Meeting Notes Frailty Working Group Preston Park Community Primary Care Network (PCN)

17/01/2023 - Deneway Surgery & Zoom

In Attendance

Mike Holdgate - Preston Park Surgery PPG

Katie McAllister - Frailty Nurse

Emma Finlay – Frailty Nurse

Jessica Grey – Business and Project Coordinator

Katelyn Brown – Care Coordinator

Frankie Burchell – Care Coordinator

Henriette Hardiman-Beaconsfield medical practice PPG

Ayiesha Adderly – Frailty Nurse

Service Introduction

Patients who within their own practice systems who have been identified as frail through Rockwood scale.

Holistic review at home.

Conduct F2F visits.

Working with patient and family to discuss, what needs to be addressed and what is the plan moving forward.

Onward outside referrals e.g. community nurses, Practice Level MDT, Adult Social Care.

Referrals within the PCN e.g. PCN digital ambassador, PCN Roving Vaccinations

Documentation saved directly into practice system on medical records

ReSPECT conversations with patient and offer to return to complete ReSPECT.

Follow up letters sent to patients, outlining future plan or if no services required Reaching the patients who are not known to services

Purpose of visits is to seek opinions of other's who care for patient.

Documents

Initial letter, follow up letter, 2 case examples, no services required

Amend to ensure font size being large enough – 14 size

Include Age UK social prescribing leaflet? Reduces size of leaflet and includes more information about that service.

Leaflet – amend wording, coloured image could this change to bullet points instead? Nurse image doesn't bring anything remove, enlarge mug image size, add NHS logo, PCN logo blurred

Yellow and black font for people with visual difficulty

Remove a "few services bullet points "- Can add services to no follow up letter

Questions

Arranging follow up visits, how is this done? – Varies from patient, usually this will be specified in visit, usually it is followed up a week after once we have nurses availability Querying deafness and blindness, what if the patient don't realise they are losing sight or hearing? – This is always asked on the visit, if someone says they are well then the team have to take this at face value. Ask more open ended questions regarding these issues. Not targeting all groups of people (all ethnic groups) – the service relies on the patient list from GP which relies on patients or carers speaking with GP's – is there a process from the practice managers that could highlight low patient interactions and do they monitor that patients they haven't seen?

What is the process if the Nurses are concerned patients aren't safe – Raise a safeguarding (across all services) if not as urgent contact NOK.

Agreed Actions

- Amend Frailty Leaflet to removed additional images and enlarge font size.
- Amend font size on template letters
- Continue to source ways to ensure leaflet and letters can be translated or converted into accessible reading format.
- Nurses to include more open ended questions especially around patient's sight and hearing.
- Arrange follow up frailty meeting in around 6 months to review.