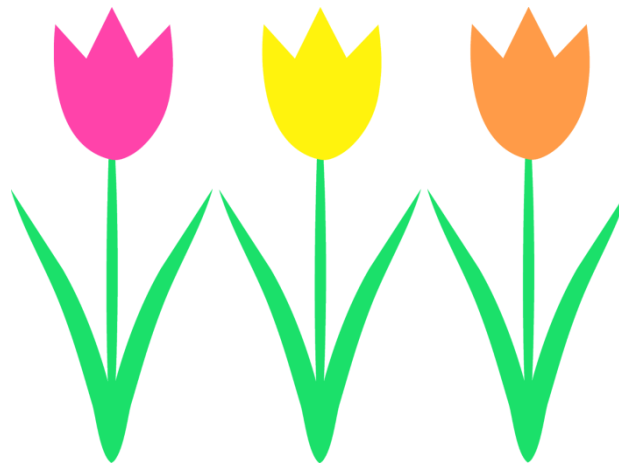




High quality flexible patient care sensitive to the individual needs of all patients

## **Patient Groups: Spring Briefing Note**

**March 2018**



### **Next meeting dates**

The following meetings are scheduled for Spring 2018:-

Ladies Only Group meeting on

**Tuesday March 6 from 1100 to around 12 noon in the surgery**

Main Patient Group meeting on

**Thursday March 22 from 1800 to around 1915 in the surgery.**

This Briefing Note will be used as an agenda, to inform the meetings & to update those patients who are unable to come. As always all patients are most welcome to attend. These items are in no particular order.

## GP Access

For those who have been with the Patient Group from the start of its current format, there have been many discussions about the various factors affecting demand for GP appointments. We continue to manage these as best we can.

The latest developments on access are set out below.

Of course the media has been awash with stories of the problems facing the NHS over the winter period. At Peartree Medical Centre, we have been able to offer additional appointments through national and local initiatives.

### (i) Winter Monies



Similar to previous years, we have provided extra GP appointments from a local fund for 'winter monies'. This has given us 63 extra GP hours or 21 extra 3 hour surgeries which have been scheduled on Monday & Tuesday mornings over the winter period. Historically these two mornings are when our demand is at its highest. This equates to 378 extra appointments with our GP locum colleagues Drs Sheraz & Chouhdry.

### (ii) Extended hours hub

The Extended Hours hub has continued to operate over the winter period. Previous readers of this Briefing Note will recall that this is a joint initiative with eight other surgeries across Derby City to provide an out of hours service every weekday evening and Saturday & Sunday mornings. Up to two GPs are on duty together with an Advanced Nurse Practitioner for many of the sessions. Other services such as blood clinics, smear clinics and dressings are also offered.

Patients can access these appointments in the usual way and they are offered from two hubs – one at The Park Surgery in Chaddesden and the other at our surgery. A third hub is scheduled to open in Allenton on 5 March 2018.

Our records show that 854 Peartree patients have used the service since May 2017. This is 17% of our patient population.

Peartree Medical Centre is the smallest of the surgeries and the efforts of our Health Care Assistant, management team and Reception team to support the hub operation has been considerable. We feel that we are 'punching above our weight' in offering this service.



We have also described the hub in the surgery as being similar to having a 'cuckoo in the nest'. The GP Partners have been concerned about its impact on the overall smooth running of our practice and there have been some very difficult conversations with other practices.

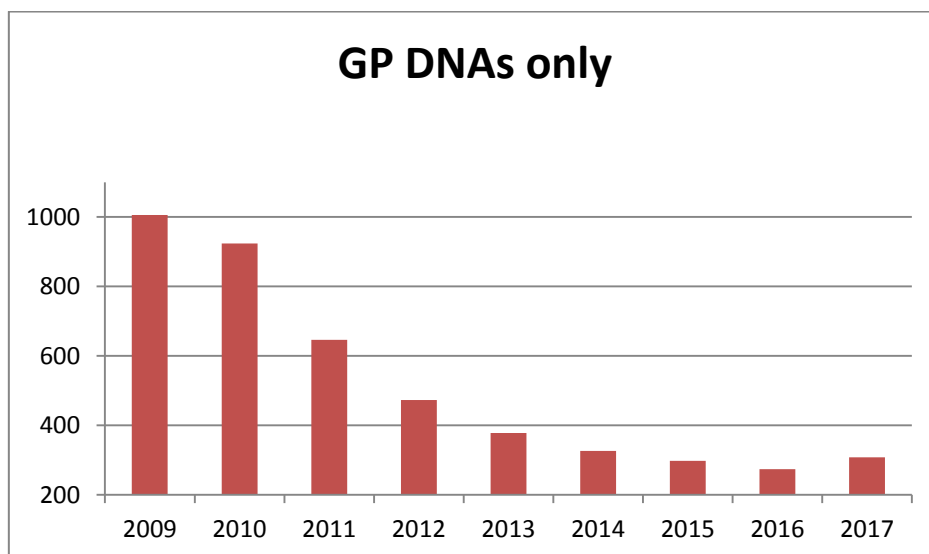
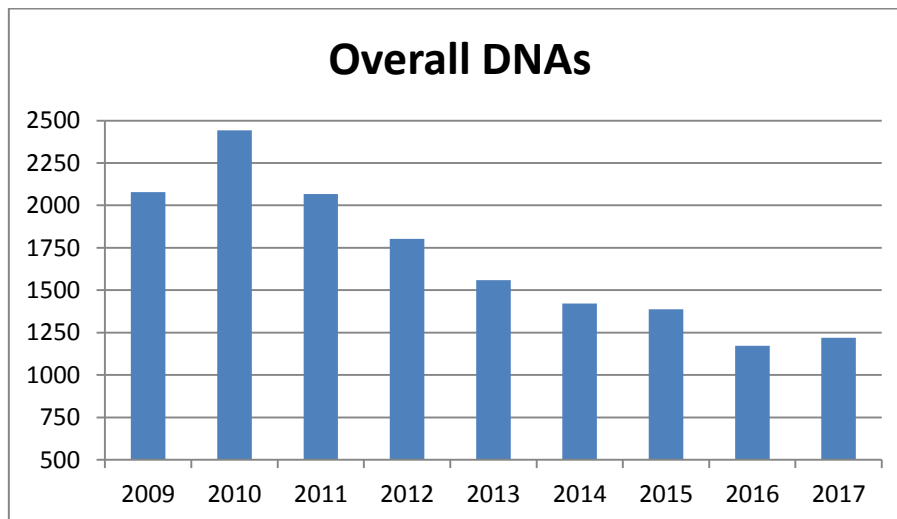
We feared at one point that the hub would cease at Peartree but thankfully for the moment we have been able to work our way around the issues.

The future of hub services from our surgery building will be contingent on these not adversely affecting our mainstream services.

(iii) Did Not Attend Analysis (DNAs)

Extra appointments are of course most welcome but can be undermined if other appointments are needlessly wasted. Long standing members of our Patient Group will be aware that we have been robustly managing what we call DNAs for many years.eg *patient rings up at 0830 and is given a GP appointment for 1030 the same day then does not attend! Or is sent nurse appointment and does not attend.*

For the first time in many years, our DNAs have showed an increase in 2017 though this was only marginal. It is a timely reminder that we cannot take our eye off the ball.



(iv) Reception triage

One of the dilemmas for many practices is understanding how best to direct patients to the most appropriate clinician or professional.

We spoke in the last meeting about how we planned to do this commencing over the winter – commonly called a triage system. We are particularly encouraging patients to use the Pharmacy First service for minor ailments so that GP appointments are used correctly for more concerning issues. **We are very interested in the views of our Patient Groups on how this is working for them and their families; can we improve communication around this and anything else that we need to be aware of. Please let us know.**

You may find it useful to have a reminder of what the Pharmacy First scheme is all about. Heres what we said in an earlier Briefing Note.



This new scheme has been a welcome addition to patient services ..... Data suggests around 30 of our patients a month were using the service in the early months of operation. We hope that this relieves the pressure on GP appointments and patients receive a quicker and more appropriate service.

The scheme offers free advice and treatment for minor ailments, without a visit to your GP for:-

- Athlete's foot
- Bacterial conjunctivitis
- Constipation
- Dental pain
- Diarrhoea
- Earache
- Haemorrhoids
- Hay fever
- Head lice
- Insect bites/stings
- Sore throat
- Teething
- Temperature/fever
- Threadworms
- Thrush

Full details of the scheme and who qualifies is available from our Reception or your local Pharmacy.

(v) Patient self-help



The Practice continues to identify a number of patient driven initiatives to foster better patient self-help. This has the benefit of a better quality of life for our patients, keeps them well and hopefully in less need of our assistance. The latest initiatives are summarised below.

**FENO testing wheezy children.**

We have worked with secondary care colleagues to individually assess 28 children who are particularly vulnerable to asthma exacerbations. Parents have been reminded to check their childrens compliance with medication and individual patient needs have been actioned by clinicians. Follow up activity has taken place and shown tangible improvements.

**Poorly controlled diabetics.** (Diabetes Enhanced Service)

We have worked with the hospital diabetologist to assess 12 of our poorly controlled diabetics on a case by case basis assessing their individual needs and a plan to address these. A further session is planned for April to assess a further cohort of patients.

**Winter Awareness session.** This was run by our colleagues from Healthwatch to support vulnerable patients over the winter period and mirrors previous years activities by the city council. We have a nominated contact at Healthwatch to foster a good working relationship. Healthwatch attended our last meeting.

**Bowel Cancer screening advice** Patients from Peartree MC were invited to a session at a neighbouring practice to continue to promote screening of at risk groups.

**Prostate cancer (PSA) screening.** Dr Singh gave a presentation at the last meeting of this group on prostate cancer screening. A previous audit in August 2017 identified 34% of males over 65 had a current PSA test (since January 2014). We have now pushed those tested up to 65%. Prostate Cancer has recently become the cancer type most responsible for male deaths nationally.

**Chronic Obstructive Pulmonary Disorder (lungs).** Advice group with Livewell to help patients to best cope with their condition.

**Breast cancer screening explained.** Another advice session for nine ladies has been held since the last Patient Group meeting.

**Walking Group.** Our Health Care Assistant is looking at the viability of setting up a weekend walking group in 2018.

**Arthritis support group.** We have been asked to host a support group by one of our patients. This is being arranged with the help of the Care Co-ordinator. Possibly April 23.

(vi) **“Frequent Flyers”**

The Care Co-ordinator has reviewed frequent disproportionate users of our services to see if other alternatives might better serve their needs.

**Patient Services Improvement Action Plans**

The Spring Patient meeting is when we have traditionally reviewed our aspirations 12 months previously and looked to set benchmarks for the next twelve months. We have regularly produced Action Plans each year and reported on these. They are also posted to the website.

We are particularly interested in patient comments on our plans for the next twelve months plus any feedback on the previous twelve months.

Appendix A shows the 2017-18 Action Plan with comments on how these initiatives have progressed.

Appendix B is a draft plan for 2018-19 subject to the approval of this meeting & the Ladies Only meeting in March. It will be revisited in the light of any Patient Group comments.



### **Demise of Derbyshire Carers ?**

We have worked closely with Derbyshire Carers over the last year to provide carers assessments in the surgery. We have helped nearly 40 carers in this way to identify any wider health & well being support that they could access.

It is with considerable disappointment that we hear that funding may be withdrawn from Derbyshire Carers and that we will have to suspend this service until future City Council plans are clearer. Our 2018-19 Action Plan proposes an action to fill this void. Initial discussions have taken place with Creative Carers on Charnwood Street and we are exploring ways to work with them. **An initial proposal is to develop a Womens Muslim Group. This will be discussed in more detail at the Ladies Group.**

### **New Care Co-ordinator**

We are delighted to welcome Aneesa Ajaib as the new Care Co-ordinator. Aneesa will work Mondays & Thursdays at Peartree Medical Centre. This is an extra day per week compared to what her predecessor was funded to provide.

## **Vision & Terms of Reference**

It is a little while since we considered our Vision statement or as it could be called – this is what we are about!

Here it is



In partnership with our patients,  
Peartree Medical Centre aims to provide :-  
“High quality flexible patient care sensitive to the  
individual needs of all patients”.

This will be based on our core values which are to:-

- Recruit, support, train & empower caring staff to deliver a high quality service
- Provide clear clinical and non-clinical leadership so that staff have a consistent understanding of what is expected
- Be proud of what we do and how we can positively impact on some of the most disadvantaged & vulnerable in our society
- Promote patient self-help and health education through delivery of the Practice’s own education programme or in direct partnership with other agencies/sectors where this will be for the benefit of Peartree patients.
- Share success and learn from poor outcomes
- Above all, keep the patient at the forefront of our thoughts and not be distracted by anything else.

**We simply ask patients if this still reflects what they have come to expect or what we should continue to aspire to.**

There is also a Terms of Reference for the Patient Group meetings. Copies will be available on the night & we can review these at the same time.

This is part of regular process to review the terms of reference of both internal & external meetings that Peartree MC staff attend.

## **Freedom To Speak Up Guardian**

The surgery is committed to fostering an open culture amongst staff, patients and other people who come into contact with our services. We hope this open culture will encourage comments, feedback, complaints and concerns to be raised without fear or the fear of intimidation. It is important that everyone feels that we are operating in a safe and effective way.

# WHISTLEBLOWER

We are therefore happy to embrace the latest guidance to nominate a Freedom to Speak Up Guardian. This Guardian is independent of our surgery and comments can be directed to them if anyone should have any concerns.

The Practice Manager at Derby Family Medical Centre has agreed to become the Guardian on behalf of Peartree Medical Centre. Comments should be directed to her in the first instance at Derby Family Medical Centre, 1, Hastings Street, Derby. DE23 6QQ 01332 773243.

Our whistleblowing policy has also been updated. A copy of this is available on request.

## **Health Visitor**

The last Briefing Note talked about the wider clinical & social support that is available to patients. Last time we spoke about the Care Co-ordinator and this time it's the turn of the Health Visitor.



Health visitors are qualified nurses who have undertaken specialist training. Health visitors have experience in child and adult health, health education and promotion.

The team comprises health visitors, community staff nurses, community nursery nurses, family support workers and clerical staff. The team works closely with statutory and voluntary agencies including children and young people services, youth services, child care providers, Connexions, paediatricians, GPs and other health professionals.

At Peartree Medical Centre, the Health Visitor is invited to our monthly clinical meeting and is available to support the clinical team if they have concerns about particular patients.



The Health Visitor service offers the following services to new parents – birth visit and subsequent health reviews at 6-8 weeks, 6-12 months and 2-2.5 years.

The Health Visitor is there to provide support on all aspects of child rearing or if parents are struggling to cope; have depression or other ill health concerns.

We can put you in touch with your nominated Health Visitor if you require extra support.

The Health Visitor can have a pivotal role if Peartree clinicians identify safeguarding issues for our patients.

### **Text Messaging Patient Information Strategy**

As part of our review of all forms of patient feedback (see complaints & FFT below), we have looked at developing a Patient Information text messaging strategy to provide better information to our patients.



Our clinical system tells us that over half of our adult patients (16 years of age & over) are registered for SMS services. This is a free service for both patients and the surgery and therefore represents an effective way to convey common messages to a substantial part of the patient population.

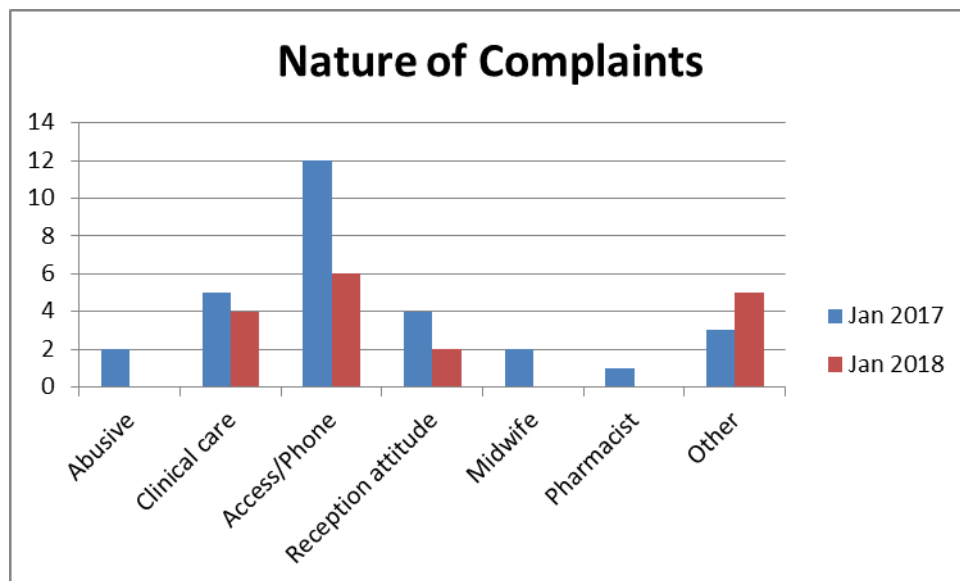
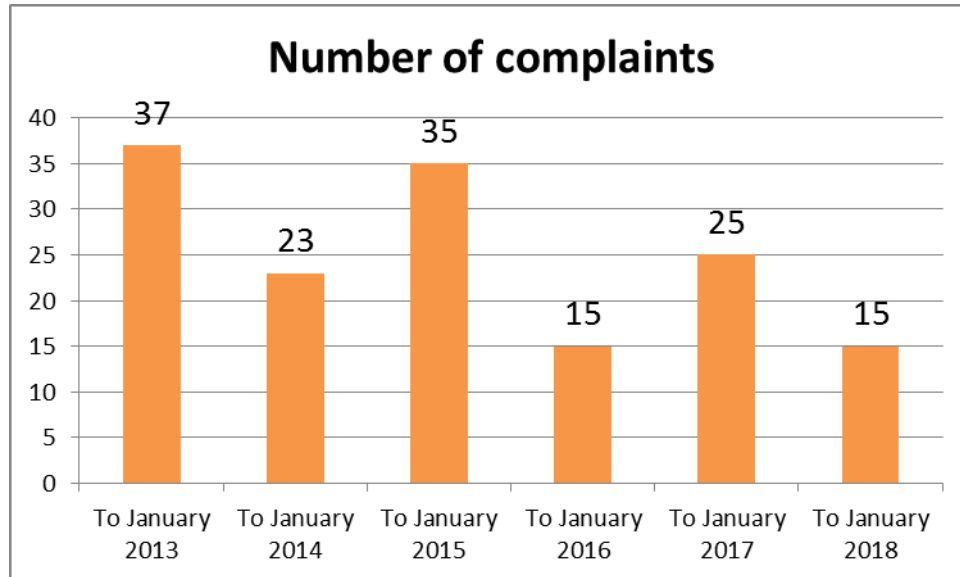
Over 2018, we will target specific patient cohorts with messages that will inform and help patients to make the best use of our services. We will cover:-

- ❖ Online Services
- ❖ Pharmacy First
- ❖ Role of the Care Co-ordinator
- ❖ Role of the Clinical Pharmacist
- ❖ Electronic Prescription Service

If there is anything else that patients feel might be helpful, please let us know.

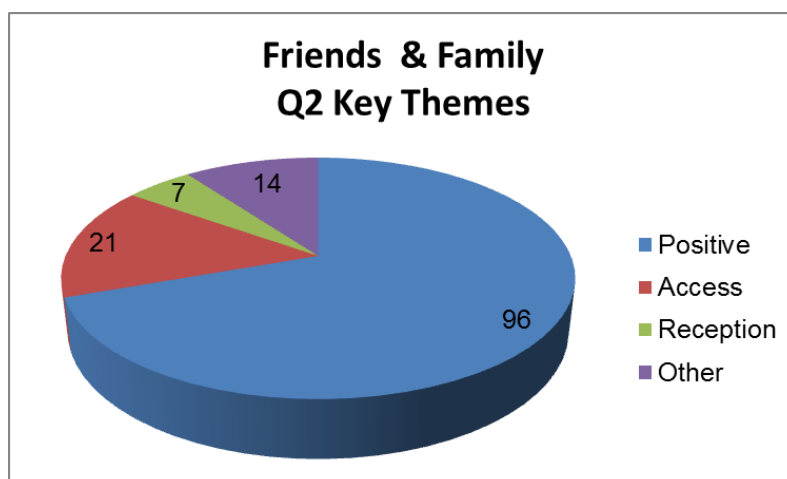
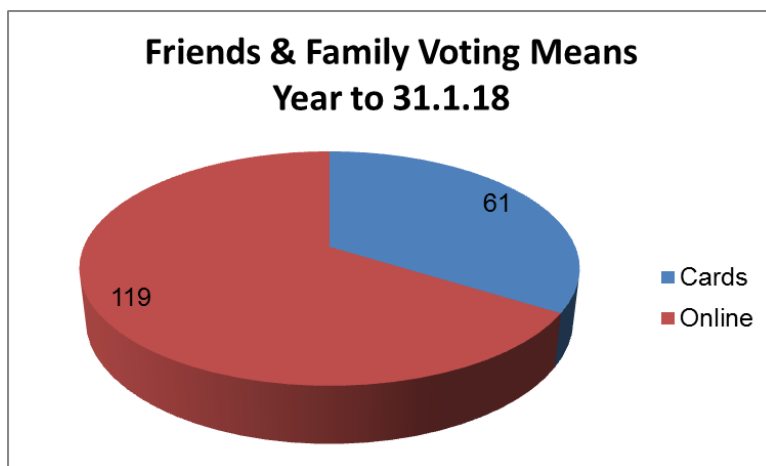
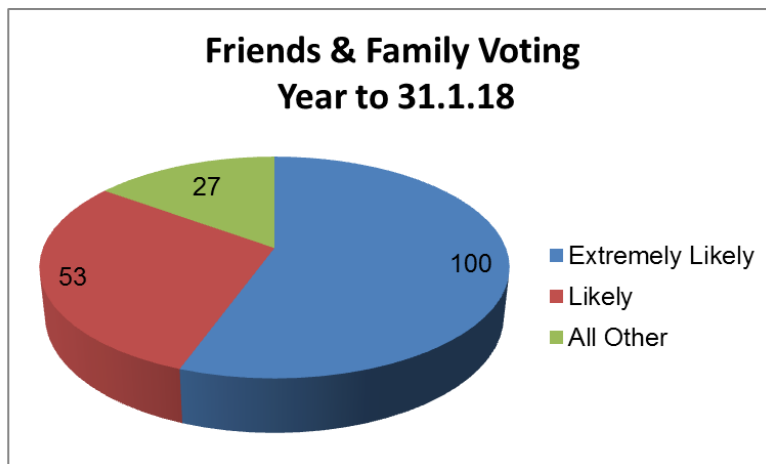
## Complaints

Each year the surgery reviews its formal complaints for the previous 12 months alongside any recorded Significant Events, Friends and Family Test feedback and other information. A full report will be posted onto the website and the key data is repeated here in this Briefing Note.



## Friends and Family Test (FFT) data

The latest FFT for the last twelve months shows the following:-



Access features in both complaints & FFT data and this Briefing Note & accompanying Action Plans sets out a number of initiatives to improve this and to safeguard the effective use of scarce resources.

## **All change!!**

It is with a heavy heart that we are bidding goodbye to staff who have played a critical role in supporting patients and delivering 'outstanding' care to the community over many years.

Ann Sutton, Advance Nurse Practitioner, has decided to retire at the end of May after 16 years of sterling high quality service to the patients of Normanton. We wish her & her husband a long & happy retirement. We will be advertising for new staff shortly.

Kim Lowe, Community Matron, has also decided to retire and to work part-time – but it will not be with us. Kim will be familiar to the family and friends of our particularly vulnerable & unwell patients who she has supported over many years. We await news of her replacement.



Rajvinder Shanker, Care Co-ordinator, has returned to her substantive post at Lister House surgery having helped us 'temporarily' for over two years. Raj has worked tirelessly to support clinicians and patients alike.

Shovpreet Birring, regular midwife, is currently on maternity leave and Luisha Dhindsa is providing cover. Luisha is well known to the surgery having worked with us previously.

Gurpreet Chattha, Medicines Management co-ordinator, is relocating to the West Midlands and will be leaving in March. Gurpreet and her colleague Jeets provide invaluable support to clinicians and patients on all medication & drugs issues. We await news of her replacement.

Misba Najeeb, bank receptionists, has decided to spend more time with her family.

We thank all staff for their contribution to the Peartree Medical Centre team & our patients and wish them well in the future.

[www.peartreemedicalcentre.nhs.uk](http://www.peartreemedicalcentre.nhs.uk)

*Rated 'Outstanding' by the Care Quality Commission*

**APPENDIX A**

**Peartree Medical Centre Patient Services Improvement: Action Plan 2017-18**

<b>Theme</b>	<b>Agreed actions</b>	<b>Nominated Lead</b>	<b>Timescale</b>
<b>Patient Online Services</b>	With the Peartree Patient Groups, consider ways to best promote the benefits of all online services	Practice Manager	20% target for online users reached in 2017-18 from a low starting point. Ongoing action to promote usage in 2018-19. NHS Digital have asked the practice to share learning on how numbers increased so dramatically.
<b>GP Access</b>	Support the new Clinical Pharmacist to reduce the burden on GPs and to provide improved access to patients for medication reviews and advice.	Clinical Pharmacist	Ongoing. CP is now seeing some patients. Abstraction for training has limited impact in 2017-18 but well placed to improve this in 2018-19.
<b>Patient Health &amp; well Being</b>	To continue to promote the key health and well being themes for our patients to promote greater understanding and self help	Practice Manager with support from clinicians	Report sets out 2017-18 activity much of which is embedded as an annual programme. Some new initiatives for 2017-18. Ongoing.

Theme	Agreed actions	Nominated Lead	Timescale
<b>Patient Health &amp; well being</b>	Promote free diabetes & pre-diabetes programmes to our at risk patients and implement any offer from the SDCCG for an enhanced service for diabetes	Practice Manager/Dr DNP Singh	Workshops have been held as well as assessment sessions. Diabetes Enhanced Service specification implementation started. To continue in 2018-19,
<b>Collaboration</b>	Continue to engage with peers and the SDCCG to promote more local services for our patient population.	Practice Manager	Hub working & collaboration
<b>GP Access</b>	Consider with the Care Co-ordinator ways to support Peartree Frequent Flyers which reduce the reliance on GP appointments	Practice Manager	CC is engaging with patients identified as Frequent Flyers from clinical system.. Ongoing.

Code:

Red – no progress

Yellow – progress but more required

Green – complete or largely complete

**Peartree Medical Centre Patient Services Improvement: Draft Action Plan 2018-19****APPENDIX B**

<b>Theme</b>	<b>Agreed actions</b>	<b>Nominated Lead</b>	<b>Timescale</b>
<b>Patient Health &amp; well being</b>	Continue to promote free diabetes & pre-diabetes programmes to our at risk patients and embed the Enhanced Diabetes Service for our poorly controlled diabetics on an individual basis.	Nursing team	2018-19 ongoing.
<b>Patient Health &amp; well being</b>	Continue to work with secondary care colleagues to improve the clinical outcomes for 'wheezy children' at risk of asthma exacerbations or A&E admittance	Nursing team	Q1 and Q2 2018-19
<b>Patient Health &amp; well being</b>	Liase with the successor organisation to Derbyshire Carers to ensure that patients have access to wider health & social care through in surgery assessments.	Practice Manager	Await City Council plans
<b>Collaboration</b>	Continue to engage with peers and the SDCCG to promote more local services for our patient population.	Practice Manager	Part of our Vision statement
<b>GP Access</b>	Robustly manage and develop the new Reception triage system to improve the availability of GPs for more appropriate consultations.	Practice Manager & Senior Receptionist	2018-19 ongoing
<b>Patient Online Services</b>	Building on the dramatic increase in online users in 2017-18, with the Peartree Patient Groups, consider ways to best promote the benefits of all online services	Practice Manager	Specific programme to be developed. Use of management data (RAIDR) to pinpoint actions