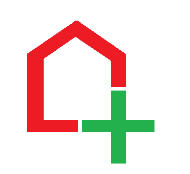
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**Peel House Medical Practice – Part of Hyndburn Central PCN**

**Patient Participation Group Meeting Minutes**

Date: 13th June 2023

Apologies: Dr Eccles

In attendance: Katy Tregartha PHMP, David Woodcock, Geoff Evans, Judith Halstead, Patricia Ramsden, Ann Parkinson, Matthew Rowe- Health and Wellbeing Coach, Phillip Cross Health and Wellebing Coach, Carolynne Nelson Health and Wellbeing Coach, Feeraz Begum – Social Prescriber.

**Key notes:**

Katy opened the meeting with round table introductions and an explanation of ARRS roles. ARRS stands for Additional Roles Reimbursement Scheme. These are staff employed by the PCN and work in Practice. The ARRS roles are funded for specific roles only, for instance can be spent on Health and Wellbeing Coaches, First Contact Physios and pharmacists but not GP’s. At the last meeting the group expressed an interest to know more about these roles and intend on running the patient survey around these roles and patients awareness and willingness to see them.

Matthew, Phillip and Carolynne introduced themselves to the group and explained a little about their role. The H&WC are not clinical and do not hold a clinical registration. They support patients make positive lifestyle changes and advise on exercise, weight management, altered sleep, low level mood issues. They also help patients to improve long term health conditions such as hypertension and diabetes by making lifestyle changes. The aim is to help patients live happier healthier lifestyles with the conditions they have and to prevent medical conditions from developing and progressing.

The group asked if patients are seen or if over the phone, Matthew explained that he does a mixture of telephone and face to face appointments and was looking at video consults but wasn’t sure what patients would think about that. Discussion around asking patients how they would prefer to be seen, can form part of the survey.

Feeraz spoke about her role as a social prescriber, social prescribers offer support to patients who need help in their daily lives. For example; if a patient is socially isolated or lonely or lacking in confidence they will help them find activities and groups to join. They can offer advice and guidance on family and home life, housing, money benefits and debt, practice support, help for carers.

Katy explained that there are more ARRS roles, we have first contact physios, pharmacists a care co-ordinator and mental health practitioners. There are patient leaflets in the waiting room about the ARRS roles and although appointment uptake is sloe for the social prescribers and wellbeing coaches the leaflets are refilled weekly so patients are taking them. Patients can book in directly with FCP’s, mental health practitioners, H&WC and SPLW.

We need to be utilising all ARRS staff and work is needed on promoting these appointments to patients which will ultimately increase access. Last year the survey was around telephone access and the new system is in place. The practice did some quality improvement work around the uptake of the first contact physio appointments and that had good results. Some H&WB and SPLW clinics are running empty, there is scope for the H&WBC to be involved in enhanced health checks but we need to be pushing these directly bookable appointments so patients are aware of what is available.

All of the patient group happy to come in and hand patient surveys out, would like some leaflets available to be able to give to patients about the services. Discussion around how patients prefer to receive information, most not keen on telephone message as feels to long, however Katy stated that this is a sure fire way of getting a message out, question in surgery to be added around how patients want to be informed about changes in services and appointment availability.

We need to be utilising all ARRS staff and work is needed on promoting these appointments to patients to improve access. Some H&WB and SPLW clinics are running empty, there is opportunity for the H&WBC to be involved in enhanced health checks but we need to be pushing these directly bookable appointments so patients are aware of what is available.

**AOB’s**

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| Action | Owner(s) | Timeframe |
| Survey to be written | KTr | 31/07/23 |
| Dates to be set for survey to run and patient group come in to hand surveys out. | KTr | 15/08/23 |