**LIMEFIELD SURGERY**

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Statement from Casey Hancock – Practice Manager

I am happy to announce that our Christmas raffles raised over £200.00 for the hospice. Many thanks to those who contributed the gifts and many thanks to all for buying raffle tickets.

Welcome to Emma di Francesco who started with us in January and is our new Practice Nurse – she will work Monday Wednesday and Friday and has already proved to be a great asset working alongside Pat Toner.

By now you may have met our newest members of the admin team – Hirra and Nazmeen – both ladies have integrated into our team wonderfully and are lovely with the patients.

On 1st February we started our new Telephone Appointment system and so far this has been welcomed by those patients who have completed our survey. It has been a difficult transition period but hopefully when everyone is used to it and our patients become familiar with the system it should prove to increase access and quality of service. This decision was not taken lightly and the consultants who have introduced the new system have a wonderful success rate in previous surgeries.

Casey Hancock

Practice Manager

**Minutes of Patient Participation Group Meeting**

20th January 2016

**Present**

**Patients:** Joe Slater, Tony Helm, Richard Reeve, Tom Clark

Apologies: Debbie Tunnicliffe, Ann Shuttleworth, Sue Cumming, Christine Cooper

**Practice:** Casey Hancock

**Wellbeing Presentation**

The Group welcomed Sharon Connelly and Alison Abbott to the meeting to talk about the Blackburn with Darwen Borough Council Wellbeing Service. We had been requested to invite the service to discuss exactly what they offered by one of the PPG however Casey had arranged with Sharon to hold clinics at Limefield before Christmas. These are on Monday mornings and appointments can be made at reception or directly with the wellbeing service.

The Wellbeing Service offers free help and support to improve your health. It is a relatively new service that brings together a wide range of services into one single access point to make getting help easier. It is not just about healthy lifestyle services; they know that poor housing or money worries can affect emotional and physical health just as much as smoking or not exercising enough.

* Safe and heathy housing
* Quit smoking (We have Paula Dobson holding smoking cessation clinics at Limefield who is also a member of the Wellbeing team)
* Want to lose weight.
* Want to be more active
* Want to eat healthily
* Want to cut down on alcohol

They can also give support with employment, training, welfare, benefis and debt.

Phone Number is 01254 682037 – visit [www.refreshbwd.com](http://www.refreshbwd.com) – email [wellbeing@blackburn.gov.uk](mailto:wellbeing@blackburn.gov.uk).

All our clinicians can advise you and refer for any of the above services – they can also help with isolation, loneliness, getting involved in local community activities etc to relieve stress and anxiety. You may also refer yourself with or without discussing with the GP - the forms are in our reception areas or simply contact by email/phone or make appointment on reception directly into Sharon’s clinics.

The GPs do not always have time to discuss these “healthy lifestyle” changes when concentrating on the current illness; however the appointments with Wellbeing at Limefield are 60 mins long which is ample time to cover any aspect of improving a healthy lifestyle. If the Wellbeing counsellors feel a patient needs referring onto another pathway or need help in a social services way they have all the contacts and pathways to help advise and guide a patient to the help they may need.

Members of the group present had taken advantage of the gym and keep fit regime through Wellbeing and were very impressed. Although Richard did say he had experience of the service but felt a little let down when the 12 weeks had finished – the ladies said there was an extended service and the Refresh website gave details. RR requested Casey put these details and links onto Limefield website which has been done.

The Group enjoyed the presentation and requested Casey to organise a Dementia service representative to attend the next meeting. They all agreed that this kind of information about local services was very useful.

**Agenda Items – Review achievement by the Group**

There has been previous discussion with members of the group and Casey regarding the purpose of the Group and what benefit they brought to the Surgery. Richard felt that doing the patient survey in previous years had been beneficial and suggested doing another one. The conversation about the group not being an example of the patient demographics is an old one and certainly one every surgery has had. The fact remains that for various reasons it is near impossible to have a Patient Group which represents the age and ethnicity of the cohort of patients.

It is questionable as to how many surveys we can inundate patients with. The consultants for our new appointment system have been running their own surveys on the system. There has been a nationwide survey (which resulted in our surgery coming 3rd in our area with above average results) and there is the Family and Friends questionnaire which is part of the contract and continuous.

This will be on our Agenda for April and we can perhaps put an internal Survey together which includes asking about the new appointment system etc. Richard has offered to help with this.

The consensus was that the Group could be valuable and should continue to meet.

**New Appointment System**

Since the meeting this has now been introduced. When a patient phones for any kind of appointment they will be asked 3 simple questions from reception staff – what is the problem, how long have you felt like this and have you tried home remedy/pharmacy (the latter only asked if appropriate). The patient will put onto a telephone appointment list and the clinicians phone back within couple of hours. They will then decide the course of action.

This system is being slowly introduced throughout the UK to improve access to doctors. The statistics show that many appointments made with the GP are unnecessary and many can be treated at home with paracetamol etc. The GP will ascertain the seriousness of the illness and either recommend home remedy or will make appointment to see you that same day.

**PM Challenge Fund**

The walk in centre which is planned for RBH is still in planning stage. The whole of the NHS at present is trying to keep patients out of A&E as much as possible and get patients to visit their GP initially. The new hub will sit on the front reception area of the RBH and will triage patients before they get into A&E.

Another funded service is the four spokes around the area which can see our patients out of hours on evening. This is for GP surgery staff to book the patient if they feel they require to be seen but not necessary to go to A&E.

**Notice Boards**

The Group thought the notice boards were confusing and messy. Casey offered to reassess and have subject headings on the boards.

**Date of next meeting**

Wednesday 6th April 2016 at 1.00pm Limefield Surgery