

TELDOC

Patient Participation Group Meeting

Wednesday 16th October 2019, 12.30-2.30pm, Oakengates

Meeting Notes/Actions

Attendees: Christine Choudhury (Chair, CC), Doreen Elliott (DE), Dr. Ian Chan (IC), Soei Meadows (SM), Tania Holt (TaH) and Toni Haines (TH)

Note Taker: Tally Chahal (TC)

Part 1 (12.30 – 1.30pm)

ITEM	SUBJECT	ACTION
1.	Apologies: Elaine Edwards (EE), Brenda Yarnold (BY) and Roger (R).	
2.	Same Day Access Presentation (Amie Morris – Advanced Nurse Practitioner): AM presented the NHS plan to the group and explained how Teldoc is a super practice. Teldoc has a same day access hub which has been extended to 5 days a weeks from June 2019. The clinical workforce is made up of various clinicians, collectively called Advanced Clinical Practitioners (ACP). The group were advised that any patient that requires an urgent appointment can see an ACP; <ul style="list-style-type: none">• Advanced Nurse Practitioners• Advanced Paramedic Practitioner• Paramedics• Physicians Associates• Pharmacists. As a patient, when you call to make an appointment with the GP you will be assigned to see the most appropriate clinician. All ACP's can refer to specialities and request investigations. All ACP's are supervised by a GP. The group were pleased with the presentation as it was easy to understand and well explained. Action: CC to look at broadening membership and to look at making patients more aware. The information is all on Teldoc's website should anyone need to refer to it. CC will be attending a scrutiny meeting tomorrow to look at the 6 stages assessment of children. The CCG are pushing for this assessment. Demand of primary care and A&E attendances has increased dramatically which is affecting funding.	CC
3.	Teldoc Update: IC advised the Board have been planning same day access appointments for a number of months now and will continue to develop and evolve this. Adjustments will need to be made for the winter period as we expect to see an increase in patients with	

TELDOC

coughs, colds, chest infections etc.

At Teldoc we can do finger prick tests that will instantly tell us if a patient has a chest infection or not. IC advised the Board are planning to build this into the Same Day access Hub to streamline the process.

IC advised the group we are not advertising the fact that we offer a Same Day Access Hub as we need to ensure patients don't use us as a walk in centre. All our appointments are accessed through the call centre.

CC queried if there was still a big increased demand in winter compared to the other seasons. IC advised the demand for services primary and secondary continues rising although Winter is worse. We continue to have patients who rather than contacting us go straight to A&E as at times they think they will be seen quicker. We predict this will only get worse next year unless we make changes. We are looking to increase access in order to increase capacity which will be better for the patients. Teldoc has the highest number of calls to 112. We strive to continue to innovate and make processes better which will result in happy patients and happy staff. EE is working on Quality & governance. These changes will not happen overnight but are and will continue to happen gradually to ensure we are working smart and patients are not affected.

Diabetic care – IC has made a lot of changes with regards to diabetic care which is one of the main killers. We have now bolted down a new pathway but changes still need to be brought in gradually. We have our own diabetic nurse who specifically deals with diabetes only. We have around 3,000 patients who are on our register for diabetes. Once we have completed the work we need to do for diabetes we will then work on our plans for other chronic disease management.

The new call centre has been approved by the regulators and will come into effect within the next few months. We are yet to find and agree on new premises. We are mindful we cannot have any closures or disruptions in the call centre during this transition.

We plan to close three sites which include Highfield, Lightmoor and Aqueduct.

The new centre will be called the Integrated Care Navigation Centre. This will enable us to co-locate with other services such as Social Care and community care.

There has been a delay as we were hoping to have the new call centre ready by Christmas but this will not be happening this year. IC confirmed Lawley will not be moved it is just the call handling function which will be moved.

TELDOC

4.	<p>Online Access: CC advised there has been no movement in the PPG since the end of Summer. This is partly due to there not being many attendees at the last PPG meeting.</p> <p>Teldoc were asked to provide the group with training on how to use the online access system. At the moment around 23% of patients have registered to use the app but the actual usage levels are a lot lower than 23%. Action: IC to explore arranging this training session.</p>	IC
5.	<p>PPG Leaflet: The group were presented with a draft leaflet which once agreed will be printed and left in reception area of Teldoc sites for patients.</p> <p>Action: The group will review the leaflet in part 2 of this meeting and will notify Teldoc of any recommended amendments.</p>	CC
6.	<p>AOB: The group raised concerns regarding receiving emails and meeting invitations for the PPG meetings. CC noted down everyone's email addresses and contact numbers to ensure she has everyone's correct details.</p> <p>The group were informed Roger will be resigning soon. Action: Teldoc were requested to send a letter thanking Roger for his service over the years.</p> <p>IC advised the group that he is working with EE to chair monthly MDT meetings. These meetings are in place to look at patients with high use of services, including A&E attendance and for us to discuss what we can do to help them. The meeting is attended by various external agencies in the hope that if we can identify that a patient has care issues or mental health issues, the right people will be around the table to look into providing the patient the care and support they need. In the past when there were not so many patients, it was common for GPs to know a lot about their patients including their history and family etc. Due to the demand increase it is not possible for GPs to know this information about every patient. The MDT is therefore in place to ensure we are aware if a patient requires additional help. The group were very pleased to hear Teldoc are doing this.</p>	IC/EE

Part 2 (1.30 – 2.30pm)

Next Meeting: Wednesday 20th November, 12.30-1.30pm, Malinslee (Conference Room)