



## IMPROVED ACCESS

Dr Furn Davies reported that all Practices and their GP Provider organisation GDoc Ltd are working collaboratively to provide additional GP Improved Access appointments across the Cluster. The pilot has experienced some difficulties in fulfilling all sessions, believed in the main due to the rurality of the Locality and Locum/local GP availability.

There is a considerable amount of work being undertaken to improve the situation. Locum GP recruitment has proven to be problematic and in the interim, locality GPs are working 6.30 to 8.00 pm on a rotational basis to help alleviate the situation, however, this is not a long-term solution that can continue.

### Communication

It was reported that there was very positive feedback to the first edition of this Newsletter; those who had put it together were thanked. It was agreed that this will be an ongoing publication to assist with disseminating the information discussed at this meeting.

## Clinical Pharmacists

Dr Furn Davies reported that the current clinical pharmacist scheme has been a resounding success with prescribing savings of approx. £400,000 across the locality. In answer to a question raised as to where the savings were made: the support of the clinical pharmacist has meant that cost efficient medications, of the same quality, can be offered to patients and the clinical pharmacist has the resources to review those patients on medication to ensure these are the most beneficial. This scheme is assisting Practices with their resilience and sustainability.

He was pleased to confirm that an additional clinical prescribing pharmacist has been appointed who will be able to offer face-to-face clinics/interaction with patients to review their medications, thus saving GP time in this area.

One of the Clinical Pharmacists has already commenced some reviews of care home patients at Northleach Court and Jubilee Lodge. It is planned for the newly appointed Clinical Pharmacist to review the other care homes in the Locality regarding their processes for ordering medication and to see if there is any de-prescribing / adherence to formulary advice which can be undertaken.

The Locality are also hoping to introduce a review of those patients with chronic pain and potentially adopt successful protocols that are already in place in another Locality to improve support for these patients.

**Public Health England:**

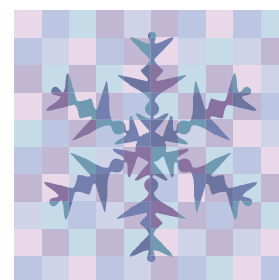
Dr Furn Davies reported that the majority of the flu vaccinations will be made by the same manufacturer in 2018, which may have an impact on delivery schedules. He stressed that this situation was not the Surgeries' choice and they will be required to manage their flu clinics very carefully.

**Trakcare—electronic patient records:**

Dr Furn Davies reported ongoing problems with service and delays of processing referrals, however, there appears to be a slow improvement in Cheltenham, which is encouraging.

**Winter Pressures have not abated:**

Dr Furn Davies has met with his CCG Clinical Leads colleagues recently and, as far as patient numbers are concerned, attendance levels remain at the same levels as those during the winter period.



Dr Furn Davies wished to gauge the meeting's thoughts on how we can achieve fair representation across the Councils in the Locality. It was confirmed that Councils do meet and discuss matters at least 3 times a year, and that the sharing of information with the public is key, therefore the best way of doing that with Council support should be found. Dr Furn Davies said he would be keen to see a representative at the meeting from District Council colleagues.

Dr Furn Davies added that as Urgent Care, A&Es and Minor Injuries and Illness Units were under review help would be required to keep communication flowing so that patients are made aware of all potential changes.

