



Patient Participation Group

**Old Town Surgery  
Patient Participation Group  
Meeting 15<sup>th</sup> June 2017 at 18:45 hours**

**Attending:**

(KT) Krystyna Tworek – Treasurer  
(HS) Hayley Slatter – Practice Manager  
(ES) Elaine Sullivan – Secretary  
(KB) Karen Burgess  
(RP) Rupal Patel – new attendee  
(JG) Jo Garton - previous virtual member  
(briefly) Dr Maggie Carson

**Apologies from:**

(CO) Chris Ockwell– (Acting) Chair  
(SB) Susan Bradford  
(BB) Beryl Bowles  
(TB) Terasa Beach  
(CW) Chris Watts – Cllr/patient  
(NW) Nadine Watts – Cllr/patient

Virtual/non attending membership (email only)

**Agenda**

1. Minutes from the last meeting (11 May 2017)
2. Actions from the last meeting
3. Guest visitor(s) - none
4. PPG Objectives
5. Complaints handling (new item)
6. Practice Manager's update (standing item)
7. PPG Forum (standing item)
8. Special Interest (standing item)
9. Accounts & Fundraising (standing item)
10. AOB
11. Date of next meeting

**Welcome and apologies**

Apologies were given for the meeting Beryl Bowles, Chris Ockwell, Susan Bradford, Chris and Nadine Watts and Terasa Beach.

One of our existing virtual members Jo Garton attended for the first time and as she had previous

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experience as Chair in other committees, took the role on for the meeting. Proposal is for Jo Garton to be nominated as Chair at the AGM. Jo has confirmed her agreement to do so if the proposal is accepted at the AGM. CO, acting Chair has already stated that he is more comfortable to be Vice Chair going forward.

**1. Minutes of the last meeting**

Minutes of the May 2017 PPG meeting were discussed and agreed to be an accurate account of the meeting.

**Action: HS** to upload a copy of the minutes for the May meeting on to the PPG page of the surgery website.

**2. Actions from the last meeting**

Action 1. Done (standing item). HS also acknowledged that previous minutes were missing from the website, but that this has been corrected.

Action 2. Close. No feedback being received from

Action 3. HS discussed with OTS staff; Closed

Action 4. HS/CO attending Commonweal on 05/07. Action Closed

Action 5. C/Fwd. CO to bring to next meeting (13/07)

Action 6. Done

Action 7. Done.

Action 8. Done.

Action 9. Done.

**3. Guest Visitor – none**

**4. PPG Objectives (see Appendix A)**

**PPG Communication Strategy (ES)**

ES stated first draft of the PPG Communication Strategy should be available for Review/Approval at the PPG AGM meeting on Thursday 13<sup>th</sup> July.

**5. Complaints handling (standing item)**

None.

**6. Practice Manager's update (standing item)**

Staff leavers. HS informed all of Dr Maggie Carson's leaving at the end of June. (Dr Carson briefly attended the meeting). PPG would like to thank Maggie for all her hard work at the surgery; she will be greatly missed.

POD – Prescription Ordering Services. At previous meetings HS has confirmed that OTS are unable to offer this service. The same applies to Eldene Surgery. The issue relates to the surgeries' software system which is not able to interface with the POD service. As this is an Information Governance issue, this has been escalated to the Swindon Clinical Commissioning Group who have agreed to investigate the matter. Resolution is hopeful within 3-4 months.



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National Directive. HS informed the PPG of the National Directive to have WiFi available in all practices by end December 2017. It was suggested that this be added to the Agenda in August for a progress report.

County Ground Meeting – Blood Donor. HS stated that HS and DR Heaton attended a meeting at the County Ground to give blood. The Blood Donor team have stated they will be back at the County Ground on 4<sup>th</sup> November. HS is considering running a campaign to let patients know of the event in November to boost blood donor uptake. KT mentioned that as she is a regular blood donor, she receives information on where the blood donation teams will visit in the area. This information is also available from the Blood Donors website and via this [link](#).

#### 7. PPG Forum (standing item)

CO attended the meeting this month; main focus on Diabetes (see press release Appendix B). The PPG discussed the option of running the next Education Evening on this topic and engage with the Diabetes Nurses and other local contacts to give their time. HS mentioned Dr Vaks, consultant in Diabetes and Endocrinology.

KB mentioned that she is a user of the new Oviva App, which OTS is piloting for three months. Patients must be referred by the practice to use this service. The App monitors food intake, and can also connect to 'fitbit' and other health monitors to monitor weight and activity.

As per the Press Release, statistics show that "Type 2 diabetes usually appears in people over the age of 40, though in South Asian people, who are at greater risk, it often appears from the age of 25". Using RP's connections with the Hindu community, it may be possible to get the women who regularly meet at the Broad Green Community Centre to come to one of these educational evenings on Diabetes, particularly if we could use the Broad Green Community Centre as a potential venue for the evening.

The PPG discussed leaflets in the Gujrati/Hindi language which would further encourage and persuade patients from the Asian community to attend.

**Action: HS** to contact Dr Vaks' secretary for potential dates.

**Action: RP** to provide names and contacts for the venue to the PPG for possible education evenings.

**Action: KB** to contact Diabetes UK re leaflets in different languages

#### 8. Special Interest (standing item)

None



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**9. Accounts & Fundraising**

KT prepared the Income and Expenditure accounts for the PPG. This is in preparation for the AGM next month when a full Treasurer's report is expected for 2016/2017. KT mentioned the need to use some of the tombola items as they are perishable and near their end date. HS will suggest the OTS team make a donation to the PPG funds for any items they wish to 'buy'.

JG as acting Chair offered thanks to the Treasurer for an excellent report.

**10. AOB.**

Education Evening – feedback from the event. ES confirmed this will be available at the AGM meeting. To date only 5 people have responded.

ES mentioned a recent CPR event at work. Nationwide have the kit and volunteers to facilitate a CPR session at the surgery. **Action: ES** to explore the options and report back.

**11. Date of next meeting:**

AGM meeting(s) will be: 13<sup>th</sup> July 2017.

If time permits, the next meeting will run after the AGM

Meeting closed at 19:55 hours



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Appendix A

PPG Objectives 2016/17:

<b>Objective</b>	<b>Owner</b>
Website Review & comparison with best practice at other surgeries	Bowen W Krystyna T Elaine S Karen B
Carry out 2-3 Education Evenings (with the next possible subject being – “Young Persons”)	ALL
PPG response / reaction to the July 16 CQC Inspection report (ES to look at Poster options to promote the GOOD result)	Complete
Maintain the HealthWatch interface & try to influence its activities	Chris O Krystyna T Susan B
On a quarterly basis visit other PPG’s to understand their best practices & current issues	Chris O
Get ideally (2/yr) in person updates from the CCG	ALL
Develop & extend our Patient Communication Strategy	Elaine S
Challenge surgery on its progress on specific (mandatory) tasks (i.e. patient data, iPOD etc.)	ALL



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Appendix B

## **Diabetes Week to focus on education for patients**

### **Diabetes Week kicks off on 11 June 2017, and this year the theme is: Know Diabetes. Fight Diabetes.**

While a lot of people have a good understanding of diabetes and how to manage it, many others aren't getting the right help and support to look after their diabetes.

Today, 65 people will die early from the condition and hundreds more will face life-changing complications that could have been avoided or delayed if they'd had the right knowledge and support to manage their diabetes. There are currently 12,924 patients in Swindon on the diabetes register which equates to a prevalence rate of 7.1%, higher than the England average of 6.6% (2015/16).

Diabetes education courses make living with diabetes easier. Whether you have Type 1 or Type 2 diabetes, it can feel like there is a lot to learn. But going on a course can help you understand what diabetes is and how it affects your body.

People who have been on a course feel more confident about looking after their condition and are less likely to suffer complications. According to NICE (National Institute for Clinical Excellence) everyone with diabetes should be offered structured education and it is also one of Diabetes UK's 15 health care essentials, these outline the minimum level of healthcare everyone with diabetes deserves and should expect.

Martin Sweet, 60, of Old Town, Swindon was diagnosed with type 2 diabetes 2 years ago. He attended the Living With Living Well course which is run by the Swindon Live Well Hub and teaches people about the benefits of a healthy lifestyle, focusing on diet and exercise.

Martin said "The course was friendly and welcoming. It gave me the chance to ask questions and meet people who are going through the same experiences as me and gave me the feeling that I was not alone.

"It came as a bit of a shock when I was diagnosed with type 2 diabetes but I now have a better understanding of my condition and what I need to do to manage it.

"I have cut out all sugary foods and eat plenty of fresh fruit and vegetables and feel much better now that my diet is under control".

Since the course, Martin attends 3 gym sessions a week and cycles 3-4 times a week. Since gaining better control of his diet and exercise, his sugar levels have been normal for the past three checks.

Everyone in the UK with diabetes should be offered a free diabetes course by their doctor, nurse or consultant. Whether you're newly diagnosed or have had diabetes for a while, make sure you ask for a referral to a course.



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Here in Swindon, there are courses available for people with Type 1 and Type 2 diabetes. There is a dedicated website for Swindon diabetes patients at [www.swindondiabetes.co.uk](http://www.swindondiabetes.co.uk) and details of all available education courses are listed there.

These courses will teach you that no food is off limits, only how much and how often you can have it. They will teach you how exercise helps you control your blood levels as well as your weight, what your type of medication is doing and why it is needed and what the side effects are, if any. You will also meet others who want to know more about their diabetes, and find out how they are managing and what food they have found works for them.

Dr Ayo Oyinloye, Swindon Borough Council's Consultant in Public Health Medicine, said: "People diagnosed with diabetes can live a healthy life if they manage their condition correctly. This involves eating healthily, exercising and using the right medication.

"One of the best ways to take control of your diabetes is by attending the structured education course. This course will empower people with the skills to cook and eat healthily; know the right type and level of exercise; give advice on the correct use of medication and raise awareness of complications of diabetes at an early stage. If you haven't been on a structured diabetes education course, ask your GP or Diabetes Nurse for advice on how to register."

## NOTES TO EDITORS

### Swindon CCG

- Swindon CCG Mission: to optimise the healthcare of the people of Swindon and Shrivenham.
- Swindon CCG vision: to ensure everyone in Swindon and Shrivenham lives a healthy, safe, fulfilling and independent life and is supported by thriving and connected communities.
- Swindon CCG covers a population of 231,515 and comprises 25 member GP practices.
- Swindon CCG commissions c£253m of local health services.

### Type 1 Diabetes

Type 1 diabetes accounts for about 10 per cent of all adults with diabetes and is treated by daily insulin doses – taken either by injections or via an insulin pump. It is also recommended to follow a healthy diet and take regular physical activity. Type 1 diabetes can develop at any age but usually appears before the age of 40, and especially in childhood. It is the most common type of diabetes found in childhood.

### Type 2 Diabetes

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Type 2 diabetes usually appears in people over the age of 40, though in South Asian people, who are at greater risk, it often appears from the age of 25. It is also increasingly becoming more common in children, adolescents and young people of all ethnicities. Type 2 diabetes accounts for between 85 and 95 per cent of all people with diabetes and is treated with a healthy diet and increased physical activity.

In addition to this, medication and/or insulin are often required.

In Type 2 diabetes there is not enough insulin (or the insulin isn't working properly), so the cells are only partially unlocked and glucose builds up in the blood.





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## Appendix C

### Useful contact(s)

#### Contact details for MP Robert Buckland QC's office

Andrew Timlett

Parliamentary Assistant to Robert Buckland QC MP

Member of Parliament for South Swindon

01793 533393

[andrew.timlett@parliament.uk](mailto:andrew.timlett@parliament.uk)

29b Wood Street Swindon SN1 4AN

### Useful Links

This is what the Clinical Commissioning Group does

<http://www.swindonccg.nhs.uk/what-we-do>

This is what Seqol do

<http://www.seqol.org/health>

<http://www.seqol.org/careandsupport>

This is a link to the community services consultation

<http://www.swindonccg.nhs.uk/provision-of-community-services>

This is a link to the work of HealthWatch

<http://youtu.be/IGc0-L2BIXQ>

[Link to the RCGP/NHSE/BMA GP Workforce Action Plan](#)

[List of the national awareness days \(months\)](#)