

## Launceston Medical Centre

### Patient Participation Group (PPG)

#### Minutes from the Meeting held on

#### 9 March 2026 at 6pm at Launceston Medical Centre and Online

**Present:** Andrew Yardley (Practice Manager), Paul Ford (Chair), Joan Heaton (Vice Chair/Secretary), Faye Ashton (Launceston Medical Centre Pharmacy Technician), Damon Dennis (Cornwall County Councillor Launceston South), Steve Dymond, Mary Groves, Pete Hancock, Liz L'Estrange West (online), Julie Mitchell, Dawn Rogers, Bonnie Soanes, Sylvia Thevissen (online), Carol Schubert, Andi Snook (online), Malcolm Tulip, Fiona Westwood Rosemary Penn (Bosvena PPG online – observer)

Guests: 3 members of Launceston *Tesco* Pharmacy team

**Apologies:** Jess Careswell (Social Prescriber), Angela Hutchins

The Chair requested that Agenda Item 6 be moved forward to allow the *Tesco* Pharmacy Team to give their presentation.

#### **Tesco Pharmacy Presentation**

Representatives from *Tesco* Pharmacy attended the meeting to explain the pharmacy dispensing process and discuss the operational challenges currently affecting community pharmacy services.

#### **Prescription Processing**

The pharmacy team outlined the steps involved in processing prescriptions:

1. Prescriptions arrive from the medical centre.
2. Prescriptions are sorted and entered into the pharmacy system.
3. Labels are generated.
4. Dispensers select medication from stock.
5. Prescription is dispensed by a Dispenser
6. A pharmacist performs a clinical check and a second check
7. The prescription is scanned.
8. Patients receive a text message when medication is ready.
9. Medication is stored in collection boxes until handed out.

*Tesco* Pharmacy also performs an additional **bag check at handout** to ensure items are correct and have not been tampered with.

#### **Prescription Availability and Stock Issues**

Pharmacy representatives explained that stock shortages are common across all pharmacies and are usually due to manufacturer or wholesaler supply issues rather than individual pharmacy ordering practices.

*Tesco Pharmacy* has limited supplier access compared to some pharmacies, which can occasionally affect availability of specific branded medicines.

### **Electronic Prescription Service (EPS)**

A key discussion point was the continued use of **paper prescriptions ("green scripts")**.

The pharmacy highlighted several inefficiencies associated with paper prescriptions:

- Prescriptions must be physically transported to the pharmacy.
- Pharmacy staff must manually enter prescriptions into their system.
- Manual entry increases the risk of errors.
- Patients cannot easily redirect prescriptions to another pharmacy if stock is unavailable. The paper script will need to be collected by the patient and taken to an alternative pharmacy.
- It was noted that studies suggest processing paper prescriptions takes **approximately 12 minutes longer per 100 prescriptions** compared to electronic prescriptions.

### **EPS Implementation Challenges**

The practice confirmed that while it supports a full transition to EPS, there are financial barriers.

Estimated costs include (accurate from September 2025):

- **Approx. £10,000 initial system setup:**
  - Equipment upgrades e.g. printers and scanners
  - One training day
  - Software licenses
  - Data transfer
- **Ongoing monthly system costs estimated at £1,000–£1,500** (48-month contract)

The Pharmacist at *Day Lewis* in Launceston has approached the Integrated Care Board (ICB) regarding potential funding support for EPS at Launceston Medical Centre but he was advised that no funding is available.

The PPG agreed to consider supporting lobbying efforts to encourage funding for a full EPS transition.

### **Pharmacy Financial Pressures**

*Tesco Pharmacy* representatives described the financial pressures affecting pharmacies nationally.

Pharmacies receive only a small reimbursement per prescription item and often operate at a loss once staffing and operational costs are considered.

Pharmacies therefore rely heavily on additional services such as:

- Pharmacy First consultations
- Vaccination services
- Clinical consultations

It was noted that many pharmacies nationally are under financial pressure and closures are increasing.

#### **Patient Behaviour and Communication**

Pharmacy staff explained that a significant amount of time is spent managing patient enquiries regarding prescription readiness.

Patients are encouraged to **wait for the automated text message confirming medication is ready** before attending the pharmacy.

If patients attend before receiving a text notification, pharmacy staff may need to search through large volumes of baskets, which can significantly delay dispensing.

Pharmacy staff also reported experiencing **verbal abuse from some patients**, highlighting the pressure staff are under when managing high workloads. The PPG discussed the possibility of increasing patient awareness about pharmacy processes and the time required to safely dispense medication.

The *Tesco* Pharmacy Team left the meeting at 7.05pm after the Chair had thanked them for their time given generously to PPG members

Minutes accepted as a true copy of January AGM/PPG meeting

Chair's welcome and confidentiality reminder until the minutes are approved

#### **Chair's Report:**

Our recent survey of patients using the LMC dispensary has yielded positive results. The queuing area now has seating and has been refurbished. Road shows are being planned to explain the benefits of using the KLINIK system for dispensary enquiries and telephone services are available. These measures are aimed at reducing queues.

Joan and I have been very busy. We attended an event at Lanivet hosted by the Bosvenna Surgery to launch their Integrated Neighbourhood Teams (INTs) offering. This included a meeting promoting PPGs. We were pleased to have most of the chairs from the PPGs from Northeast Cornwall attend which was an excellent opportunity for networking.

Joan and I were invited by Andy to attend the launch meeting of the Launceston & Tamar Valley PCN Integrated Neighbourhood Teams. Hosted by the National Association of Primary Care, the meeting provided an opportunity for both practices to learn about the operation of INTs. It was a very informative session and we were pleased that the PPG was invited. One of the speakers, whose Somerset Practice was one of the first INTs in the country, expressed a wish that she had involved her PPG from the outset.

Our Health Hub in Exeter Street was also mentioned as it has been operating an INT since its opening over a year ago.

As you are aware, Joan and I are also members of the Community Area Partnership's Health & Wellbeing Group. At our last meeting the Health Hub was discussed, and all members are keen to visit. This is an ideal opportunity to show our local County, Town and Parish Councillors and demonstrate the important work being carried out there.

This is timely as we were discussing at the last Health Hub PPG meeting the best way to raise the profile of the Health Hub and its work.

I would also like to thank Mary Groves for conducting another 'Day in the Life' interview this time with Faye from the Dispensary team. I understand it was a successful interview, and I hope to be able to circulate it shortly. In the meantime, please look out for the article in Launceston Life about the Dispensary.

Finally, we will be welcoming Rosemary Penn from the Bosvenna Surgery to observe our meetings. She has been tasked by the Central ICA to establish and reinstate some PPGs in that area and believes LMC PPG is an excellent group to observe to replicate our approach. We thank you all for making this possible.

### **LMC PPG Accounts:**

Ringfenced PPG Accounts AGM Report – accounts need to be corrected and audited and brought back to the next meeting for approval.

### **Practice Manager's Report:**

#### **Practice Dispensary Performance**

Andrew Yardley presented internal practice data relating to dispensing activity. (He noted that he had visited Bradworthy Surgery where all 3500 patients used the dispensary with a 24-hour turnaround; he noted that Oak Tree Surgery with a dispensary had full EPS).

#### **Prescription Processing Backlog**

Data shows the practice is currently working **approximately 5–6 days behind**. The aim is to maintain processing times **below five working days**, as exceeding this threshold increases patient queries and operational pressure.

#### **Call Volumes**

Call volumes to the dispensary have increased significantly:

- **2023:** approximately 6,000–7,000 calls
- **2024:** approximately 10,000 calls
- **2025:** approximately 15,000 calls

The majority of calls relate to patients checking whether medication is ready.

#### **Planned Service Improvements**

The practice outlined several initiatives designed to improve dispensing efficiency and patient experience.

#### **Proactive Medication Reviews**

New searches within the clinical system will identify patients approaching medication review limits. This will allow the practice to:

- Contact patients earlier
- Arrange required blood tests
- Reduce delays in repeat prescribing

Approximately **150 patients per week** may benefit from this proactive review process.

### **Improved Monitoring Appointments**

The practice aims to consolidate monitoring requirements so that patients requiring blood tests, blood pressure checks, or medication reviews can have these completed in a single appointment where possible. This approach should reduce unnecessary repeat visits and improve appointment availability.

### **Prescription Duration Policy**

A question was raised regarding the possibility of issuing **two-month prescriptions**.

The practice explained that 28-day prescribing had been discussed by the ICB to reduce medication waste and allow medication changes to be managed more effectively.

All local pharmacies have agreed that 28-day prescribing is preferred.

Increasing prescription durations would increase stock requirements and could lead to higher levels of unused medication.

### **PPG Funding**

The PPG currently holds approximately **£1,700 in funds** (AGM PPG Accounts Report to be corrected).

Members discussed possible uses of the funds to benefit patients. One suggestion was the purchase of additional **24-hour blood pressure monitoring equipment**, which costs approximately **£1,000 per unit** and can help reduce hospital referrals. Further information on equipment costs will be obtained before a decision is made.

### **Patient Online Access**

The practice reminded members that a new **patient kiosk** has been installed within the practice. The kiosk will allow patients to:

- Submit clinic forms
- Access online services
- Record blood pressure readings

This will support patients who may not have access to digital services at home

### **Questions for the Practice Manager:**

Why is only one hatch used in the dispensary?

A. *The dispensary only has one hatch. Advised to use KLINIK form for dispensary queries*

How can patients dispose of used medicine packaging?

A. *Once a medicine has left a pharmacy, it cannot be recycled or used for another patient. Most local pharmacies have a medicine disposal service and will accept unused or expired medications. Patients can take medications to any pharmacy for safe disposal. Some items are not accepted, such as needles or medical equipment – please check with individual pharmacies. NEVER DISPOSE OF UNUSED OR UNWANTED*

*MEDICINES DOWN THE TOILET OR IN RUBBISH BINS AS THIS CAN HARM THE ENVIRONMENT AND BE A RISK TO PUBLIC HEALTH.*

Request for childhood immunisation data – *to follow*

Request for number of referrals to the Exeter Street Hub (*See Social Prescriber's Report for detail*)

Interpretation of new risk stratification codes in patient records (Red/Amber/Green) – *further clarification offered if required*

### **Social Prescriber's Report:**

- ★ Military Veterans- 188 patients now coded
- ★ Hub referrals including social prescribing since Hub opening– 1311 (This does not include all attendees of groups and services running within the hub building)
- ★ Iain, our new IPS employment support role with Pentreath has started in The Hub and is taking referrals
- ★ There are still some spaces on the Health and Wellbeing Walks, led by Cornwall national landscape. Transport is provided. Please see poster below
- ★ Cornwall Housing have now started joining us once a month for our social prescribing drop in to provide on the spot housing advice and support. The first one was a success and was found to be very helpful
- ★ A new Stroke Peer Support Group starts on 12<sup>th</sup> March 1.30pm to 3.30pm on 2<sup>nd</sup> Thursday of every month. For stroke survivors and their loved ones
- ★ Due to low attendance, Healthy Cornwall smoking cessation drop in is now running on the first Wednesday of the month only. The Thursday session has now been cancelled
- ★ There is now a local support group set up for the LGBTQAI+ community. This is being run independently from the Hub and has our support [LGBTQIA+ support in Launceston and surrounding areas | Facebook](#)



# Monthly Timetable



**THE HEALTH HUB**  
8 Exeter Street, Launceston,  
PL159EQ

	mon	tue	wed	thu	fri
1 <sup>st</sup> week of the month	Movement with Mel 3-4pm - 07967790458	Dementia Carers Support Group 10-12 Yoga on prescription (booking only)	Stop smoking support Drop in 10-1pm Veterans Support drop in 1.30-3pm	Social prescribing drop in -9.30-12pm	Blind and visually impaired peer lead group 10-12 Stronger Together-Womens group 1-3pm Art for 8-18yrs 3.30-4.30pm
2 <sup>nd</sup> week	Healthy Lifestyle drop in 9am-2.30pm Movement with Mel 3-4pm - 07967790458	Dementia Carers Support Group 10-12 Yoga on prescription (Booking only)	Gunners Kids Support for families where there is a terminally ill parent- 10am-12pm	Social prescribing drop in 9.30am-12pm Stroke Support Drop in 1.30pm-3.30pm	Bereavement Help point 9.30am-12.30pm Stronger Together-Womens group 1-3pm
3 <sup>rd</sup> week	Movement with Mel 3-4pm - 07967790458	Dementia Carers Support Group 10-12 Yoga on prescription (booking only)		Social prescribing drop in 9.30-12pm	Blind and visually impaired peer lead group 10-12 Stronger Together-Womens group 1-3pm Art for 8-18yrs 3.30-4.30pm
4 <sup>th</sup> week	Movement with Mel 3-4pm - 07967790458	Dementia Carers Support Group 10-12 Yoga on prescription (Booking only)		Social prescribing drop in 9.30-12pm	FND Friends 10am-12pm Stronger Together-Womens group 1-3pm

We also host, Health for Homeless GP clinics, With You (drug and alcohol support), OAK programme (for people with osteoarthritis of the knee), parenting drop ins and more

For more information about any of the groups and services listed, Please email

[launcestonhealthhub@volunteercornwall.org.uk](mailto:launcestonhealthhub@volunteercornwall.org.uk)



# Natural Beauty & The Beast



## Health & Wellbeing Walks Get Out & Enjoy Bodmin Moor

**FREE with Transport from your Health Hub**  
 Thursday's March 5th, 12th, 19th, April 2nd  
**10 am - 3'ish (bring a packed lunch, & water)**  
 Snacks and hot drinks supplied



**BOOKING  
ESSENTIAL**  
 via email below  
 Please let us know if  
 you have access  
 and/or dietary  
 requirements



[launcestonhealthhub@volunteercornwall.org.uk](mailto:launcestonhealthhub@volunteercornwall.org.uk)

Connect | Collaborate | Celebrate








## The Health Hub

**Drop-In Support Sessions**  
 SUPPORT, GUIDANCE AND INFORMATION PROVIDED BY  
 LOCAL SERVICES AND ORGANISATIONS.

**SUPPORT FOR**

- Social isolation and loneliness
- Benefits, debt and housing
- Employment and Volunteering
- Education and Training
- Cost of Living
- Citizens Advice
- Energy Advice



**Drop in for a FREE cuppa and chat with your social prescriber!**

**Thursday morning  
9.30-12pm.  
No need to book.**



**WHEN & WHERE**  
 Drop-ins run every **Thursday**  
**between 9.30am- 12pm**  
**The Health Hub, PL15 9EQ.**

📍 8 EXETER STREET, LAUNCESTON, PL15 9EQ  
 ✉️ [LAUNCESTONHEALTHHUB@VOLUNTEERCORNWALL.ORG.UK](mailto:LAUNCESTONHEALTHHUB@VOLUNTEERCORNWALL.ORG.UK)

**Date of Next Meeting:**

Monday 18 May 2026

**Meeting Closed at:**

7.47pm