

The Beeches Medical Practice

Patient Participation Group meeting

Monday 16th January 2017, 6:00pm

at Bayston Hill

Minutes

Present: Rob Gough (Chair), Gill Berry (Secretary), Jean Cruickshank, Geoff Garrett, Maggie Hitchings, Gill Jones, Dr Ed Jutsum, Teresa Lewis, Karen Moseley, Terry Seston, Dolores Vaughan

1 Apologies: Nikki Fox, Tony Fox, Kim Richards

2 Meeting agenda, AOB and meeting timing

a AOB: No other business was notified.

b Meeting timing: 7:30pm

3 Minutes of the last meeting – accepted.

4 Actions from the last meeting (most actions will be discussed as part of the agenda)

5 Practice issues and updates

a GPs' report (EJ):

i GPs have been in the news recently; health services nationally are struggling. The practice is looking at new ways of managing and is advertising for a **Health Care Assistant** to carry out some of the more basic duties, as well as a more highly qualified **advanced nurse practitioner** who could also prescribe. These initiatives should help to reduce waiting times. Other practices have appointed senior nurses and found their input very helpful. These changes were suggested by the Development Team who visited the practice some time ago.

RG asked about the possibility of appointing **clinical pharmacists**. EJ replied that the government is suggesting a ratio of 1:30,000 patients. Again, accommodation is a problem. This has worked very well in other areas. Pharmacists can advise on how to cut drugs expenditure. EJ explained that the role of the pharmacist might be to help when a particular drug does not suit a patient, e.g. cholesterol-lowering medication.

ii Building alterations: Keele University has offered up to £40,000 to fund improvements in accommodation at the practice. EJ outlined plans for this; planning permission has now been granted and the architects are in discussions.

iii Working at scale: all eleven of the practices in Shrewsbury are interested in joining forces to provide services most efficiently; these discussions are ongoing.

iv 7-day access to services: The practice offers extended hours on a Tuesday but it was observed that patients locally have not been keen to use weekend appointments. EJ commented that about a third of GPs are due to retire in the next five years.

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- v **Urology/digital health:** letters are being sent from The Beeches to male patients in this area who have had prostate cancer to invite them to try out the Digital Health Cancer App, which is being trialled locally. This Practice is one of two working with Mr Andy Elves (Consultant Urologist) on this project. RG mentioned that Mr Elves is awaiting a list of potential patients to be sent to him.

Action: EJ to raise the issue of a list of patients to be sent to Andy Elves at the next management meeting.

- vi **CQC report:** It was felt that although the report was 'good' it was a pity that the CQC had already used its quota of 'excellent' awards. RG commented that slides which were shown during the CQC inspection could be useful to the group.

Action: EJ/KR/GB to distribute the PowerPoint presentation.

- vii **A&E statistics:** EJ reported that practices are given updates on A&E attendance statistics every 3 months; some practices have worse A&E attendance figures than others. The numbers from this practice who really should not have attended A&E are thought to be minimal.

- viii **Practice newsletter:** KM will prepare a new edition to update patients on the appointment of the new nurses. It was also suggested that a note should be made to urge patients not to attend A&E frivolously.

Action: KM to prepare a new edition of the newsletter.

b Practice manager's update (KM in KR's absence)

- i **Waiting times:** KM reported that current waiting times are longer than last year's, although it is hoped that the appointments of an HCA and nurse practitioner will help to improve the situation.
- ii **Patient survey:** KM handed out a copy of the 2016 patient survey. Following discussion, it was felt that the questions could have been phrased differently and that the survey was too long. In previous years, the PPG had been asked to help in the preparation of the surveys; this had not been done on this occasion. RG hoped that KR may be able to explain the surveys further at a future meeting.

Action: Members to read the survey results for discussion and KR to report at the next meeting.

RG mentioned that Andy Elves is awaiting a list of potential patients to be sent to him; EJ to take this to the next management meeting.

c Community Care Coordinator Update (KM)

- i **Diabetes:** KM reported that local Care Coordinators had attended a training meeting. Susie Hancock, who works with the Rural Community Council as part of the Wise and Well Team, was keen to support the efforts of the PPG in raising diabetes awareness and prevention. It was noted that there may be some overlap with GJ's role. TS will discuss the possibility of a presentation at the Christ Church coffee morning. DV suggested that the PPG could have a presentation initially; KM thought that Nurse Val Sanders, who is the nurse responsible for diabetic patients at the practice, might be well-placed to give a presentation to the PPG.

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RG asked TL whether the Parish Council became involved in health issues; TL replied that there was always difficulty in gaining responses and commitment to consultations.

Action: KM to invite Val Sanders & Susie Hancock to give a presentation to the PPG on the same evening.

TS to discuss with the Christ Church coffee morning.

JC to raise the issue at the local WI.

ii **Young Health Champions:** KM had been in touch with Lynne Taylor, who is to contact Oakmeadow School to introduce YHC for 11-year-olds to promote diabetic awareness. TL added that the Parish Council is giving Village Awards for youngsters who have shown the greatest improvement in their health. This scheme was run last year for the first time. After completing their SATs, Year 6 pupils have met with older people to discuss their experiences of living in the village. GJ suggested that over-60s contacted via the practice might be willing to be involved in a similar venture in the future.

iii **Co-Co (Compassionate Communities)**

- **Training:** KM reported that she will be speaking to RG's wife Jenny at the Hospice tomorrow regarding training of Co-Co volunteers; KM is looking for more volunteers to join the scheme.
- **Ryton volunteers:** RG raised the possibility of there being some volunteers based in Ryton who would be interested in visiting elderly/vulnerable folk in Ryton under the CoCo initiative. This is due to be discussed further at the Hospice and with KM regarding where this goes next.

Action: KM/RG to update at the next meeting.

iv **Dorrington Village Hall:** KM was unable to attend the last meeting at Dorrington Village Hall due to other commitments.

6 **AOB:** TS proposed that meetings at the Dorrington site should be abandoned, at least for the time being as the number of members who attend tends to drop when held at Dorrington. This was agreed.

In view of time constraints other items on the agenda were deferred until the next meeting.

7 **Dates of next meetings:**

20th February (Bayston) – 6:00pm

20th March (Bayston Hill) – 6:00pm

The meeting ended at 7:45pm.

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Outstanding actions as at 16th January 2017		
Item	Actions	Progress
Men's health event	DV's checklist to be sent to PPG members for all to comment.	DV/GB/all
CQC inspection	EJ/KR to email GB with the PowerPoint presentation for distribution to the group.	EJ/KR/GB
HeartAge	KM to attend the next meeting of Dorrington village hall committee and report back.	KM
Diabetes Prevention Programme	RG to liaise with practice nurses re incorporating diabetes risk tool into next year's flu clinics.	RG
Practice issues	<p>Support for Vulnerable GP Practices: AB/another GP to look into the scheme and report back.</p> <p>Statistics for waiting times: KR to provide figures to show the trend.</p> <p>Book sales: KR to suggest to the GPs using the funds raised to buy a blood pressure machine.</p> <p>Practice newsletter: KM to prepare a new issue to update on new personnel appointments</p> <p>Survey results: Members to read for discussion; KR to report back at the next meeting.</p> <p>CoCo: KM/RG to update on the CoCo initiative at the next meeting.</p>	<p>AB/other</p> <p>KR/ongoing</p> <p>KR</p> <p>KM</p> <p>KR/All</p> <p>KM/RG</p>
Digital health/urology	<p>EJ to raise the issue of a list of patients to be sent to Andy Elves at the next management meeting.</p> <p>KR and RG to update PPG members as appropriate.</p>	<p>EJ</p> <p>KR/RG/ongoing</p>