

# Practice Patient Panel Meeting 31<sup>st</sup> August 2017

## Attended by:

### For the Practice Patient Panel

Colin Stiff  
Val Dixon  
Pauline Edwards  
Dave Moulder  
Arthur Harman  
Ann Davis

### For the Practice

Andy Potter - Practice Manager

### Guests

Chris Hopton

### Apologies from PPP Members

Colin Farlow, Ruth Sanders, Liz Rhodes

## (1) Agree minutes of the last meeting and any matters arising

The minutes were agreed. The following matters arising were noted.

- Ebbie Peters – Community Builder - Ebbie was unfortunately not available for this meeting but was keen to attend the next.

## (2) Chris Hopton – BT Barclays Digital Eagles

CH outlined the work the Digital Eagles were doing to help people gain more confidence in gaining online access and using all its resources. There was certainly a role for the Digital Eagles in providing facilitation sessions in the planned Library/Community Hub in Pinhoe. We thanked Val for introducing CH to the group.

## (3) Educational Events

With growing interest across Exeter to launch some sort of organised programme of events we revisited the topics suggested by the group, with Depression & Anxiety/Stress/Epilepsy and Sleep Issues high on the agenda.

## (4) Alzheimer's, Advance Decision to Refuse Treatment (ADRT), POA and Death Cafes

Arthur provided an interesting introduction to some of the issues here. Definitions were important and similar sounding terms could often be confusing.

An advance decision (sometimes known as an advance decision to refuse treatment, an ADRT, or a living will) is a decision you can make now to refuse a specific type of treatment at some time in the future. It lets your family, carers and health professionals know your wishes about refusing treatment if you're unable to make or communicate those decisions yourself.

The treatments you're deciding to refuse must all be named in the advance decision.

You may want to refuse a treatment in some situations, but not others. If this is the case, you need to be clear about all the circumstances in which you want to refuse this treatment.

An advance decision isn't the same as an advance statement.

An advance statement is a written statement that sets down your preferences, wishes, beliefs and values regarding your future care. The aim is to provide a guide to anyone who might have to make decisions in your best interest if you have lost the capacity to make decisions or to communicate them. What does an advance statement cover?

An advance statement can cover any aspect of your future health/social care. This could include:

- how you want any religious or spiritual beliefs to be reflected in your care
- where you would like to be cared for eg: at home, in a hospital, a nursing home, or a hospice
- how you like to do things, eg: you prefer a shower to a bath, like to sleep with the light on, etc.
- concerns about practical issues – for example, who will look after your dog if you become ill

You can make sure people know about your wishes by talking about them. By writing your advance statement down, you can help to make things clear to your family, carers and anybody involved in your care.

These advance decisions and/or statements might form part of Power of Attorney (POA ) and it was important to seek help and advice from bodies such as the CAB or Age UK to ensure your wishes were made clear.

Finally Arthur made mention of the death Café in Honiton. This was a safe and welcoming (not morbid!) place to meet and talk about death and dying, share experiences or just listen. With no agenda it is a discussion group rather than providing grief support/counselling.

We thanked Arthur for his interesting input.

#### (5) Any Other Business

##### Practice News Update

- AP noted that the list continued to grow, with a new half-time GP about to start to help meet the increased demand. Dr Anna Griffiths joined us from St Leonards Practice, where she had worked for several years.
- Cranbrook Pharmacy had recently been granted an excluded catchment area within a 1 mile/1.6 Km radius. This meant the Practice would lose its dispensing rights to approx 1000 patients. However given the younger demographic of the Cranbrook residents, the impact on our overall dispensing business would not be in proportion to the loss of numbers.
- Waiting Room Wi-Fi for patient use would be available in the early part of 2018 as part of a national initiative.
- Val noted a meeting at America Hall, “Pinhoe Community Hub - Making It Happen”, taking place on 8<sup>th</sup> September.
- The role/function of the Devon Referral Review Service (DRSS) was raised and AP gave some background information.

#### (5) Date of the Next Meeting

Agreed as Tuesday 5<sup>th</sup> December, later postponed to 16<sup>th</sup> January 2018.

\*\*\* The meeting closed and AP thanked everyone for their attendance\*\*\*