



Luson Surgery

Patient Participation Group

Meeting Notes Thurs 27th June 2019 – 6.00pm

Attendees:

Glyn Meredith, Michael Clarke, Jenny Roncaglia, Dr James Seddon & Martin Ellacott

Apologies:

None

Introducing Dr James Seddon

Dr Seddon joined the practice in January 2019 as replacement for Dr Barbara Crabtree who had retired in Oct2018. James gave a brief resume of his background and the other roles he undertakes.

He trained at University of Warwick, and most recent was working in a GP surgery in Bristol, whilst also undertaking some teaching at the University.

He currently works all day on Monday & Thursday, and splits his time between working at the surgery, working for the ambulance trust one day a week, and at Musgrove Park Hospital in A&E.

Merger of Somerset Partnership Foundation Trust and Taunton & Somerset Foundation Trust

A merger of the trusts was approved in Nov 2018. The process is ongoing, with final agreements expected to be completed in Sept 2019.

Broadly speaking, T&S Trust run Musgrove Park Hospital and Community Maternity Services, whilst Somerset Partnership runs the mental Health Services and other Community Services such as the District Nurses and Community physiotherapy.

Merging is intended to;

- Produce a more integrated system between the hospital and community services, providing consistent, high quality, holistic, person-centred care.
- Promote prevention and self-management, delivering care closer to home and reduce inappropriate bed-based care.
- Give equal priority to physical and mental health.
- Improve the health and outcomes for people with complex and long term conditions through personalised care.

There will also be a certain amount of organisational integration, which will reduce some duplication of back office functions, but the main driver is providing an integrated approach to care between the hospital and the community services.

Somerset's Integrated Urgent Care Service

This service went live in February 2019.

IUC will provide integrated 24/7 urgent care access, clinical advice and treatment.

In summary, the IUC service consists of:

- NHS 111 (telephone and online)
- Clinical Assessment Service
- Face-to-face consultations (formerly GP Out-of-Hours service), and a
- Single Point of Access (SPoA) for healthcare professionals

Provision of Somerset's IUC will be by Devon Doctors Ltd, who have been awarded a five-year contract. They sub-contract the NHS 111 element of the service to Care UK, an experienced provider of NHS 111.

Devon Doctors is a social enterprise, which means it is driven not by the pursuit of profit but by a desire to provide patients with the best-possible care. Devon Doctors has been successfully running an IUC service to more than a million people in Devon since October 2016 and has been providing Somerset's out-of-hours GP service since 30 April 2018.

EXPECTED BENEFITS FOR PATIENTS

The introduction of a Clinical Assessment Service (CAS) will streamline and improve the care that patients receive by enabling appropriate calls to NHS 111 to be transferred to a team of GPs and other healthcare professionals.

The overarching aim of the IUC service is to complete the episode of care, where clinically appropriate, over the telephone or as a face-to-face appointment (deliver a 'consult and complete' model of care). This means that:

- More patients will get the care and advice they need over the phone or online
- Only those patients that genuinely need to attend A&E/ED or use the ambulance service are advised to do so
- If it is not possible to resolve the patient's issue over the phone, they will be directed to the appropriate service / healthcare professional.

New GP Contract from April 2019s

Core general practice funding will increase by £978 million per year by 2023/24.

A PCN contract will be introduced from 1 July 2019 as a Directed Enhanced Service (DES). It will ensure general practice plays a leading role in every PCN and mean much closer working between networks and their Integrated Care System. This will be supported by a PCN Development Programme which will be centrally funded and locally delivered.

By 2023/24, the PCN contract is expected to invest £1.799 billion, or £1.47 million per typical network covering 50,000 people. This will include funding for around 20,000 more health professionals including additional clinical pharmacists, physician associates, first contact physiotherapists, community paramedics and social prescribing link workers. Bigger teams of health professionals will work across PCNs,

as part of community teams, providing tailored care for patients and will allow GPs to focus more on patients with complex needs.

A new state backed indemnity scheme will start from April 2019 for all general practice staff including out-of-hours.

Additional funding of IT will allow both people and practices to benefit from the latest digital technologies. All patients will have the right to digital-first primary care, including web and video consultations by 2021. All practices will be offering repeat prescriptions electronically from April 2019 and patients will have digital access to their full records from 2020.

Online booking of appointments - 25% of all appointments will be bookable on-line.

Improvements to the Quality and Outcomes Framework (QOF) to bring in more clinically appropriate indicators such as diabetes, blood pressure control and cervical screening. There will also be reviews of heart failure, asthma and mental health. In addition there will be the introduction of quality improvement modules for prescribing safety and end of life care.

Extra access funding of £30 million a year will expand extended hours provision across PCNs and from 2019 see GP practices taking same-day bookings direct from NHS 111 when clinically appropriate.

Taunton Deane West PCN (Primary Care Network)

Our PCN will involve ourselves, Wellington Medical Centre and Lister House surgery in Wiveliscombe.

The PCN catchment area will cover the combined area of all 3 practices, taking in a population of 27,221 patients. This is smaller than is ideal (30,000) but given our geography and the lack of proximity to other practices, it is difficult for us to be any bigger. This is subject to sign off by NHS England.

Our objective is to provide new services across all 3 practices, for the benefit of all patients in the PCN.

Dr Rachel Yates and Dr Natalie Lister are undertaking the role of Clinical Director for the PCN on a joint basis.

In the present year, funding has been provided for a new Social Prescribing Link Worker (1FTE) and a Pharmacist (0.7 FTE) who will undertake medication reviews and reconciliations for the GPs.

The PCN will grow over the coming years, with further new staff being brought on board, including further pharmacists, social prescribing link workers, physician associates, first contact physiotherapists and community paramedics. These roles will be phased in gradually over the next 5 years.

Date for next meeting has been set for 30th October 2019 at 6pm.

The meeting closed at 7.15pm

28th June 2019
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