

NOTES FROM THE OPEN DISCUSSION AT THE PUBLIC MEETING 1ST OCTOBER, TARPORLEY COMMUNITY CENTRE

Nigel suggested areas that patients might like to consider now and in the future, e.g.

- How are the proposed administrative changes described earlier going to impact on patients?
- There needs to be greater awareness of the wide range of professionals who are currently working with the Practice and of those who will be involved with the Practice in the future, e.g. Physiotherapists, Pharmacists etc.
- It is important that all the professionals involved in the practice and those working around the community promote joined-up working at a local level, e.g. planning and ensuring care outside hospitals.

Discussion points raised by other patients and professionals:

- Tarporley is a rural practice and as such presents specific challenges, e.g. it covers a large geographical area and its patient population is increasing in age. Given that some patients therefore find it difficult to visit the surgery, are there any ways that the Practice can give additional support to these patients?
There are no plans at this stage to introduce “tele-care” (visual consultations) although the practice does promote the use of E-Consult, email contact and phone consultations as well as face-to-face visits. Many patients now have their own blood-pressure monitoring machines and are therefore able to share their own readings with the medical professionals on a regular basis.
- The new Medical Centre in Kelsall houses a “Well Being Hub” which is not NHS funded. Are there any plans for Tarporley to share this resource?

Discussions are currently underway with regard to sharing activities and resources at Kelsall though there are no definite plans at present. It is certainly an interesting model which could be explored.

- How are the new services, e.g. Social Link Workers going to be funded?

There will be some funds from the NHS, e.g. the Physiotherapist is 70% funded, but the remainder of the costs of these services will have to be met from Practice funds.

- Surgery waiting times have been considerably reduced following the decision to increase consultation times from 10 to 15 minutes. This has taken pressure off the GPs as (they are less likely to over-run and acquire a back-log of patients) as well as improving the service for patients. A very successful outcome!
- Do patients receive regular health-checks and screens? Are they cost-effective? Do they make a difference to peoples' well-being?

All patients aged between 40 and 74 are entitled to an NHS general health-check every 5 years. After the age of 74 it is assumed that patients' health will be monitored during general GP consultations.

- What influence do GP surgeries have on NHS providers?
It is envisaged that there will be a fully integrated partnership between all NHS providers.

The aim of the Rural Alliance is to provide advice and support, given the specific needs of local communities. It will demonstrate an awareness of the different needs of rural communities as well as ensuring there is a level of standardisation.

The Rural Alliance also presents great opportunities for Patient Participation Groups to become involved in developing projects and specific interests relating to their areas and ensuring that the patients of their practices are represented at that level.