

## PRESTON GROVE MEDICAL CENTRE

Meeting of the **Patient Group** held on **Monday 23 May 2016** in the **Waiting Room** at **Preston Grove Medical Centre**.

Present: David March, Patient (Chair)  
Sally Higgins, Office Manager  
Sue Jay  
Malcolm Jefferies, Patient  
Karen Lashly  
Christine Lincoln, Patient (Secretary)  
Rachael Rowe, Somerset CCG  
Peter Spranklen, Patient  
Dr Christian Stanley, GP  
Eva Whear, Patient

### **1 Welcome and Apologies**

- 1.1 David welcomed everyone to the meeting.
- 1.2 Apologies were received from Philippa Clifford, Chrissie Gee, Ruth Hann, John Hann, Karen Lashly, Mandy Mason, Michael Tritton, Kathy Way, Mike Way and Dee Williams.

### **3 Information on Diabetes at Preston Grove Surgery**

- 2.1 Rachael Rowe, Clinical Networks Programme Manager from Somerset CCG attended the meeting to talk about diabetes in the county, some specific information about Preston Grove and information on programmes in Somerset.
- 2.2 In 2013 there were 22,000 patients with diabetes and in 2016 there are 30,000. Type 2 diabetes is caused by lifestyles and is mostly in people between 60 and 79. Preston Grove has 590 patients with diabetes and the majority are type 2. It cost the NHS £250,000 per year for amputations and this has halved in Somerset as foot care has improved, however about £400,000 is spent on leg and foot ulcers. The drugs budget for diabetes is about £9 million.
- 2.3 There is a national programme for pre-diabetes to get people into exercise programmes and losing weight to help prevent diabetes and it is hoped this will be rolled out in Somerset.
- 2.4 A national audit is carried out making sure that people in primary care get all their annual checks such as blood pressure, weight and feet. Preston Grove met the national average of 40%. A lot of practices in Somerset did not take part in this as it is an opt-in rather than opt-out audit.
- 2.5 In Bath they are looking at new ways of managing patients when they go into hospital. Patients with diabetes are flagged up so the A&E team can assess them and get them onto a plan to avoid being admitted. This is saving money and bed days. It is hoped this will be rolled out in other areas.
- 2.6 In Yeovil a lot of patients with diabetes in nursing homes are being admitted to hospital with low blood sugar; the diabetes nurse from Yeovil has been reviewing this and finding some patients are on insulin when they don't need to be. This is helping reduce the number of admissions.

- 2.7 Somerset is looking at how clinics can be provided differently which involves some consultants reviewing patients with the GP. Karen said this is already happening at Preston Grove and is working well. It has also highlighted that one of the nurses needs some additional training, so it is also upskilling staff. This will avoid patients being admitted to hospital.
- 2.7 Newly diagnosed patients are encouraged to go on a course (DESMOND) to learn how to manage their condition. In Somerset the take up is low with only 40% attending. In Preston Grove 34 new patients were diagnosed last year and only 10 attended one of these courses. Somerset CCG is looking into this to find out why patients don't attend; there could be a variety of reasons such as the courses are not held at convenient times. Karen suggested Rachael speak to Dr Boyland about Preston Grove patients.
- 2.9 Recent NICE Guidance has said the number of podiatrists has to be increased as patients who are not eligible at the moment need to have foot checks to prevent them from getting foot ulcers. Somerset CCG is currently looking at how this will be funded.
- 2.10 David thanked Rachael for attending the meeting and invited her to come along to the diabetes event in July.

### **3 Minutes**

- 3.1 The minutes of the meeting held on 11 April 2016 were agreed as an accurate record.
- 3.2 The trees around the surgery had not been trimmed back but the groundsman was aware of this as well as the blocked drains.
- 3.3 Karen had circulated the surgery mission statement and objectives to the group.
- 3.4 Karen said there was no further news on the CQC visit later in the year.
- 3.5 Karen had looked at the story printed in the Western Gazette that Chrissie had raised at the last meeting and confirmed that the information was not accurate.
- 3.6 David said he attended the event run by Abbey Manor PPG, this was run as a drop in event and a wide range of organisations had stalls giving out information and talking to people. It was very well organised but unfortunately it was not well attended.
- 3.7 A talk was given by a Commander from Yeovilton who said that military personnel have their own health services but their families have to use the local services where they are stationed. He said he would welcome a seminar at Yeovilton for the benefit of service families.

### **4 Diabetes Event Planning**

- 4.1 Karen said she would ask one of the health coaches to organise this event – arrange a date, contacting the speakers and putting the programme together. It was agreed the event would be held in July, before the school holidays. This also gives plenty of time to advertise it and ensure the right patients are invited. It could also be opened up to other surgeries in Yeovil.

4.2 Suggested list of professionals to invite:

Dr Ian Boyland  
Nurse Catherine Cassell  
Alex Bickerton  
Su Down  
Diabetes UK  
Rachael Rowe (Somerset CCG)  
Maggie Crocker (Somerset Partnership – Training Programmes)?

4.2 An update on progress would be given at the meeting on 4 July.

**5 Patient Benefit Fund**

5.1 Sally said this remained at £130.16; no additional money had been received other than a small amount of interest.

**6 Preston Grove Car Park**

6.1 David said he, Peter and Mike manned the car park on 12 April, when the surgery was closed for staff training. It was clear that at least 20 cars linked to the school would have entered the car park if he Peter and Mike had not been in attendance. Only one man was very abusive towards them, unfortunately he was heard by other people in the area. He wanted to use the Pharmacy, so was let onto the site as were all persons who required the Pharmacy.

6.2 The school head teacher came across and spoke to David; he was very supportive and would like to see this being done more often. David said they would be happy to do this again.

6.3 It was agreed this could be done on staff training days when the only patients would be coming to see the Midwife; a list of patients would be made available so they could be let in.

6.4 Karen thanked David, Peter and Mike for doing this; it was really appreciated and worked well.

**ACTION: Sally to share staff training dates with David**

**7 Community Transport**

7.1 David said this has been brought up and discussed by Dr Michael Robinson at the last meeting due to the high number of patient visits by the doctors.

7.2 Christine had circulated some information on community transport with the last minutes, but this was mainly for hospital transport.

7.3 There was a discussion around whether PPG members could transport patients to appointments, what cover would be needed and the catchment area for the practice. This will be discussed further at the next meeting and Karen will bring this up at the next practice meeting.

**ACTION: Include transport on the next agenda**

## **8 Patient Suggestions**

8.1 Sally said the only suggestion received was to have more hand gel pumps available in the waiting room. It was agreed this would be a good idea, possibly having one by each door.

8.2 Some nice comments had been made on the Friends and Family test and Sally read out two:

“This surgery is perfect in every way the doctor are all very good, they listen to you and they prescribe conscientiously, the nurses are so kind and the receptionists are very helpful, everyone in this surgery is lovely.”

“My doctor is really good he listens and takes time over my appointments and I find the self-service easy to use and the receptionists friendly; today's visit was very good, thank you.”

## **9 Staff Suggestions**

9.1 No staff suggestions had been received.

## **10 Practice Updates**

10.1 Five health coaches have been appointed, three have already started and two are currently receptionists who will move into these posts. Two more will be recruited shortly with interviews taking place over the next week. This means there will be one for each GP. The health coaches have started sitting in with GP appointments and visiting other practices to see how they work with their health coaches.

10.2 They will be based in the current common room which is being decorated, and the common room will be relocated to another room in the building.

10.3 Karen said other practices that have health coaches in place are getting good feedback from their patients.

## **11 Any Other Business**

11.1 Peter said a lot of patients are still parking in the disabled circle at the front of the building and the white lines need to be redone. Karen said the white lines are not being redone as more signage has been put up to highlight the disabled area. There are also two disabled parking spaces just inside to the left of the car park.

11.2 Eva asked about starting times for appointments, there have been occasions when patient attending the first or second appointment of the day have gone in late, they understand that doctors do run late, but when patients request an early appointment it is usually due to reasons such as taking children to school.

11.3 There was a brief discussion on this and it would be noted.

## **12 Date of Next Meeting**

12.1 The next meeting will be held on 4 July and at this meeting there will be an update on the event planning.

12.2 David thanked everyone for attending the meeting.