

## THE ELMS MEDICAL PRACTICE

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### AGENDA

**Patient Participation Group  
The Elms Medical Centre  
Tuesday 31 October 2023: 1pm - 2pm**

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**Present JB MG CC RW JL HL**

1. Apologies RC JS
2. Minutes of Previous Meeting. Approved.
3. Matters Arising. None.
4. Strategic Planning. Please see Appendix (Page 2).  
JB explained priorities in local health economy per presentations by senior leaders. EMP is engaging with management consultants through the NHSE funded General Practice Improvement Programme (GPIP). Specifically, we are mapping demand & capacity, exploring care navigation with a directory of services, potentially updating our website, and promoting digital patient facing services.
5. Primary Care Network (PCN) Structure & Management  
Heidi has joined the PCN as Manager and Digital & Transformation Lead.  
The membership of the PCN is expected to change in the near future.
6. PCN Additional Roles Reimbursement Scheme (ARRS) Staffing: Clinical Pharmacists, Physician Associates, Paramedic, Mental Health Practitioner, First Contact Practitioners  
One FCP is leaving, and a replacement has been requested.  
A mental health practitioner (MHP) is undertaking dementia & serious mental illness reviews. A further MHP is seeing Elms' patients for general mental health problems.
7. Elms Staffing – Drug Safety Team  
The Elms has strengthened procedures to safely issue prescriptions by appointing a Drug Safety Lead, and a replacement Clinical Pharmacist. The concept of short-scripting was discussed to encourage compliance with monitoring requirements.
8. Covid Vaccination Programme Update  
Capacity and constraints were discussed. Covid vaccination has been delivered to the housebound, care home patients and older patients, according to local capacity, with the balance of vaccinations to be covered through the national system.
9. Increasing Capacity (1): eConsults / eHub  
The MCH eHub eConsult system was stopped suddenly previously due funding issues. Reintroduction is planned on 1/11/23 using PCN funds and underutilised ARRS funds across K&M.

RW advised of an error on the website advising that eConsult is available 24 hours a day.

10. Increasing Capacity (2): Interface Clinical Pharmacists for Asthma/COPD  
Work has been commissioned through ARRS to increase capacity for asthma & COPD reviews.
11. Enhanced Access (EA).  
EA continues to be delivered at 1 hour per week per 1,000 patients through a multidisciplinary team including GPs, ANPs, a paramedic, a MHP, a clinical pharmacist, practice nurses and an HCA.
12. Education: GP Trainees, International Medical Graduates, Medical Students  
The practice currently has two trainee GPs, and an International Medical Graduate. Year 1 medical students from Kent & Medway Medical School attend over 6 weeks across the academic year.
13. Any Concerns or Queries.  
None.
14. Any Other Business.  
Discussion re section 106 monies linked to local housing developments.  
Kent & Medway Diabetic Eye Screening Programme (KMDESP) wrote to the practice recently asking if we had any insight into the non-attendance of some patients. The group felt that geographical considerations may be relevant, but no specific issues were known.
15. Date of Next Meeting.  
To be confirmed.

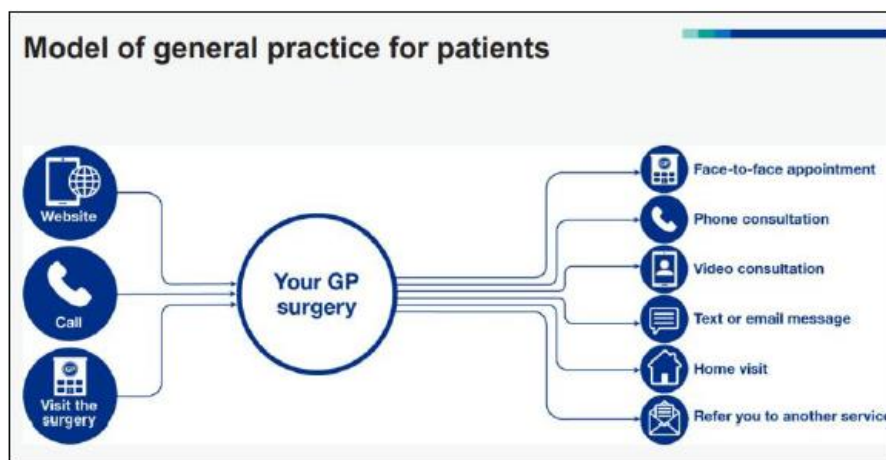
## Appendix

### Strategic Planning

#### NHS Priorities

1. Empower patients
2. Implement Modern GP Access
3. Build Capacity
4. Reduce Bureaucracy

Revised model of General Practice:



Our Priorities in General Practice Improvement Programme:

1. Demand & Capacity Data. Apex & GPAD use.
2. Care Navigation. Build Directory of Services. Community Pharmacist Consultation Service (CPCS). Staff training in care navigation.
3. Website Maturity. Training on updating website & review of other sites.
4. Use of Digital Patient Facing Services. Communication & promotion of services. Staff training.