

PATIENT PARTICIPATION

PAD Patients at

Caen Medical Centre

on Tuesday 28th November 2017

Attendees

Dr Brian Bennett
Nurse Rhona Short
Dr James Thornton
Julie Tanton
Alan Boulden
Amy Carter
Helen Carter
Susan Davis

Colin Hart
David Hatton
Peter Lewis
Michael Moule
James Neighbour
Ann North
George Ransom

The practice invited 21 patients who are documented in their clinical records as having Peripheral Arterial Disease (PAD) to attend today's patient participation group meeting, 13 patients accepted the offer and 11 of those attended today's meeting, one sent apologies on the day.

Welcome/ Introduction

Dr Bennett started the meeting by thanking everyone for taking the time to attend and asked everyone to introduce themselves. Dr Bennett then explained that we hold patient participation group meetings on a quarterly basis inviting selected groups of patients with particular needs or conditions to discuss how we are doing at meeting their needs, the experiences they have encountered and how we might improve our services by asking them for their perspective on the service offered. He explained that after previous meetings minor changes or improvements had been implemented for the benefit of those patients using that service.

Practice Nurse Rhona Short was also present at today's meeting.

The following areas were raised and discussed.

Understanding Your Condition and Your Treatment Regime

Most of the patients present had a good understanding of their condition, most having developed PAD due to having another chronic disease such as heart disease, diabetes or suffering strokes. Dr Bennett explained that in most cases PAD has been developing for some time before the patient first starts to experience any symptoms. He said it can be associated to poor lifestyle or other underlying medication conditions or genetic.

Many of the patients raised questions about the use of statins in the condition and whether they are good or bad. Some said they had stopped taking statins completely as the side effects had been too severe. Dr Bennett said that statin use in PAD is still highly recommended but what is right for one patient may not be right for the next. It is important that patients discuss their side effects with their GP who can help the patient assess the benefits of taking medication versus the side effects, quality of life must be a consideration in this assessment. He explained that sometimes other statins can be tried and a different type may be better tolerated by the patient.

One patient said that it would be nice to have one pill to take rather than five!

One patient asked if their medication regime is reviewed by their GP. Dr Bennett explained that the GP will perform at least one formal medication review yearly this might be with or without the patient. However usually they perform a review each time the patient orders their repeat medication. He informed the group that the guidance and recommendations for the treatment of PAD has remained unchanged for some time and that statins and blood thinning drugs are recommended.

One patient reported that he experienced great pain relief after having angioplasty surgery in one leg. He has started to experience increased pain in the other leg and asked if he would be eligible to have the same surgery in this leg. Dr Bennett explained that some patient symptoms were greatly improved after angioplasty surgery and that he should consult with his GP to discuss referral back to the vascular surgeons.

Primary Care Input

The patients present on the whole were very pleased with the service they receive from the practice both with regards to their PAD and general medical care.

Many reported that the level of care received was superior to the care family members and friends living in other areas reportedly received.

One patient said that the service we offer to warfarin patients was wonderful. At his previous GP practice in Wales it would take up to three hours from blood test to dosing and that the patient had to remain in the clinic whilst this happened. With INR Star software running in the practice you receive a finger-prick blood test and are dosed within minutes, leaving the practice with all the necessary information and your next test appointment booked.

One patient reported that he was very impressed with on-line access for appointments and ordering medication.

A number of patients said they had seen the posters in the practice detailing the number of patients who do not attend their appointments and were surprised and shocked that the number was so high. Dr Bennet explained that this is a real issue for the practice and all the clinicians find DNAs frustrating. It was suggested by one of the patients present that we should adopt a 'refund if you attend' policy which he believed was being piloted in other areas.

The patients felt it was great that you could see a GP on the same day if needed, however most present tended to book in advance. None had experience of our telephone triage service.

One patient asked if the growing population of Braunton and the fact that people are living longer was causing concern for the practice. Dr Bennett explained that Braunton does have a higher than average elderly population and this does increase the number of home visits the practice performs in relation to other local practices. The GPs are also seeing and treating more patients with complex medical issues as everyone is living longer. He felt that Caen was in a good position and coping with increased pressure at this time.

Secondary Care Input

The group reported concerns with regards to delayed follow ups at NDDH. Many are now overdue follow up appointments with consultants. Dr Bennett encouraged those who are overdue follow up to make contact with the hospital concerned to check that they were still

on a waiting list and have not been lost to follow up. He also explained that if any patient gets into difficulty with any medical condition whilst waiting for follow up that they should make contact with their GP who will be able to help.

The patients reported that they were happy with the service and care they received from secondary care and were aware of the increasing pressures services were experiencing.

Some patients also reported delays waiting for vascular and heart surgery.

Most present had concerns for the future of the NHS and whether it was sustainable in its current format.

Some who had called NHS111 did not report good feedback. They reported that it often took some time for your call to be answered and then you often had to wait for a call back. One patient admitted that it took so long to get a response from NHS111 that he called A&E who told him to bring his wife straight in.

Doppler Assessment

Dr Bennett explained that the practice now has an automatic Doppler machine which can help diagnose PAD. This new Doppler machine is much quicker and less uncomfortable for the patient. Some of the patients present had previously had Doppler assessments but others had not. One patient asked should they be attending for a Doppler test, but Dr Bennett explained that this assessment is only used to help with diagnosis and that once a diagnosis has been reached there is no requirement to re-test. Nurse Short said that you would only have further Doppler assessments if you were being fitted for compression hosiery as this checks that it is safe for the patient to wear the compression hosiery.

One patient present asked when they can order more compression hosiery as she finds them very beneficial. Nurse Short explained that patients are allowed 3 pairs per year on prescription.

Life Style

Dr Bennett explained that good lifestyle can help with symptoms and reducing disease progression e.g. stopping smoking, good diet and exercise.

Many of the patients present said that they do try to walk regularly but that the condition can sometimes make this painful. One patient said that he endeavours to walk a mile a day and that at first it is painful but this does ease after a while.

Outcome/Changes Suggested

- More proactive investigation for leg pain (at early onset) – referral for in-house Doppler assessment
- Increased Lifestyle promotion

Summary/ Discussion

The patients present were thanked for taking the time to attend today to talk about their experiences. The practice team had been delighted by the turn out of patients attending this meeting and felt the meeting had been constructive and informative. The group thanked the practice for the opportunity to discuss their condition and the care provided.