



Participation | Summer 2016 | Issue 10

## CQC Inspection

The Stennack Surgery has been rated as "outstanding" by the Care Quality Commission. See page 2

## St Ives Community Transport

Coming soon! St Ives Community Transport is a project to provide door-to-door, accessible & affordable transport for anyone over 50 for which a small charge will be made. It is hoped that the service will start in the Autumn. For further information or to offer help as a volunteer driver, please telephone 07572 586 675

## Cornish Cake Bake

GPs, surgery staff and the PPG contributed some delicious homemade cakes and biscuits to Cornwall Hospice Care's county-wide fundraising cake bake sale in the surgery Waiting Room on Friday 6<sup>th</sup> May. The table raised £63.41 for the Charity who provide facilities and support for terminally ill adults and their families. Thank you to everyone involved.

## Farewell to Dr Frank Davey

*We said "goodbye" to Dr Frank*

*Davey in January*



Dr Davey has left the Practice to pursue a 'portfolio' career but will continue to work here as a locum when required.

Dr Davey first worked at the Stennack Surgery in 1999 as a GP Registrar then joined the medical team here permanently in 2002.

He has been very involved in providing medical cover and developing services at the Edward Hain Hospital and was instrumental in setting up the Community Hospital Alcohol Detoxification service at the hospital. He was our lead GP for mental health and established regular meetings between the GPs of the surgery and the Community Mental Health Team.

Latterly, Dr Davey was part of the research team at the surgery. We wish him well in his new venture and no doubt he will be seen about the surgery from time to time in his new role.

## Pastures New

I wanted to put a short piece in the newsletter to wish you all a fond farewell.

After almost 5 years at the Practice, I have decided to move on to take on a large General Practice development project in Camborne.

I have immensely enjoyed working in St Ives, with the Partners, staff and our local community. We have had some amazing successes with our "Outstanding" CQC rating and the various developments over the last few years.



As a Penzance boy it was with trepidation that I took this job on, but my fears quickly subsided after I met the FOSS committee over a Christmas dinner at the Western Hotel, where I was welcomed and given their seal of approval!

This practice really does stand aside from the rest and it will never be replicated. We have committed and hardworking staff and GP's that really care about our community and we have Friends that raise us huge sums of money to support our services.

I will be taking up my new post on the 1<sup>st</sup> September. We are currently in the process of recruiting a successor, the details of which we will share with you soon. Best wishes

*Chris Gendall*

## CQC Inspection

The Stennack Surgery was rated highly for being responsive and well led and is the second surgery in Penwith to be rated as "outstanding" by the Care Quality Commission (CQC).

Chris Gendall, strategic business manager for the Stennack Surgery, said: "We are absolutely delighted with our "outstanding" CQC rating. This is a tribute to the team work of the Stennack surgery and we remain committed to continuing to improve the services for the people of St Ives in these challenging times for general practice. We would like to thank the Friends of the Stennack Surgery and the Patient Participation Group, who work with us to make our services better."

Professor Steve Field, Chief Inspector of General Practice, said: "I am delighted to highlight the exceptional standard of care which is being provided at The Stennack Surgery. Throughout the inspection we were particularly impressed by the way the practice worked with the public to shape its service to meet the needs of its patient groups. The GPs and all their staff deserve the credit for this Outstanding service."

## Telephones

We are very aware of the frustration often caused with difficulties getting through to us on the telephone. Our Reception team receive over 600 calls every day. Be assured that the team are beavering away behind the Reception desk answering your calls. In the mornings we often have five staff members taking the phone calls as well as the two on the front desk. One from the front may then move to the phones in order for all the administration to be completed – prescription requests, patient registrations and following through doctors' requests. Queues can build up on the front desk and so a Receptionist may need to move forward, leaving their phone. All rather a juggling act. However we are looking at how we may be able to improve our telephone system, to make it easier to get through to the most appropriate person and one which can inform you if there is likely to be a long wait. We hope that we don't need an entirely new system as this could cost around £20k, which would not be justifiable. We will update you in the next newsletter.

## Waiting Times for appointments

There has been some feedback recently to the PPG about the length of wait to be seen by a doctor for an appointment.

We offer ten minute appointments with our GPs, in line with contractual advice. To meet, discuss, diagnose and treat or refer a patient within this time is a challenge. Some problems may be straight forward, but others can be complex. Whilst being mindful of time restrictions, our doctors will spend the clinically appropriate time with every patient. This can mean that by the end of a clinic a doctor could be running quite late. A patient may have serious health needs and perhaps need to be admitted to hospital. I'm sure we would all want this level of care for ourselves and our family if necessary.

Our electronic booking in screen will advise you as to how late the clinician is running. This is a snap shot of the time the most recent patient was taken into the consulting room against the appointment time. That patient may take more or less than the allotted time, so the delay may have changed again before you are seen. If you feel that you may need more than ten minutes, you can ask to have a "double appointment" when you make your booking.

We could make appointment times longer, but then we would be offering fewer each day, leading to even longer waits.



**MINOR INJURY UNIT**

**SUMMER OPENING HOURS**  
(From 18<sup>th</sup> July - 9<sup>th</sup> Sept)

Mon - Fri 8am - 8pm  
Sat 10am - 4pm

Open to all - locals and visitors to the area

We can treat bites & stings, cuts & bruises, limb injuries, minor burns, simple infections, eye injuries & minor head injuries



## Online Services

You can now order your repeat medication on-line and book GP appointments. The updated software is currently being tested and all existing users will be migrated across to "Waiting Room 2" as soon as we are happy with the new system. Please speak to a member of the Reception team if you would like to register for on-line services.

## New Chairs for the Waiting Room

As a result of patient feedback, the "Friends of Stennack Surgery" (FOSS) have very kindly agreed to fund the purchase of some additional chairs for the Waiting Room.

The new chairs will have arms, and a seat height 10cm (4 inches) higher than standard. This should improve comfort and accessibility for many of our patients whilst waiting for their appointment and will be with us shortly.

**Independent Living Services from Cornwall Mobility**



**FREE Independent Living Assessments**

Finding it difficult to move around? We can assess you for:

- Walkers, Scooters, Wheelchairs
- Bathing & kitchen equipment
- Seating and Posture Management
- Beds

Contact us on 01872 254920 or at [info@cornwallmobility.co.uk](mailto:info@cornwallmobility.co.uk)

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## Appointment availability with Doctors

We realise that it often seems difficult to book an appointment, particularly with a doctor of your choice. We currently offer over 600 doctors' appointments every week, plus around 50 appointments each day in our "Same Day Service"(SDS).

Managing the scheduling of these clinics is an on-going challenge and one which we monitor all the time. We understand from patient feedback that sometimes you want to book an appointment ahead, perhaps for a follow-up or it might just be your day off from work; sometimes you feel you need to be seen on the day with an acute problem and sometimes you do not need it urgently, but would like it within perhaps a week.

All these scenarios are factored into when and how appointments are made available. We therefore offer doctors' appointments up to one month ahead, reserving part of every clinic so that additional appointments can be made available two working days ahead and a final group are released on the day, along with the ones in the SDS.

***Please be assured that if you clinically need to be seen, you will be fitted in***

If all our appointments have been booked, a member of the Reception Team will ask the Duty Doctor to telephone you to assess the problem. He or she will arrange for you to be seen if necessary.

## Pneumococcal Vaccine

Pneumococcal disease is an infection caused by a bacteria called *Streptococcus pneumoniae* which mostly lives harmlessly in the back of our nose and throat. Sometimes the bacteria can become invasive and cause serious illnesses like pneumonia, septicaemia and meningitis. There are four groups of people who are advised to get vaccinated against pneumococcal infections:

- babies - who are routinely vaccinated as part of their childhood vaccination programme
- people aged 65 and over
- anyone from the ages of 2 to 65 with a long-term health condition
- anyone at occupational risk, such as welders

The Surgery will be offering a type of pneumo jab known as the pneumococcal polysaccharide vaccine (PPV) to eligible patients. This one-off vaccination is very effective at protecting you against serious forms of [pneumococcal infection](#).

You're considered to be at a higher risk of a pneumococcal infection if you have:

- had your spleen removed, or your spleen does not work properly
- a long-term respiratory disease, such as [chronic obstructive pulmonary disease \(COPD\)](#)
- heart disease, such as [congenital heart disease](#)
- chronic [kidney disease](#)
- chronic liver disease, such as liver [cirrhosis](#)
- [diabetes](#)
- a suppressed immune system caused by a health condition such as [HIV](#)
- a suppressed immune system caused by medication such as [chemotherapy](#) or [steroid tablets](#)
- a cochlear implant (a small hearing device fitted inside your ear)
- had cerebrospinal fluid (the clear fluid that surrounds the brain and spine leaks).

Speak to a nurse for further information and to check if you are eligible.

### Driving assessment services from Cornwall Mobility



#### FREE Driving Assessments in Penzance & Truro

- Ask your GP to refer you
- Other services
- Passenger Assessments
  - Wheelchair and Scooter Assessments
  - Adaptations to Vehicles

Contact us on 01872 254920 or at [info@cornwallmobility.co.uk](mailto:info@cornwallmobility.co.uk)



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## National PPG Awareness Week

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Thank you to our PPG members who spent time during the National PPG Awareness week in early June, talking to patients in the Waiting room.

We had lots of very positive feedback and also some constructive comments which will be discussed by the Practice and the PPG.

An updated Practice Leaflet proved very useful and was handed out to many patients.

Collect yours from the PPG table or the Reception desk next time you are in. It is also available on our website [www.thestennacksurgery.co.uk](http://www.thestennacksurgery.co.uk)

## Join the PPG

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If you are interested in joining our PPG, please complete the form on-line, or collect one from the PPG table in the Waiting Room.

<http://www.thestennacksurgery.co.uk/website/Y01922/files/>

## Unacceptable Behaviour

Sadly we have had a number of incidents in the last few months where both the staff and the clinicians have felt either verbally abused or physically threatened by patients.

The Practice is committed to the wellbeing of our patients and staff and has a duty of care and a legal obligation to provide a safe working environment for both staff and patients. We expect those accessing our services and premises to treat other patients and staff with the courtesy and respect they would expect to receive themselves.

We have been able to discuss the matter with our local community PC who explained that antisocial behaviour such as verbal abuse, harassment and violence are unacceptable and offered police support for the zero-tolerance policy now in place at the Practice. He has kindly agreed to maintain a regular presence in the surgery and will attend any incidents on request.

It is a disappointing that we have needed to address this problem which involves a very small minority of our patients. The vast majority of our 12000 patients are courteous and a delight to care for and are very appreciative of the support and care provided by the surgery.

We now record all incidents where staff and clinicians are made to feel uncomfortable due to physical threats, violence or abusive language. The Practice will review each occurrence and will follow this up with a letter to patients. In the event of further escalation, or for more serious incidents, patients will be removed from the Practice list and action may be taken which could result in prosecution.

## Getting the most out of your GP appointment

We know some patients can feel rushed during appointments. As appointment times can be limited, here are some tips that could help you get the most out of visiting your GP.

### Could a nurse practitioner deal with your problem?

For acute problems please use our Same Day Service. This is run by a nurse practitioner and supported by the duty doctor. Please consider this as an alternative to waiting for appointment with your usual GP.

### Take notes to help you

Before you see your GP, be clear in your own mind what you want to say. Make a note of your symptoms, worries and any questions that you would like to ask.

### Many problems? See if you can book a double appointment

If you have a number of issues that you would like to discuss with your GP, please ask to book a double appointment to give you more time to talk them through.

### Take a list of your medicines – prescribed or otherwise

Bring a list of any medication you are taking, including over-the-counter and/or alternative medicines, or anything prescribed after a hospital visit. This includes tablets, liquids or creams. Your GP needs to know about everything you are taking.

### Discuss important things first and stick to the point

Make sure you tell the doctor about the important things first and try to get to the point. Do not feel you have to justify being there or leave your main concern to the end.

### Not clear on treatment plan? Ask again

Make sure you fully understand the next steps before you leave the room. If you don't, then don't be afraid of asking your GP to go through the plan again.

### If you need support, take a relative, carer or friend

If you feel your situation needs it, take a relative or friend for support. They can help you understand or explain.

## “DNA” Figures

The PPG has been instrumental in working to reduce the number of missed (DNA/“Did Not Attend”) appointments.

Although the non-arrivals still amount to over 30 GP appointments each week and several hours of nursing time, the numbers have been decreasing since the introduction of a letter which is sent to any patient who misses three or more appointments within a six month period.

- ✦ April 2014 – 366 appointments lost due to DNAs
- ✦ April 2016 – 295 appointments lost due to DNAs

The surgery gets a lot of DNAs for the chronic disease reviews with the Practice Nurses, even though the appointment has been discussed and booked over the telephone. These appointments can be booked for half an hour.

*“It’s a shame that a patient who needs to see a nurse misses out because another patient hasn’t cancelled their appointment”*

***Please remember to cancel your unwanted appointments.  
Thank You.***



TO THE MEMORY OF THE  
FALLEN AND THE FUTURE OF  
THE LIVING

The Royal British Legion provides  
lifelong support for the Armed  
Forces community - serving men  
and women, veterans, and their  
families

## Message from the Chair

*Pedal to Paris - 1st to 5th September  
2016*



You may be aware I enjoy riding a bike in my spare time. I'm now trying to regain some long lost fitness in order to participate in a London to Paris fundraising cycling event for The Royal British Legion in September; a ride of almost 300 miles. If you would like to consider sponsoring me please click on the JustGiving online link below or get in touch. There is also a collection tin in reception for any donations. **Thank you!**

<http://www.britishlegion.org.uk/get-involved/fundraise/bike-rides/pedal-to-paris/>

<https://www.justgiving.com/fundraising/Linda-Petzing>

## Goodbye to....

Dr Frank Davey    Joan Kitchen    Natasha Tomlinson    Alison Musk

### GP Trainees

**Dr Matthew Barns ST3**

**Dr Karina Hannigan ST2**

### Foundation Doctor

**Dr Rachel Mannings**

Please leave any feedback on the comments tab of the PPG webpage or comments box at the Information Point in the Waiting Room. If you would like to join the PPG Consultation Group or Virtual Group please contact us (see footer for email address)

*Linda Petzing*

Linda Petzing

Stennack PPG Chair

*Fiona Vinnicombe*

Fiona Vinnicombe

Stennack PPG Surgery Lead