**MUCH WENLOCK & CRESSAGE PATIENTS’ VOICE**

**Summary of Meeting for Website**

Telehealth have approached chairs of PV groups re a 12 month project “Florence” with money from PM challenge fund re using text messaging to support patients with a range of conditions e.g. Chronic obstructive pulmonary disease (COPD), hypertension, asthma, diabetes. Nine practices inc MW&CMP purchased a number of text messages for patients to use and there has been a meeting organised via Shropdoc. We’ve been allocated 3000+ text messages. Clinicians have to decide whether the system is appropriate for particular patients. MW&C particularly looked at diabetes but haven’t yet found anyone they thought suitable to try it out with. The scheme started in July with 19 patients involved in July to Sept using 200 texts across all of the practices in the scheme. So far only been used for a very small number of patients with relatively small number of texts sent out. There was some discussion on this project but it was found difficult to identify particularly significant benefits relative to the work in managing it via the Practice, especially for a practice with a more elderly population. The group thought it appropriate that the practice should keep an open mind about pursuing this further but could not see substantial benefits as the project currently stands.

The Practice is currently struggling with appointments availability. Pre-bookable slots are now booked up until the beginning of December. There has been substantial discussion with the GPs. As a short term solution 32 appointments per week have been added through the use of locums and there are plans to add further appointments later in the winter. It was noted that the Practice received 40 additional patients from Broseley in last 4-5 months and some of these have quite complex issues.

The Practice is in long-term discussion with other practices to look at other ways of managing appointments.

Sister Webber offers“Minor Ailments Clinic” appointments on a Tuesday and Thursday at Cressage and the Practice is hoping to develop this further in the future. Also at an early stage of looking at possibilities of using a community pharmacist and also a physiotherapist to address some of the demand.

It was suggested possibly adding the option of a telephone appointment online patient access to deflect some doctor appointments and Sarah will look at this.

The Practice is losing a nurse for a month in Jan other nursing staff are under taking extra work.

A Macmillan nurse is now available to work with patients and offer support following treatment - Dr Gill Clements.

There has been a meeting with two of the local MPs re lack of equity between rural and urban areas. The point was made re benefits of a single CCG for the area and there seemed to be some possibility that this might be under consideration.

Proposed increases to hospital car parking were discussed.

Ear syringing is stopping in some practices with patients having to have them done privately at cost of £65. MW&C are still doing it.

Many practices are disappointed with uptake on Flu – including us.

The need for shingles and pneumonia vaccinations was discussed – the Practice Manager will check which age groups / criteria this applies to.

Shropdoc is short of money and find themselves providing services they are not being paid for. They are no longer providing a GP or nurse practitioner at the Urgent Care Centre in Ludlow and Bridgnorth out of hours. Currently in discussions with CCG re further financial assistance.

Future Fit pre-consultation business case is still being worked on ready for public consultation which was scheduled for October but now pushed back further into the future.

The group was represented at a meeting of the South East Patients’ Forum with Simon Freeman who is the Chief Accountable Officer of the Shropshire Clinical Commissioning Group. Simon outlined some of the issues around A&E, particularly in attracting consultants for A&E and also nurses and midwives. Issues were raised re community beds and with discharge from hospital. A maternity services review is currently under way and they are comparing how ours compares with others around the country. There are concerns over the viability of the minor injuries units. Cancer services were reported as being good. There is very low performance in A&E, complex care, continuing health care and mental health. Concerns also about lack of new practitioners coming into the service and also with GPs not wishing to become partners.