



# The James Cochrane Practice

Patient Group Meeting  
Saturday 18<sup>th</sup> June 2022

## Minutes

### Attendees

Victoria Taylor (VT) – Patient Services Manager (JCP)  
Emma Turner (ET) – Operations Manager (JCP)  
Dr Catherine Munro (CM) – GP Partner (JCP)  
Andrea Dugdale (AD) – Assistant Dispensary Manager (JCP)  
Members of the JCP Patient Group (PG member) x 11

### **1. Welcome and Introductions**

- VT thanked everyone for their time, attendees from JCP introduced themselves.
- ET explained it is no longer mandatory for patients to wear a face covering when attending the practice. However, to help protect others including those more vulnerable, patients should wear a face covering if they have suspected or confirmed Covid-19, symptoms of a chest infection/cough/cold, or are at high risk of infection due to immunosuppression; or we may request that they do not wait in communal waiting areas.

### **2. Enhanced Access**

- **What is it?**
  - VT thanked PG members for reviewing questionnaire sent out ahead of meeting, and for sharing their feedback.
  - Practice currently offers 'extended access' and 'extended hours' across Monday – Friday 6.30pm – 7.30pm, and Saturday mornings 8.30am – 12.30pm.
  - From October, we are asked to provide 'enhanced access' appointments as a PCN (3 Kendal 3 GP Practices) - early in the morning until late evening Monday – Friday, and all-day Saturday. Appointments will be proportionately shared between the 3 Kendal Practices, our proportion to deliver is 18 hours. Appointments must be delivered by prescribing clinicians for half of that time, and can be delivered by non-prescribing clinicians for the other half.
- **How can we get the most out of it?**
  - Purpose of the survey is to understand when those appointments would be most useful to patients.
  - Group highlighted the importance of considering working people and discussed which appointment times would suit them including Saturdays, early mornings and evenings, it was suggested that appointments outside of core hours are prioritised for working people. PG member highlighted that if early morning appointments run late, it may impact on people attending work.
  - Group discussed telephone appointments, CM highlighted how telephone appointments offer a different option of access for working people, and that its good to give patients a choice with a range of appointment types.
  - *PG member asked if Sundays are an option for delivering appointments.*  
ET confirmed that we have not been asked to provide appointments on a Sunday.
  - *PG member raised concerns about staffing levels, as staffing will be spread further across more hours.*  
ET confirmed that we have been delivering appointments in the evenings for several years, but that it can be tricky to cover Saturday mornings. ET acknowledged that member of staff available to cover the front desk is also required for additional hours. ET confirmed practice are funded for the additional hours we currently provide, and funding will continue, there will be no additional funding. There is a national expectation for Practices to deliver enhanced access appointments.
  - *PG member asked if there is an option for practices to work together to deliver appointments, it was suggested this would help deliver appointments across all hours.*



# The James Cochrane Practice

Patient Group Meeting

Saturday 18<sup>th</sup> June 2022

- *PG member suggested the Practice consider age profiles/demographics of those that use the service frequently. Action – VT to feed back to PCN consideration of recognising demographics when making decision to ensure all population groups hit. (Done)*

### 3. Dispensary Pressures

#### • Explanation and Pressure Points

- AD shared that recent years have been difficult- unable to provide service we want to provide for patients because of pressures on the system. Contributing factors – staff leaving but not always been replaced like for like, recent retirement of Medicines Manager with work absorbed by Dispensary, bank holidays and covid sickness, nationwide stock issues.

#### • What have we done to try and alleviate it?

- AD shared changes made to help try to alleviate some pressures:
  - 3 working days for prescriptions, stopped taking prescription requests over the phone (with some exceptions), dispensary phone line open times changing to 9.00am – 5.00pm (Update – change live as of 1<sup>st</sup> July, positive impact on dispensary pressure and no negative feedback as yet)
  - *PG member highlighted importance of acknowledging working people in this change.* AD shared that patients can leave a message online, and that Care Navigator phone line will be available. Will monitor patient feedback.
- Discussion around being inclusive and providing enough options for accessing services as not everyone uses / has access to the internet. PG members shared their experiences of using Patient Access and NHS App, highlighting that only repeat medications are available to order online, making the system less slick if there is a need to order another medication via a different method.

#### • PG member questions / thoughts / comments:

- *PG member asked about the difference between dispensary and pharmacies.*  
AD explained the practice (dispensary) dispense medication to approx. 3500 patients that live more than 1.6km away from a pharmacy. Dispensary team also deal with prescription administration and medication administration for the rest of the practice population (generate prescriptions, send them to the pharmacy, make any changes to medications from hospital letters) **Action – Patient information on dispensing patients/non dispensing and jargon busting.**
- *PG member queried why patients are put onto monthly prescriptions.*  
NHS guidelines stipulate that prescriptions must be issued monthly, CM shared that this rule has been in place as long as prescriptions have and is based on fairness; batch prescriptions can offer an alternative option that keep prescriptions regular, whilst still maintaining fairness. **Action – Patient information on batch prescriptions**
- *PG member highlighted that family member often receives several deliveries of medication today – waste of resource.*
- *PG member shared that she is proud of the dispensary and feels that they have done amazingly well in tricky circumstances. PG members agreed.*

### 4. Patient Engagement Update

- VT expressed that practice are keen to develop the group, asked PG members if there is an appetite to support VT in running the group (minutes, agenda, chair) **Action – if any members are interested, please let VT know.**
- CM shared information about 'Practice Champions' which was adopted at her previous practice and another practice in Stockport. Created a bridge into community – linked with Social Prescribers, walking



# The James Cochrane Practice

Patient Group Meeting

Saturday 18<sup>th</sup> June 2022

group, singing group, community events, fundraising, met regularly themselves and fed back to the practice.

- Current position – practice are evaluating how we can further develop 2-way dialogue with patient population, understand what will work well for OUR patients – how can we make sure that we are meeting the needs of all population groups (older people, people with long term conditions, families, working people, vulnerable people, people with poor mental health). Acknowledged there is a lot of community connection that happens in Kendal, linking into that will help us know we are meeting the needs of all population groups.
- ET asked if PG members can have a think about if they are connected to parts of the community and if they have any ideas about how we can reach them. PG members reflected on how community has changed over the years.
- Group evaluated opportunities that currently exist in practice for connecting with patient groups (e.g. baby immunisations each week, flu clinics each year) – is there an opportunity for PG members to support flu clinics, or for online access / NHS app tutorials **Action – VT to explore (Update – VT has contacted Age UK to explore)**
- *PG member suggested working alongside other GP Practices to explore engagement.*
- *PG member asked for demographic information of patient population (age groups) Action – VT to provide.*
- *PG member reflected that sometimes practice team speak too quickly on the phone Action – VT to feed back (done).*
- Discussion about patient feedback, VT explained that practice will soon be using ‘I want great care’ platform to gather patient feedback. PG member suggested the group review patient feedback at meetings and explore and make improvements together. Group reviewed IWGC poster and reflected that “did you get great care today?” seems exaggerated and is a closed question, suggested change to an open question such as “how did we do today?” or “tell us how your care was today”. Group reflected importance of ensuring patients know that feedback is anonymous **Action – VT to add patient feedback to next agenda**
- PG member suggested contacting patients directly to ask about their experience of the practice, or having a box by the door as patients leave, ET reflected that there’s lots to consider and maybe something patient group can support with in the future.

## 5. Next meeting

- PG members reflected that Saturday meetings are helpful, with a frequency of 3 months.
- Next meeting to be scheduled for a Saturday morning in September.