

**BELSIZE PRIORY MEDICAL PRACTICE  
MINUTES OF PPG MEETING  
14<sup>th</sup> December, 2018**

<b>Present:</b>	
Name	Title
Mrs Janet Taines	Deputy Practice Manager
Mr Iftehekar Siddique	Physician's Associate
Miss Zena Al-Tamimi	Admin Clerk
Mr H M	PPG Member
Mrs A A	PPG Member

<b>REVIEW AGENDA</b>	
	1. Introduction to meeting
	2. Flu season update
	3. Introduction of Age UK Care navigation and social prescribing service
	4. Accessible disability standard discussion
	5. IS talks through role of Physician's Associate – new roles in GP Practices
	6. General Discussion and updates

<b>AGENDA ITEM</b>	<b>Discussion</b>
<b>1. Introduction to meeting</b>	JT led the discussion and apologised on behalf of MW and NH who were unable to attend this PPG meeting.
<b>2. Flu season updates</b>	<p>Flu season has been going very well with targets being met for the over and under 65 group of patients.</p> <p>The Flu is pre-ordered for next year with the Practice checking how many patients are eligible for the vaccination before ordering.</p> <p>The same vaccines will be ordered for next year.</p>
<b>3. Introduction of Age UK Care navigation and social prescribing service</b>	<p>A leaflet on Camden's care navigation and social prescribing was given to Mr HM.</p> <p>The service helps people to receive the right support at the right time through –</p> <ol style="list-style-type: none"> <li>1) Care navigation</li> <li>2) Signposting to community and voluntary organisations</li> <li>3) Information and advice</li> </ol> <p>If a clinician sees a patient and feels they would benefit from this service, a GP referral will be done and the patient will be contacted to arrange an appointment date and time.</p> <p>Inclusions of the service include :</p> <ol style="list-style-type: none"> <li>1) Age 18+</li> <li>2) Patients who want or need support with issues that impact on their lives, such as social isolation carers support, benefits, housing issues and unemployment</li> <li>3) Patient who have trouble navigating the complex health and care system</li> <li>4) Patients who want to be more active in their communities and do the things that they want to do</li> </ol>
<b>4. Accessible information standard</b>	It is a legal requirement for GP Practices to implement accessible information standards within and outside the building. The Standard sets out a specific, consistent approach to identifying, recording, flagging, sharing and

<p><b>discussion</b></p>	<p>meeting the information and communication support needs of patients, service users, carers and parents with a disability, impairment or sensory loss.</p> <p>The Practice records the best method of communication for a patient on their medical records.</p> <p>A disability is recorded as an alert and is coded onto medical records.</p> <p>In the New Patient Questionnaires there are specific questions for those patients who have a disability.</p>
<p><b>5. IS talks through role of Physician's Associate – new roles in GP Practices</b></p>	<p>IS has been employed for several months as a Physician's Associate.</p> <p>Mrs AA reported she was sceptical, at first, when she was offered an appointment with a PA as they were not a doctor. However she wanted to try it and she was pleasantly surprised with the care she was given for her and her children. She was very satisfied and would choose to book again with a PA.</p> <p>IS explained the role has been gaining increasing popularity within students – with the degree first becoming available in Universities in the UK for 5-10 years. Around 15 Universities are now offering the post-graduate course which has increased even in the last 2 years that IS has studied in.</p> <p>It is a new role in the GP Practice to allow: more people into the field of work, take some pressure of doctors and the NHS by having more clinicians employed and available to work.</p> <p>PA's can take history from patients, offer advice on prescribing, offer treatment and management plans, administer vaccinations to children and adults, perform NHS health checks and new patient checks, take blood and BP readings, take Spirometry readings , refer to secondary care, do home visits for patients and be the duty clinician for the day.</p> <p>PA's can only practice medication however with the supervision of a GP present at all times. This is a requirement.</p> <p>PA's cannot prescribe medication and will need the GP, who is supporting them, to prescribe this for a patient.</p> <p>There are leaflets regarding PA's distributed in the waiting room.</p> <p>The vast majority of feedback from patients is positive.</p> <p>With the introduction of PA's in the Practice – waiting times have decreased significantly and there are more emergency appointments available.</p>
<p><b>6. General Discussion and updates</b></p>	<ul style="list-style-type: none"> <li>From January Dr Hanosh will have 15 minute appointment slots instead of 10 minutes to decrease waiting times as patients often come to her for complex matters</li> </ul>

	<ul style="list-style-type: none"><li>• PPG members queried if there are any updates with the status of the Practice being built a new building – JT explained that this can be something to query in the next meeting when Dr H and MW are present</li><li>• Friends and family feedback is mostly positive. The negative comments are about waiting times for patients when the GP's run over their session. Another negative was sometimes it is hard to get emergency appointments. The Practice has a certain number of emergency appointments for the morning and for the afternoon. The availability of these appointments differs daily as some days the emergency appointments will become booked within 5 minutes; however other days, the Practice will struggle to book all of them – leaving empty slots.</li><li>• The next meeting will be scheduled for March 2019.</li></ul>
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**Next Meeting: 27<sup>th</sup> March 2019**