

Milton Surgery Patient Participation Group

a. Date: 5 July 2017
 Time: 7 pm
 Venue: Milton Surgery

b. **Apologies:**
 Eileen Henderson
 John Utin
 Norma Kay
 Chris Thomas
 Pam Vincett

Present:

Hazel Smith (HS) committee member
Bryan Betson (BB) chairperson
Bob Pain (BP) Committee member
Dr C Hunt (CH) GP
Frankie Williams (FW) committee member
Angie Carpenter (AC) secretary
Sue Nunn (SN) committee member

c. **Acceptance of last minutes**

d. **Final rounding up of health stall issues** for Friday 7 July.

Discussions around the health stall at Milton Primary fete. Decisions made on various aspects of the event satisfactorily. Time, place and content of stall confirmed.

Post event feedback: The event was a great success. The stall offered 3 games for the children to participate in. 'Guess the fruit' was an enormous success, and the 'anatomy apron' and 'healthy meal' games proved great fun!! In all a total of about 87 children participated, accompanied by their parent/s. All children were rewarded with a 'well done' sticker and fruit!

e. **Dr. Steward's retirement present.**

Discussion was undertaken around the PPG 's plans to present Dr. Steward with a retirement present from the group. The question of whether this is appropriate was asked, but generally the group felt that they would like to say thank you in their own way and as a group. SB has purchased a rose bush, which will be presented to her at a time to be discussed. Dr. Steward has requested that patients wishing to make a donation contribute to the charity of her choice, The Holy Cross Hospice charity, in Gaborone, Botswana. Dr. Steward's last day at the surgery will be Monday 31 July.

f. **The way forward.**

The new GP Dr. Uju Mokah, will be starting on Tuesday 1st August. She is currently practicing in Huntingdon in general practice, and will be taking up a full-time post here at Milton.

PPG to discuss **fund-raising** (see later) for the surgery at its next meeting.

Tracy **community warden and navigator** to be invited to a meeting by HS.

g. Any other business:

- FW asked CH about the **current staffing situation** at the surgery. He advised us that they are currently re-recruiting for reception/admin staff. Otherwise staffing is at normal levels.
- SN advised us that the **Community Café (CC)** is going well, but that new members are always important and encouraged. She would like to encourage more men to attend as currently the main users of the CC are female. Also more younger visitors would be very welcome. CH asked if there is a local NCT (national childbirth trust). We can look into this. In the meantime SN asked if CC leaflets could be handed out in the surgery. BP reported that the location of the CC in Histon is more central, and wondered if we suffer in Milton because the CC is not more central? SN agreed.
- FW asked CH about the levels of **Community Care** in our catchment area. She asked about bed-blocking, and whether there is a problem in getting people who are hospital-bound back into the community. CH responded that there is a known lack of care across the country, including this area. He suggested that there needs to be a higher level of care from the discharging hospitals in order to get patients safely back into their homes. He emphasized the importance of joining up the care that is offered and the difficulties surrounding this happening effectively. FW asked if there is anything that would help this, emphasising the importance of the community participating in this care and support. Discussion revolved around the role that young people can play in this support of the elderly and lonely in their own homes in particular. She told us about Impington Village College and its' role in community support. She will ask the college about their community involvement.
- CH described an area that has put a big investment into care of the elderly. The extremely high proportion of elderly people in Torquay has meant that the local authorities have had to make a huge effort to fund the needs of this population.
- It was agreed (FW BP SN) that we need to keep people connected so that they are aware of what is available in our community, and the role of the **'Community Navigator' (CN)** was seen as very important. HS advised the group that Tracy has people referred to her in order for her to direct them appropriately, and CH confirmed to FW that appropriate referrals are also made regularly by the surgery staff. He also advised the group that advice is often backed up with written information. BP advised us of how the Duke of Edinburgh award scheme provides young people, as part of the scheme, to visit elderly people in their own homes. He also looked at the CN role, and how Tracy operates in a part-time capacity in her roles

of CN and community warden, and how she does as much as she possibly can within these limitations. He reminded us all of the voluntary nature of the CN role at this time.

- CH then introduced the question '**how do you make a healthy community?**' and discussion followed. He suggested that maybe it would be a better idea to have more than one person in the role of CN, thus lightening the load of Tracy, and offering more flexible contact time. He asked if we might be able to recruit a group of recently retired people to fill this need? BP went on to ask how did we feel we might contact these potential helpers. Re-advertising was one suggestion. SN suggested asking Tracy how she feels about this possible way forward and the group will invite her to a meeting again to discuss these issues. HS will be meeting with her next week and she will invite her.
- FW asked CH if the surgery has a '**wish list**' of things such as equipment that the **surgery needs**. CH advised us about the care of patients with leg ulceration in our community, and how much quicker it would be for them if the surgery had the correct equipment to assess the blood supply in the legs of these patients, and to offer the appropriate compression bandaging/hosiery in a shorter time than is possible at present. He said that if the surgery were able to buy a DOPPLER machine, then a nurse in the surgery, already trained in doppler assessments, would be able to carry out these assessments instead of patients having to be referred for assessment out of surgery. The PPG are keen to **fund-raise** for this equipment and this issue will be discussed in a future meeting. FW also raised the possibility of asking Milton Primary to add this to its' own fund-raising agenda.

h. Date of next meeting: Tuesday 19 September

i. Meeting closed.