Meeting date : 21.05.2024

Attendees: PM, NT,GC,BR,DW,JG,PG,FD,MN,

Apology: MG,BH,SH

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| Agenda  |  | Discussion  | Action/outcome  |
| CQC outcome  | PM announced that Vale Practice has been awarded a "Good" rating in all areas of CQC monitoring. The full report is accessible via the CQC portal. | **BH**: Raised a query about an outdated report on the website. The PM clarified that the new report has indeed been uploaded on the practice website.**DW**: Inquired about two other significant incidents mentioned in the CQC report. NT explained that it is common practice for general practices to discuss and learn from such incidents as a team. These incidents may be near misses and do not necessarily result in severe outcomes. The important aspect is that the practice has learned from these incidents, reported them to the appropriate organisations, and put protocols in place to prevent recurrence. | N/A |
| Covid booster vaccination  | Members reported receiving two separate invitation emails for the COVID booster vaccination, each showing different locations for booking, causing confusion to patients.  | PM explained the formation of the Federation and its crucial role in delivering COVID vaccinations. The Federation was established to represent general practices in Haringey, successfully bidding on behalf of practices to arrange local services such as ENT, Gynaecology, and COVID vaccinations. **Reason for Dual Invitations**: PM suggested that the dual invitations for COVID vaccinations might be due to two separate contracts. One contract was handed over to the Federation to manage on behalf of the practices, and the other was given to pharmacy teams. This could explain why different locations appear when using different invitations. Offering COVID vaccines at the practice level is not feasible due to the economy of scale achieved by the Federation.**Flu Vaccine and Covid vaccine Issues**: The PM also discussed complications around offering flu vaccines alongside COVID boosters. Practices were informed of these changes recently, making it difficult to adjust their flu vaccine orders, resulting in a surplus of unused vaccines. | N/A |
| Appointment booking  | DW asked about whether patients can book appointments in advance instead of having to call on the day for urgent appointments and how the practice manages continuity of care. | NT explained the steps the practice has taken to improve continuity of care. The practice has limited pre-bookable appointments, and doctors have been given follow-up appointments that they can book themselves.FD discussed the pre-COVID method of booking appointments up to three weeks in advance. The PM explained that this contributed to long waiting lists and increased frustration among the majority of patients, as well as a higher rate of DNAs (Did Not Attend). With the current same day booking system, DNAs have significantly reduced, which has also increased patient safety.Achieving continuity of care all the time is challenging as all our GPs work part-time. Reception staff try to book patients with the same GP if there is an ongoing issue or if the patient requests a specific GP, provided the GP is available. However, this is not always possible.The PM clarified that same-day appointments are not solely for urgent matters; they are simply a method of booking. Patients should not hesitate to call for same-day appointments, regardless of whether their condition is urgent. | The practice is trying to increase the number of pre-bookable appointments, but this largely depends on our clinical capacity.The PM explained that we are actively recruiting and have a rolling advertisement in place. We have successfully hired a new GP who will be starting in August 2024, as well as a new GP trainee, which will allow for more capacity. However, the winter months are exceptionally busy for GP practices.We are aware that staffing levels will fluctuate, and we have been meeting our demand through regular locum staffing. Some of our locum GPs have been with us for over 10 years.  |
| Practice Website  | BR mentioned that some outdated content on the practice's website needs updating.BH pointed out that the old pictures of the practice need to be updated. | PM and NT agreed that the content is out of date and would welcome any assistance with updating the PPG page of the website. | BR to help with content. PM to update photos on website  |
| Improving primary care safety strategy  | DW inquired about what the practice has implemented to improve primary care safety. | PM clarified that the strategy is not new, having been in place since 2019, but has gained more attention post-Covid due to increased focus on learning from incidents. Vale Practice has taken significant steps to ensure patient safety, including reporting safety incidents to the national learning portal to identify patterns on a national level.PM and NT emphasised that patient safety is a core aspect of general practice. They continuously review current protocols and engage in new schemes to align with the national strategy. | We have listed some of the steps to make sure we are aligning our selves with primary care safety strategy: Training and education of staff: We are investing in ongoing training and education for all clinical and non-clinical staff to ensure they are equipped with the latest knowledge and skills in patient safety. This includes mandatory e-learning modules and regular in-house training sessions focused on critical areas such as medication safety, infection control, and emergency procedures. Clinical incident reporting:To foster a culture of safety are constantly improving our incident reporting systems to make it easier for staff to report safety concerns and near misses. We have started to use nation patient safety reporting tool to report incidents. Annual complaints and Significant event meeting carried out at practice level. We are particularly focused on addressing areas highlighted by the NHS strategy, such as medication safety and the management of long-term conditions. Specific actions include: * Regular medication reviews to prevent adverse drug events. Carrying out audit in responses to medicine alerts.
* Personalised care plans for patients with chronic conditions to ensure consistent and coordinated care.
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| AOB | General discussion about challenges facing primary care.  | PG: noted the changes at Vale Practice over the years, particularly regarding appointments and continuity with the same GP, mentioning previous partners.PM explained that the patient population has grown significantly from around 5,000-6,000 eight years ago to now over 11,000. The time spent on record keeping has increased due to more rigorous protocols and documentation requirements, which impact consulting time. Additionally, declining health literacy among patients has presented challenges.The practice has also faced challenges in retaining newer and junior GPs. Discussed inclusion of patients in digital primary care to enhance the overall experience and current challenges patients are facing in other practices.MN: Appreciated the steps practice has taken to increase nursing capacity in the short time. He also his experience regards to appointment at Finchley memorial hospital.  |  |