

# The Beeches Medical Practice

## Patient Participation Group meeting Monday 27<sup>th</sup> November 2017, 5:00pm at Bayston Hill

### Minutes

**1 Present:** Terry Seston (Chair), Gill Berry, Nikki Fox, Tony Fox, Geoff Garrett, Maggie Hitchings, Gill Jones, Teresa Lewis, Edward Marvin, Karen Moseley, Kim Richards, Helen Steel, Dolores Vaughan.

**Apologies:** Valerie Collard, Jean Cruickshank, Brenda Fletcher, Rob Gough, Dr Rob Laycock.

### 2 Agenda, AOB and meeting timing

**a Agenda:** This had been distributed prior to the meeting.

**b AOB:** See item 9.

**c Meeting timing:** 7:00pm.

### 3 Minutes 23<sup>rd</sup> October: Accepted, with the following amendments:

**a Attendance:** Dr Rob Laycock was not present at the last meeting; Gill Jones had been present.

**b Item 4j Health checks for adults with learning disabilities:** RG had wished to underline that it is the potential change of approach to annual health checks for those with a learning disability which needs to be explained to the patient/carer/parent to prepare them which is the issue here, rather than the making of an appointment.

KR commented that changes to health checks would include looking further at social issues; although GPs would ask more questions than previously, these checks would take the form of a natural conversation. About 80% of the practice's annual health checks for adults with learning disabilities have already been completed, and GPs now spend more time with these patients.

**c Item 3 Women's Health Event:** Amendments to the event (notably the date) to be dealt with later in the meeting (see item 4).

**d Item 4g Parish Councils' joint working:** GG was to send contact emails to KR, but she reported that she already has the information.

**e Item 4i Vascular clinic:** TS stated that at one time there had been a vascular clinic at the surgery.

**Action: KR to investigate this and get back to TS.**

**f Item 5a ii Locality meeting:** KR clarified that the reintroduction of community matrons is still under discussion and that it was envisaged that funding from the hospital would be redirected into community services. KR also reported that the next locality meeting, to be held on 7<sup>th</sup> December, will look at the out-of-hospital care programme.

**g Item 8b End of life team:** TS reported that the scheme had been deferred until January 8<sup>th</sup>, and that there are now another four trained volunteers for the team.

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**h Item 4c Waiting times:** GG reported that he had been in the surgery recently when the display said, 'On time,' whereas actually the appointments were delayed by half an hour.

**Action: HS to check waiting room displays.**

**i Item 4d Care Navigation:** It was commented that 'GP roles' and 'Care Navigation' should come under the same heading.

**j Item 4e Virtual Reference Group:** KR has prepared a list of people who may be willing to be involved in a VRG.

**Action: KR to contact the relevant people.**

**k Item 4g Cooperation between councils:** action complete.

### 4 Women's Health Event

**Date:** This has now been confirmed as Wednesday 28<sup>th</sup> February 2018 at Christ Church hall. Dr Kevin Lewis is unable to attend on the revised date and so Dr Walsh and Dr Middleton will speak on relevant topics.

**Venue:** Christ Church hall. Christ Church are very kindly offering the venue free of charge.

**Timing:** 7:00-9:00pm; doors will be open from 6:00pm to enable the setting-up of the stalls.

**Speakers:** Mr Jon Lacy-Colson, consultant colorectal surgeon, had been unable to attend on 15<sup>th</sup> February but suggested Wednesday 28<sup>th</sup>. DV suggested that she should ask Pilates teacher Ruth Morris to speak about pelvic floor exercises. GJ also offered to speak.

**Topics:** Results of the survey were that everything might be interesting, but particularly relating to lifestyle (diet/exercise), women's cancers, screening services and the menopause.

**Timing:** 20-minute slots per topic with a break midway.

**Setting up:** Stalls could be set up from 5pm, with doors open from 6:30pm.

**Refreshments:** DV to liaise with NF/TF: NF to bring milk, TS to bring 80 teabags and one medium jar of coffee, DV to bring biscuits. Refreshments to be offered on entry and again midway through the evening. No charge to be made, but an offering plate to be left for donations.

**PA:** GG to bring a projector and screen the previous day. TS to find out about whether amplification is possible in the hall.

**Publicity:** GB's son Dan is asking one of his students to design a poster as a project. TS agreed that it would be possible to pay her a small sum for this. Copy for The Villager must be in by 10<sup>th</sup> January 2018. HS was suggested as a backup graphic designer. KR agreed to print off some colour posters once they were agreed. DV's checklist (Jan 2017) applies. TL volunteered to speak on Radio Shropshire; GB's son Simon, who works there, says this will need to be done only 2-3 days in advance of the event. EM will contact Condover Parish Clerk, covering all the local representatives.

**Stalls:** KR to ask KM to contact the stallholders as before.

**Action: KR/KM.**

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**General:** EM suggested that PPG members should be alert for opportunities to make the event known beforehand. TL suggested putting the information on *The Villager's* Facebook page; HS/KR to mention it in the next Practice newsletter also. TS to add it to the Christ Church coffee morning and church leaflet.

**Action: TL, HS/KR, TS and all, as above.**

5 **Actions** (Dealt with under item 4).

6 **Practice issues**

a **GP update:** Not applicable (no GP was due to attend this meeting).

b **Practice manager's report (KR)**

i **Waiting times:** currently 8 days.

ii **Communication/social media:** KR, KM, LS and Anne will be overseeing the practice's monthly communications, beginning in December and starting with 'Next Door' via newsletters, emails, etc., as well as on the practice website. Topics to be covered will include flu clinics and health events, shingles jab, the PPG, etc.

TS asked if it would be possible to add a trailer on the waiting room television. KR replied that feedback from patients is that they like to have a TV in the waiting room. She also reported that an organisation called Health TV have recently done a site survey to this end and could supply a TV set displaying health information. There would be no cost to the practice as this would be covered by pharmaceutical companies.

iii **Darwin Health:** This grouping of eleven local practices is still in its infancy. An intranet is being developed and practices in the group will develop single policies such as safeguarding; equipment, etc. KR and Caroline Brown from South Hermitage practice are managing the production of policies within the group. As the group becomes more established it is hoped that someone will be employed to manage these as well as rotas, staff training registers, etc.

iv **Care Navigation:** HS has been working on this scheme with the clinicians to prepare a list of conditions which would help to direct patients to the right clinician. The practice aims to create a leaflet of information signposting patients to the various services, and receptionists will use this with the patients. An Advanced Nurse Practitioner and Health Care Assistant are helping to provide the services. The ANP will triage acute cases on the day, freeing GP appointments. The scheme will also include pharmacy initiatives and there is potential to employ another ANP.

The practice would like to distribute a copy of the leaflet and other resource information to every household. GG suggested that the leaflet could be distributed alongside *The Villager*. Although there would be a cost, this may be less expensive than postage; HS and KR will investigate this.

**Action: HS and KR to look into the costs of distribution with *The Villager*.**

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### c Community Care Coordinator update (KM):

i **Frailty index/admission avoidance:** The unplanned admissions avoidance scheme ended in July and now the Enhanced Summary Care Record is being offered to patients with moderate and severe frailty. KM will be contacting frail patients to ask for their permission for their records to become available to hospitals, on the NHS 'spine.' Currently there are 140 patients at the practice classed as severely frail. KM contacts frail patients who have been discharged after a hospital stay. Not all practices have a Care Coordinator, but the practice feels that this is an important function.

EM asked whether this was similar to social prescribing; KR said that these are different, but that KM will signpost patients to the relevant services.

ii **TL** is involved in health and wellbeing in the community and there is the possibility of linking in with KM, especially regarding dementia. TL is also involved in health projects in the primary school, and it is hoped to reintroduce Young Health Champions.

d **Flu clinics:** There are no more flu clinics planned at the practice this year, but HS is working on a campaign for patients to have the flu injection at the surgery rather than at local pharmacies. The practice offers the vaccination to around 1,500 patients, notably those with chronic conditions such as asthma and diabetes.

e **Other initiatives:** none at present.

### 7 Our 2017/18 priorities (KR):

a **Diabetes education:** KR reported that the practice aims to identify and contact diabetic patients in January, inviting them to a local diabetes education/information meeting.

b **Facebook page:** It was noted that this should no longer be included on the agenda (*see PPG minutes, August 2017*).

c **Practice website:** KR reported that the surgery website is managed and updated regularly with relevant information. EM mentioned that the website software is more than likely out of date and there is funding available to fund website development. EM will pass contact details to KR.

**Action: EM/KR, as above.**

8 **Visit from Shropshire CCG?** (In view of RG's absence and time constraints this item was not discussed).

### 9 AOB:

a **Book donations:** KR to provide NF with figures of donations since August; this scheme seems to be working better at Dorrington.

**Action: KR/NF.**

b **Higher seats** for the waiting area have arrived and are in use.

c **'Elephant feet' chair raisers:** Thanks were expressed to NF and TF, who have donated some 'elephant feet' to raise the height of some of the chairs in the Bayston Hill surgery waiting room.

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### **10 Date of next meeting:**

The meeting ended at 19:00.

The next meeting will be held on **Monday 8 January 2018 at Bayston Hill**, with a start time of **5:00pm**.

### **Future meetings:**

**Monday 5 February 2018 at Bayston Hill, 5:00pm**

(provisional date)

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### Outstanding actions as at 27<sup>th</sup> November 2017

Item	Actions	Progress
<b>Practice issues</b>	<b>Statistics for waiting times:</b> <ul style="list-style-type: none"> <li>• KR to email updated waiting time figures to GB.</li> <li>• KR to provide a graph to show the trend of these figures over the last twelve months.</li> </ul>	KR/ongoing KR/ongoing
	<b>Waiting room displays:</b> HS to check accuracy of the display.	HS
	<b>Staff photo board:</b> KR to update the photo board.	KR/ongoing
	<b>Practice newsletter:</b> KM to prepare a new issue to update on new personnel appointments and add a reminder regarding appropriate use of appointments.	KM/ongoing
	<b>Vascular clinic:</b> KR to check details of the previous clinic and report back.	KR/HS
	<b>Women's health event:</b> <ul style="list-style-type: none"> <li>• KR to analyse the top three topics from the questionnaires and send to GB.</li> <li>• RG to contact TS to ask about booking Christ Church hall</li> <li>• DV to ask Ruth Morris about speaking on pelvic floor exercises</li> <li>• TS to find out about whether amplification is possible in the hall.</li> <li>• EM to contact Condover Parish Clerk re publicising the event.</li> <li>• KR to ask KM to contact potential stallholders.</li> <li>• HS/KR to publicise the event in the next Practice newsletter</li> <li>• TS to publicise in the Christ Church coffee morning and church leaflet.</li> </ul>	Complete Complete DV TS EM KR/KM HS/KR TS
	KR to prepare list of <b>GPs' roles</b> to show to PPG members and to consider how these changes are best going to be communicated to patients.	KR/ongoing
	<b>Care Navigation scheme:</b> <ul style="list-style-type: none"> <li>• KR to scan the document and send to GB for distribution.</li> <li>• KR to consider publicity re Care Navigation scheme.</li> <li>• HS and KR to look into the costs of distribution with <i>The Villager</i>.</li> </ul>	KR/ongoing KR/ongoing KR/HS
	<b>Health checks for adults with learning disabilities:</b> KR to consider how to communicate this to the people on this register.	KR/ongoing
	<b>Virtual reference group:</b> <ul style="list-style-type: none"> <li>• KR to provide any information to RG regarding volunteers for the VRG</li> <li>• KR to contact relevant people</li> </ul>	KR
	<b>Visit from Shropshire CCG:</b> RG to contact Karen Higgins to invite her to a PPG meeting	RG
	<b>Cooperation:</b> TL and EM to consider working across the two Parish Councils	Complete

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### Outstanding actions as at 27<sup>th</sup> November 2017

Item	Actions	Progress
	<b>Book donations:</b> KR to provide NF with figures of donations since August.	KR/NF
<b>Our priorities</b>	<b>Practice website:</b> EM to pass contact details to KR of funding to update website development.	EM/KR