow time to discuss how the medication has impacted mood. This is also overwhelming for a patient.

In terms of moving forward, in South PCN there is going to be another mental health nurse Diane Williams. She is due to be shadowing Sophie w.c 9th of May so is due to start independently within the next month.

Social Prescribing Link Worker – Susan Marsland

Social Prescribing Link worker involves working with all five practices in South Warrington. Patients can access the service by requesting an appointment at the surgery and staff can book a telephone appointment on the CIC system. Once a referral has been received the SPLW will call the patient and discuss what problems they are having, what they would like help with, the types of support services available and 'What Matters the Most' to the patient. A plan of action going forward is agreed and a follow up appointment is made. The SP will then research the most appropriate support services available for the patient, checking the referral process, dates/times, waiting lists etc and if required complete the referral forms for the patient and arrange interviews. Follow up appointments with the SP are focused on patient progress and if further interventions are required. Each patient referral is currently taking between 3-6 appointments and the patient can chose if the follow up appointments are either F2F at the surgery or community space or via telephone.

Common Themes for referrals

- Long Term Conditions which affect their social and psychological wellbeing.
- Loneliness/ Social Isolation/ Bereavement.
- Financial Difficulties. Unemployment Benefits/ Disability payments / Carer's Assessments, Support. Blue Badge Forms/Transport Issues
- Lifestyle Signposting such as Walking groups, Exercise/Weight management, Smoking Cessation Volunteering Opportunities
- Holistic Palliative/End of Life Care such as St Rocco's day service/support groups. Macmillan Support. Palliative care, (with any non-medical needs.

Recent referrals from Stockton Heath Practice and support ongoing.

- Loneliness, isolation, anxiety, depression.
- Volunteer work, Job clubs.
- Exercise, gentle increasing mobility.
- Dementia support for carers.
- Disability and Benefit review and support completing forms.
- Housing Issues.
- Community projects

Exclusion criteria for Social Prescribing.

- People under 18 years of age
- People with severe and enduring mental health conditions unless its part of a package of care and has been discussed between the referrer and the SPLW.
- People who do not wish to be involved with the SPLW service.
- People who are being referred mainly for clinical reasons, e.g. addictions, where more appropriate services exist which do not place either other service users or the providers at risk.
- Service users who display unreasonable behaviour unacceptable to the provider(s) and members of staff.

Clinical Pharmacist and Pharmacy Technician

(SHMC should have 72 hours of CP time due to difficulty recruiting only have 36 hours)

Summary of Pharmacist work

- Discharge letters (med sync, med reconciliation, documenting on record, read coding, discussing with patient if needed)
- Med reviews (including patient counselling at GP request, SMRs, follow up reviews for new therapies for instance)
- eConsult consultations (general advice, med changes, dose changes if needed to be highlighted to GP, OTC's recommended to treat, signposting to other services)
- PINCER reviews (PPIs for patients who should be on them)
- Out of stock/alternate med requests from patients/pharmacy
- Med issues - e.g. med synchronisations, side effects, how to manage, general counselling
- Supporting, educating, and upskilling the Pharmacy techs
- Statin initiations - following NICE guidance at GP request (follow up appts and bloods booked if required) -sent to GP to sign if happy with my choice of drug and dose
- Blood pressure Titrations - following NICE guidance at GP request (follow up appts and bloods booked if required) - sent to GP to sign if happy with my choice of drug and dose
- Checking guidance and Panmersey for GPs when requested (usually when GP is unsure if a treatment is recommended)
- COVID vaccination mixing (Pfzier only)
- Fridge temp checks and resetting & downloading datalogger in fridge
- COVID Vaccination weekly stock check
- Supporting prescriptions team with queries they receive that require pharmacist input/advice

Summary of Pharm Tech work which is delegated to them by Pharmacist:

- Discharge letters (as above) - including chasing up discrepancies
- Basic (common/low-risk) med counselling (how to use, when to take, what side effects can be expected, how to manage, general advice) - any advanced/high risk meds usually will be passed onto pharmacist to discuss

- Out of stock meds/alternatives - depending on med tech may liaise with pharmacist/GP to identify best way to manage and which alternatives are appropriate
- Med synchronisations
- PINCER admin (running searches for pharmacist and identifying pt's who may need review)
- Drug alerts - checking periodically using teamnet and actioning appropriately (liaising with pharmacist if any extra advice needed)
- Care home ordering - liaise with Liz directly for further details
- We have plans to utilise Liz in statin initiations and BP titrations with experience and support
- Fridge temp checks and resetting
- COVID Vaccination weekly stock check

Care Co-ordinator – Lauren Haslam

Frailty reviews

NHS healthchecks

BP @ Home monitoring

Cancer care reviews,

PCN projects and IIF assurance.

Care Home Meetings and Gold Standard Framework meetings.

Liaising with patients struggling with Long covid

Paramedics

We have currently 5 paramedics

Chris (Lead)

Jan (Lead)

Allan

Abby

Carl

Hopefully a new paramedic by end of May.

Currently running 1 F2F 1 Non covid HV and 1 Covid HV

When all paramedics are in we also run

Chronic disease Reviews

DHIP

COPD

We help giving vaccines to the housebound and also the flu jab

We have

X2 RRV units

X1 Mobile clinic

In the month of March we seen over 600 patients

FIRST CONTACT PHYSIOTHERAPY SERVICE



Key Aims

- To allow patients early access to an expert clinical opinion on the diagnosis and management of musculoskeletal and orthopaedic concerns

- To offer patient centred assessment and management options – F2F / Telehealth / Online virtual exercise plans
- To reduce unnecessary imaging and investigations in primary care / to positively impact WHH waiting times
- To streamline access to appropriate secondary care services for conditions requiring continued management
 - Orthopaedic triage
 - Orthopaedic Consultant Clinics
 - MSK Physiotherapy
 - Rheumatology
 - Podiatry and Orthotics
- To improve the health and wellbeing of the patient population through referral to community led services
 - Weight loss management programmes
 - Lifestyles Fitness
 - Escape pain – aimed at educating and providing management strategies to live well with arthritis
 - Cancer rehab programmes
 - Social Prescribing
 - Falls services
 - Community Physiotherapy
 - Talking Matters

Current Service Provision - SWAN PCN

2 Full time staff / 2 part time staff – Out to recruitment for additional staff to add to SWAN and other PCNs in Warrington
 138 appointments per week across SWAN

FACE TO FACE CLINIC LOCATIONS ACROSS THE WEEK

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Brookfield Surgery	SHMC	SHMC	AM - SHMC	Lakeside Surgery
		Appleton / Stretton	PM – Latchford MC	

* Patients can attend any practice on a day convenient for them.

Recent patient issues

Patients have been unable to get an answer on the FCP contact line (01925 387043). This issue is being addressed with staff recruitment to have a dedicated admin member solely for the FCP team. There is an option on the FCP line to leave a voicemail. The team will diarise time to check the voicemail and respond in a timely manner.

Clinical data reporting in General Practice –

The following targets have been re-instated as the pandemic has eased. Appointment invites for long term condition reviews are being sent to patient on their birthday month.

Clinical Targets in General Practice

Quality Outcomes Framework (Qof) National

Asthma

Atrial Fibrillation

Cancer

Chronic Heart Disease

Chronic Kidney Disease

Chronic Obstructive Pulmonary Disease

Dementia

Depression

Diabetes

Epilepsy

Heart Failure

Hypertension

Learning Disability

Mental Health

Non Diabetic Hyperglycaemia

Osteoporosis

Palliative Care

Peripheral Arterial Disease

Rheumatoid Arthritis

Stroke and TIA

Vaccinations and Immunisations – childhood imms and Shingles for over 70's

Local enhanced services(LES) Warrington CCG

Complex Care for Frailty and EoL

Pathways Specification

Shared care for people with ADHD

Medicines optimisation

Atrial Fibrillation detection/screening

Asthma spec with an element of COPD

Impact and Investment Fund (IIF) – Primary Care Networks

Vaccinations –

targets for influenza vaccine uptake

Learning Disability –

health checks and care plans

Cardio Vascular Disease –

targets for hypertension identification

Atrial Fibrillation – on anticoagulants

Cholesterol – referrals for familial hypercholesterolaemia if above targets

Social Prescribing referral

Enhanced Care home support

Aligned to PCN in home locality

Weekly ward rounds

Personalised Care and Support Plan

Standardised number of emergency admissions

Access

Number of on-line consultations 5 for every 1000

Survey to identify inequalities of access across PCN – this year working on housebound diabetic patient reviews.

Specialist advice for referrals/admissions

Number of patients waiting more than 2 weeks to see/speak to GP.

Number of referrals to the Community Pharmacist Consultation Service per 1000 registered patients

Structured Medication Reviews

Percentage of patients at risk of harm due to medication errors who received a Structure Medication Review

Percentage of patients living with severe frailty who received a Structured Medication Review

Percentage of patients using potentially addictive medication who received a Structured Medication Review

Percentage of permanent care home residents aged 18 years or over who received a Structured Medication Review

a Non Steroidal Anti-Inflammatory Drug (NSAID) and an oral anticoagulant – prescribed gastro protections

both an oral anticoagulant and an anti-platelet both an oral anticoagulant and an anti-platelet – prescribed gastro protection

Percentage of patients prescribed a direct oral anti-coagulant, who received a renal function test and a recording of their weight and Creatinine Clearance Rate, along with a change or confirmation of their medication dose.

Respiratory

Percentage of patients on the QOF Asthma Register who were regularly prescribed* an inhaled corticosteroid over the previous 12 months

Percentage of patients on the QOF Asthma Register who received six or more SABA inhaler prescriptions

Environmental Support

Metered Dose Inhaler (MDI) prescriptions as a percentage of all non-salbutamol inhaler prescriptions

Mean carbon emissions per salbutamol inhaler prescribed (kg CO₂e)

Cancer

Percentage of lower gastrointestinal two week wait (fast track) cancer referrals accompanied by a faecal immunochemical test result, with the result recorded either in the seven days leading up to the referral, or in the fourteen days after the referral

Healthwatch Warrington - report from September 2021 now published. PPG members have received a copy. Positive report with no serious concerns raised.

Surgery – access “when are you returning to normal?”

How do we re-open our front doors- support patients and staff members?

Discussion: Do the front doors have to be opened if it is working well for Practice team to be in same area?

Only problem is lack of cover in colder/wet days.

Concerns from team that levels of verbal abuse towards staff is rising as expectations for service to return to same as it was prior to pandemic starting
How do we communicate with patients? Good clear Zero Tolerance policy displayed in waiting areas.

Manage patient expectations – need to communicate that service provision has moved on from pre March 2020. Greater use of eConsult (electronic via website) and eLite (telephone with receptionist) means that more people can access the care with the most appropriate clinician either over the telephone or face to face. Face to face appointments can be for longer than the traditional 10 minutes because the clinician can adapt day to suit the needs of patients on the day. Urgent appointment can be accommodated on the day whilst more routine requests can be arranged for up to 2-3 weeks ahead at a time to suit the patient.

We have asked PPG to think about how we can communicate this message to our patients and share ideas prior to (via email) or at next meeting.

Date for next meeting

8 June 2022 at 5pm Remote on TEAMS