

Harvey Group Practice Patient Participation Group

Meeting Minutes

Tuesday 21st January 2025

Present: Dr Faisal Chowdhury – Chair, Rochelle Larter – Vice Chair, Sophie Tunney – Secretary, Members of the PPG
Next meeting: Summer 2025

1. Presentations

Practice Update – Rochelle Larter

Diabetes – Dr Faisal Chowdhury

Social Prescribers – Bron Gulmohamed

Practice Update

- RL congratulated the PPG for approaching the one-year mark, having restarted in February 2024.
- The practices are fully operational after repairs due to fire damage in the summer. Roofing work and painting has completed, and the scaffolding has been removed, showing Harvey House's lovely new grey paint job.
- In November, Harvey Group Practice welcomed a new Reception Manager, Lizzie Bean. Lizzie joins the team after making a career move from veterinary practice where she started as a veterinary nurse and worked as a practice manager for a number of years. Having been with us for 2 months, she is settling in perfectly with the reception team and as a member of the management team. We look forward to the future with Lizzie driving our front of house!
- Since September we have had 2 new Salaried GPs join our team. Dr Hanmeet (Manny) Chawla joined us in October, from a GP in North London. He works with us 3.5 days a week and has become a valued member of the team. Dr Zoë Tristram-Fox started with us at the beginning of January. She is an experienced GP who is settling in well.
- At the end of January, we also have a Frailty Nurse joining us, Rachel Mansford, who will be helping us with the care of our vulnerable patients.

Q: Are the new GPs permanent staff and are they full time or part time?

These GPs have signed permanent staff contracts with us. Full time for a GP is considered to be 9 sessions (a session being one half day, 4hr10min), however 71% of GPs in England work less than 9 contracted sessions due to the increase in workload over the last few years resulting in the need to work unpaid overtime, usually from home in

the evenings and weekends. None of our GPs work 9 sessions per week the majority work 6 sessions per week.

Understanding Diabetes

- FC defined diabetes as a condition where the body cannot properly regulate its own blood sugar (glucose) levels. It is a chronic disease occurring when either the pancreas cannot produce enough of its own insulin (the hormone that regulates blood sugar) or the body cannot effectively use its own insulin.
- Type 1 diabetes is a type of autoimmune disease, where the body attacks and destroys the insulin producing cells of the pancreas. Type 1 diabetes is usually diagnosed in childhood or in early adulthood and is treated with insulin.
- Type 2 diabetes occurs when the body becomes resistant to insulin or cannot produce enough of it. This is most common in adults and linked to lifestyle factors, with a genetic component. The first line of treatment of type 2 diabetes is lifestyle changes and medication for blood sugar control.
- Gestational diabetes is a form of diabetes that occurs during pregnancy, it is usually managed with diet and lifestyle changes but can increase a person's risk of developing type 2 diabetes later in life.
- Long term complications of diabetes involve increased risk of heart disease and strokes, kidney damage, nerve damage, eye disease, issues with the feet and stress on mental health.
- Monitoring is an important aspect of looking after a patient with diabetes. Patients with diabetes will be invited to attend a yearly review by their GP but it is important for the patient themselves to actively monitor and participate in their diabetes care.
- People with diabetes, or those who are pre diabetic and wanting to prevent developing type 2 diabetes, are encouraged to eat healthy, focusing on reducing carbohydrates and exercise often to regulate their blood sugar.

Q: What is the diagnostic criteria for Diabetes and prediabetes?

We use a blood test called Haemoglobin A1C, which results show your blood sugar levels over the last few months and is the standard process for diagnosis type 2 diabetes. HbA1C is a standard blood test that is tested during NHS health checks, regularly if you have been diagnosed with diabetes or prediabetes or if your doctor suspects that high blood sugars are contributing to your health.

Q: Is diabetes a condition a clinician may suspect even if a patient does not mention the usual symptoms?

It can be, the Diabetes UK website says that many people don't experience or don't notice any symptoms of diabetes and it is often diagnosed during routine blood tests.

Q: Do you follow up on patients that have had gestational diabetes?

Yes, the gestational diabetes diagnosis stays in their record forever, meaning they will get picked up by various health monitoring searches we run for regular monitoring.

Social Prescribers

- BG explained that social prescriber refers to a member of the GP work force whose role it is to aid patients in improving practical, social and environmental factors that affect their health and wellbeing. Our Social prescribing team is made up of Bron and Sandra, who split their time working between our Practice and The Lodge Health Partnership. Patients are referred to them through a number of sources such as GPs, other practice staff, external organisation and self-referrals from the patient themselves. They focus on having person-centred conversations, asking “what matters to you? How would you like us to help?”
- Some of the ways they help patients include writing letters to support housing and finance issues, arranging foodbank vouchers for patients in need, completing home visits to address challenges around frailty and living conditions and a range of other signposting and referrals to improve wellbeing.
- The social prescribing team have taken on several projects over the last few months. Such as reaching out to all patients on the frailty register to assess and feedback to the medical team to improve care. In person events aimed at helping people who struggle to use technology to access services become more confident in using digital methods of access. Chatty Tables is an event run by the social prescribes, that has been very successful at the Lodge Surgery, inviting patients to come along, meet the social prescribers and ask any questions they might have. Harvey Group Practice is hosting their first Chatty Table, focused on carers, soon.
- BG expressed that she is planning a project for Christmas time 2025. Having visited many lonely patients this last Christmas, Bron has made a goal to try and visit all lonely patients who won't have friends and family next Christmas. She plans to speak to local charities and the PPG to see if they can help and get involved to spread some Christmas spirit with festive jumpers and mince pies.
- The next Digital Inclusion Hub event will be hosted on Wednesday 12th Feb 12.30pm – 2.30pm at Jersey Farm Community Centre, the PPG are welcome to attend or invite anyone they know who might benefit from support with our online forms or the NHS app.

Q: What will the Digital inclusion hubs do?

The goal is to help teach patients how to use the Accurx online request forms, sign up and navigate the NHS app for prescriptions and seeing their medical record. The hope is to also provide some education on online safety and being aware of scams.

Q: do you help with patients with poor motivation for to look after their health?

The social prescribers can refer on to several resources and organisations that will help patients improve their mental health, lifestyle and circumstances, in effort to encourage patient s to look after themselves.

Q: how are you reaching out to those who a digitally excluded?

We are making posters to display; we can send texts and emails. But our reception team are also making a list of patients they encounter who struggle with online access so that we can reach out to them and offer support.

2. Discussions

Members of the PPG discussed an email that was sent to them on 16th December from the practice, encouraging patients who can seek alternative care to use other services available due to overwhelming demand for GP services. The members of the PPG had varying thoughts, some found the email offensive, others did not mind it. The Practice team stressed that the same email was sent to all patients (those over the age of 16, with suitable mobile numbers or email addresses) and was based on a template used by many GP practices at the time.

The group discussed the use of Pharmacy First services, with some members saying that they haven't found a pharmacy that is offering the service and how it is not practical to see a pharmacist if you have chronic health conditions as they will not release medication except under very tight criteria. The practice team are aware of several pharmacies that do routinely see patients under the pharmacy first scheme. We are aware that sometimes our GPs direct patients toward a pharmacy when they are not suitable under the guidance the pharmacists adhere to, our GPs continue to improve their understanding of the referral criteria to reduce the number of patients that return to us.

The members of the PPG had some questions regarding the Physios that work out of our practice. Some people were displeased that the care plan provided by these physios sometimes involves YouTube videos. The Physios that work out of our practice are known as First Contact Practitioners, the purpose of them in General Practice is to identify issues and either suggest first line treatment (such as exercise) or refer to MSK specialist. Their service is provided by Nexus health who hold a contract with us, but the FCP are valued members of our team. There is a wealth of excellent physio exercises on YouTube and the FCPs only send videos they think are helpful.

3. Suggestions

These changes have been suggested by the PPG to the practice. They will be considered and discussed.

- Provide a list, perhaps on our website, of Pharmacies that will see and treat patients under the Pharmacy First Scheme.
- Change the hold/queue music on the phone system.

- Identify and flag patients who are digitally excluded so that reception team give these patients the additional help they need.

4. ACTIONS

Number	Action	Reason	By who?	When?
000	No actions set at this meeting.			

5. Date of next meeting

Meeting suggested for summer 2025, next meeting will be held at Harvey House Surgery.