

**North Tyneside CCG Patient Forum
Innovations Working Group
Thursday 28 November 2019
2.00pm
Room B3
Linskill Centre
Linskill Terrace
North Shields**

Notes

Attendees

Sandra Gillings	Priory Medical Group
Susan Dawson	Priory Medical Group
Peter Maitland	Collingwood Surgery
Steve Cattle	Swarland Avenue
Steve Roberts	Lane End Surgery
Judy Scott	Whitley Bay Health Centre
Pat Bottrill	49 Marine Avenue
Patrick Mayne	Collingwood Surgery
Marc Rice	North Tyneside CCG
Wally Charlton	North Tyneside CCG
Michele Spencer	CHCF

Apologies

Ray Calboutin	Park Parade Surgery
Phil Howells	Collingwood Surgery

Notes of last (31 October 2019)

Agreed as a true record.

It was agreed members came up with a lot of very good ideas and are all potentially projects for the future with each having a focus and direction.

Questionnaire feedback

Marc thanked members for their responses and practice websites are felt to be in need of development to make them more user friendly. The new NHS guidance will be addressed with practices in the New Year.

49 Marine Avenue PPG members are looking at this during their next meeting and it seems one of the difficulties in updating their website is that this has to be carried out by Northumbria Primary Care. This may also apply to Spring Terrace.

Members felt all practice PPGs should raise this in their own practice and ideally, unless specific to one practice, there is one generic change, and this is cascaded to all practices. Patient training on website navigation is considered a good idea.

Practice websites must all include an online platform for booking appointments and also the publication of GP salaries, beyond this it is down to practice choice. Members felt to make some of the websites more user friendly it may be necessary to start from scratch with patient involvement. Websites need not look the same but should have consistent and accurate messages for patients.

Members also considered the role of Primary Care network directors and whether they could have influence over practice websites, it was known North Shields PCN is aiming to make improvements.

Two link workers are now in place with the other two about to be appointed and they will work across the Primary Care Networks, they could also be involved with the training.

Website QR codes would be a good way to cascade self-care and other themed messages. A step by step video for patients on how to book appointments online for example would also be a good idea.

Improved digitisation in practice waiting rooms would benefit patients. It was confirmed Wally as part of his IM & T role is working with partners on governance.

It was agreed there have been many new initiatives in practices and they have been very positive. Upgrading software brings its own challenges as contracts for this are often national with no local control.

It was felt there was a need for GP champions for initiatives.

It has been the choice of practices to have either information screens or integrated with patient appointment calling.

There will be a review of the Patient Forum working groups in the new year and likely to be a development session during February. The purpose of the groups and overlapping workplan issues are in need of review to ensure members, as volunteers don't have so many demands on their time.

Task and finish groups, with co-produced initiatives such as the falls group would be favoured.

LIVI-meeting the digital challenge

In the GP Five Year Forward View it states by 2021 every GP practice must provide video consultations.

Currently there are three main providers for this service; Babylon, Push Doctor and LIVI.

LIVI is the preferred provider for a 12-month pilot in North Tyneside.

The benefits of LIVI are positive feedback from use in Birmingham and Sussex, patients stay registered with their own practice and a 15-minute consultation costs around £21, a GP appointment is between £30-£56 currently.

The governance is approved through the GMC and is additional to what is provided by GPs.

Members considered the background information shared with them and made the following points;

How safe is patient data-it was explained that the data stays within the existing patient clinical system.

Mobile phone connections must be explored to make this work and if patients don't have a smart phone they are disadvantaged.

It is a form of triage.

Members agreed the timing and creation of this working group is advantageous and they would be keen to be involved with any LIVI workshops to explore some of these issues they have raised today.

A questionnaire to establish patient views could include the following questions

What is your current preferred way of accessing GP appointments?

In person

By telephone

Would you consider an online video call appointment?

Yes

No

Maybe

What do you think the benefits for you would be?

Quicker appointment

More convenient

What do you think the drawbacks would be?

Not having access to one of your GPs

Not being sure of how your information is recorded

How easy do you think this would be for you?

Very easy I have a smart phone

Not easy I don't have a smart phone

Would you be confident about a video call?

Yes

No
Maybe

Do you feel video calls increase patient choice?

Yes
No
Maybe

Any other business

It was agreed the meeting should take place bi-monthly and Claire Howard, North Shields Wellbeing Facilitator and Ruth Batty, SIGN Network North Tyneside Council should be invited to attend.

Actions

Provide members with a CCG staffing structures list
Members need a chart of their involvement and achievements.

Dates and times of future meetings 2020

To be decided

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