

**Minutes of Patient Participation Group Meeting
Held on Thursday 10th November 2016 at 6.30pm
Avenue House & Hasland Partnership, 109 Saltergate, Chesterfield**

Present: Dr I Anderson (Chair), Laura Gummer, Alan Kirk, Ruth Watts, John-Charles Tanner, Geoff Horn, Bob Wilson, John Ross

Apologies: Carmen Villegas-Galvez, Michael Crossley, Derek Ashmoor, Rita King, Morton Joynes

The Chair welcomed the guest speaker, Chris Oxley from Specsavers Hear Care. He also welcomed three new members, Geoff Horn, Bob Wilson and John-Charles Tanner, all from Hasland St Philips Drive surgery.

1. Specsavers Hear Care

Mr Oxley explained that Specsavers Hear Care have a contract with the NHS for adult hearing services for the over 55's who have been referred by their GP. The service provides hearing tests and hearing aids for most patients with more complex cases being referred to hospital via their GP. Mr Oxley explained he is an audiologist who is qualified to dispense hearing devices with a team of 6 providing a 7 day clinical service including aftercare, cleaning and batteries etc. There is also a postal service for batteries if patients are unable to use the drop-in service.

For patients who are housebound, Specsavers Hear Care can offer home visits for assessments and fitting. They have dealt with 1,076 referrals year to date (Sept 2016) including 28 from Avenue House surgery. They have performance indicators set within their contract with referral to assessment being 97% within 28 working days. Specsavers Hear Care have found 80% of patients are able to be assessed and a hearing aid fitted within their first appointment and have a 100% customer satisfaction rating.

The service specification regarding referrals is to change in April 2017 with over 55 year olds being able to self-refer and 18-54 year olds will be referred by GP's if there are no complications.

Mr Oxley also explained that wax management patients are referred back to pharmacists for "wax softening drops" and then to their GP. Laura stated that patients come to the surgery reporting that they need urgent wax removal which puts pressure on the practice resulting in an average wait of 3-4 weeks for treatment. The practice have trained 2 extra nurses to provide wax removal services. Mr Oxley stated Specsavers Hearcare do offer wax removal on a "private basis". Current charges are £35 for one ear and £50 for two ears, using micro suction as opposed to flushing.

The Chair and Group thanked Mr Oxley for his very informative presentation.

2. Appointment of Chair to the PPG

This item has been deferred to future meetings.

3. Minutes of the Previous Meeting held on 12th May 2016

The minutes were confirmed as a true record.

4. Matter Arising

- a) Unfortunately Clive Archer sadly passed away in September. The Group acknowledged that Clive will be greatly missed for his exceptional work within Chesterfield CCG and Avenue House PPG.

- b) Laura reported that the timing of each screen shot on the waiting area TV screen has been extended to give patients more time to digest the information.
- c) The practice would like to thank the PPG members who provided 37½ hours cover to help with directing patients for their flu jabs.

5. Chesterfield Community PPG Meeting Feedback

This item will be carried forward to the next meeting as no report was available.

6. Practice Updates

Laura stated that Dr Rawat will leave the practice at the end of November and will be replaced by Dr Socket (female GP) who will work Monday, Wednesday and Fridays.

Laura also stated that Dr Banjola (1st year GP) is joining the practice and Nicola Helps (Nurse Practitioner) will be leaving the practice to move on to Elderly Care.

7. Patients Praises and Grumbles

There were no grumbles to report.

Praises

- a) One patient said “Just praise really. You are always responsive. I always feel listened to and have received prompt and appropriate treatment. Thank you very much for all your hard work”.
- b) A patient commented “Always lovely, efficient receptionists. Willing to go that extra mile with a smile. Very sympathetic to those of us dealing with older relatives who can be a little more challenging”.
- c) A patient commented “Always received excellent service from the doctors. The receptionists are always helpful and attentive. I appreciated a home visit for my 88 year old mother last week from Doctor ‘Ester’ who diagnosed a chest infection. She was much better after a week on antibiotics. Thank you”.
- d) A patient said “Dr Lohor – Always fantastic. We are so lucky to have access to a GP like him. Thank You”.

8. Dementia Friendly Practice

Dr Anderson explained for the new members the background to becoming a Dementia Friendly practice, and how to try to relieve anxiety and stigma within the community towards dementia sufferers and their carers. He also explained how patients require social and medical care which is helped by the Integrated Care system (voluntary, adult care, mental health, clinical organisations etc.), which is now working within the Chesterfield area and managed out of Walton hospital.

Dr Anderson said that there is now an opportunity to lead, via Alzheimer’s Society, and become a Dementia Friendly practice. It has been found that most dementia patients suffering from this progressive disease respond better if kept in their own home environment, with appropriate support.

Dr Anderson also explained that Dementia Friends are volunteers, and at Avenue House a number of practice staff have been trained and have given good feedback regarding their experience. The practice is trying to react to patient’s needs as early as possible as early help is extremely important. Within the Chesterfield area 9 out of 10 practices have undergone training and staff at solicitors, supermarkets etc., are also wanting to be involved.

Dr Anderson explained that becoming a Dementia Friendly practice is an ongoing exercise and the Alzheimer's Society are looking for a practice (including PPG members) to trial a "template" that they are producing to help practices in the future. This involves looking at the format to see if it works and providing feedback. Dr Anderson commented that PPG members could be involved and carry out part of the review and feedback, provided the practice agreed to look at the feasibility. The involvement of the PPG could also stimulate interest at other practices to attempt to achieve all practices in Chesterfield becoming Dementia Friendly practices.

Laura stated on-line training for practice staff is in operation. Dr Anderson said he would like to form a working group to help with the exercise. It was suggested that PPG members could complete a "walk through" the surgery with a patient and carer to examine the physical environment encountered by both patient and carer. Members of the PPG were very interested to help and prepared to participate with the exercise wherever they could.

9. M.E. and Lyme Disease

Ruth explained that Lyme disease and M.E are often misdiagnosed and therefore resulting in wrong treatment being given. Lyme disease is a tick born bacterial infection resulting from a "tick bite" which the sufferer could be totally unaware that they have been bitten. Ticks that carry the bacteria responsible for Lyme disease are found throughout the UK, other parts of Europe and North America. Ruth added that if not treated it could possibly lead to various symptoms/side effects and could therefore be misdiagnosed as M.E.

Ruth also explained that Lyme disease can often be treated effectively if detected early, if not treated or treatment is delayed the person infected could develop severe and long lasting symptoms. Ruth stated she had recently been to a conference about Lyme disease as it is of particular interest due to a family member suffering from the disease for a number of years. At the conference Ruth learned that the test for the disease carried out via the NHS was 60% inaccurate. She also stated that the test involved for antibodies is "time dependant" and that the government and N.I.C.E. are aware of the difficulties regarding diagnosis. Dr Anderson confirmed that the disease was particularly difficult for GPs to diagnose.

Ruth said she was aware of one individual, not a patient at Avenue House/Hasland Partnership, who had had 3 tests, carried out at different times which all came back negative for diagnosing Lyme disease. However, the individual paid for private blood tests which were carried out in Germany which subsequently proved positive. The effect of this misdiagnosis had cost the individual long term suffering and also resulted in expense being incurred unnecessarily by the NHS due to the misdiagnosis.

10. Any other Business

Alan Kirk reported that the Government has offered up to £14m to CCG's and GP's for help with patients suffering from diabetes.

Date of next meeting is Thursday 12th January 2017 at 4.30pm

**** Please note the earlier time for the January meeting****

