

Patient Participation Group (PPG) **Minutes of 20/03/18 meeting**

**A copy of these minutes is available in the
'Patient Group' section on the surgery's
website: www.plasmeddygsurgery.com**

Attending: Saby Ghosh (Chair), Jenny Phillips, Mavis Wilson, Sandra Gilliard, Mark Burgess (Practice Manager), Leanne Midwinter (Virtual Member Coordinator), Mike Tindall, Diane Hannaford (Secretary).

Minutes of last meeting: Approved subject to some small changes.

Healthwatch presentation by Lotta Hackett (LH): Established in 2012 following the Health and Social Care Act to listen to patient voices and obtain their experiences of how health & social care services have been delivered. The patient voice is crucial. National Healthwatch England and local Healthwatch (H/W) in all boroughs. H/W Bexley collects experiences and feedback to H/W England. Engage with patients at a variety of levels, PPGs, community groups, signposting, do not deal with complaints. Sit under Care Quality Commission (CQC). Have an Enter & View programme with volunteers attending visits, have entry powers to go into any publically funded health and social care service. In 2014 visited Bexley GP practices regarding appointments and how patients felt cared for. In 2018 visited all GPs focusing on service experience for patients with learning disabilities. Have visited all residential care homes and dentists in Bexley to gain level of experience. Collected information regarding services and produced a report along with recommendations which was sent to Clinical Commissioning Group (CCG) who buys services for Bexley and London Borough of Bexley (LBB) for social care. Work closely with CCG, supporting with audit re PPGs, spoken to 18 GP practices so far, Plas Meddyg one of the 1st who helped to develop the audit tool used. Asking if they have a PPG, if not why, is it virtual, understand what works or not. 26 GP practices in Bexley, learning still to be had, still areas you can all learn from each other. Long term goal to have a functioning PPG in each GP practice.

Recently commissioned by LBB & CCG to undertake a deep dive into home care in Bexley.

About to focus on "hospital discharge to assess service" this was introduced 18 months ago. Any Bexley resident discharged via this service would receive a visit from a social care assistant within 3 days to assess if the discharge

services are working well and are right for the next 6 weeks. This is to ensure patients recover quickly and do not need to be readmitted. Working with LBB to interview patients, gain their experiences. No particular age group but it does tend to be elderly. Pack is put into place before you go home. H/W wants to know if patients were advised of all their options before they left hospital. Person centred/ quality approach. Good news is that the % of patients remaining in hospital since 2016 is decreasing. H/W will also be looking into how isolated and lonely these patients may be once they have been discharged. Will only visit a sample of patients. Social Care Assistant will give patients a letter saying that H/W would like to come and talk to them. They will also have a member of the H/W Bexley team in the hospital discharge lounge to talk to patients before they leave, give them the letter and arrange to visit them at home. Starting with QEH. Have 15 questions to ask to identify issues, have a good network with community groups and other services to signpost patients, or with their permission can talk to another service on their behalf.

H/W Bexley have stands around the borough, libraries etc. Focus and talk to groups, common issues raised, "look at a piece of work", report and make recommendations to Health and Well Being Board and Health Overview and Scrutiny committee. Reports get to where they need to go.

LH was asked if visits to care homes are by invitation or unannounced, LH replied always write to request a visit. What the purpose of the visit is and how long they will be there. Visited 10 care homes, looking at personal choices for food, cultural choice, entertainment, access to religious services, etc. H/W do not have powers to make changes but can highlight issues which they hope commissioners will make. H/W has a statutory right to enter and recently entered Woodlands Unit to talk to inpatients with mental health issues about their experiences. Have 10/15 volunteers who come on visits and assist with individual pieces of work, students who also undertake research. Mixed range of ages.

LH was asked if recommendations are not followed up can H/W go through CQC. LH replied CQC receive all their reports and they can follow up if necessary. Recently LBB had concerns about a local care home and asked H/W to undertake an enter and view visit. Some residents are seen in the lounge and others in their rooms, their choice. They are spoken to individually, in privacy. This is meant to be a positive experience.

All reports are available on H/W website (www.healthwatchbexley.co.uk).

Virtual Membership Update: 10 virtual members had replied happy to attend a virtual membership meeting. 1 member reported they were "*not keen on all the abbreviations*" in the latest copy of minutes, "*makes reading the document tedious having to refer back and forth*". All agreed, minutes going forward first time with full explanation in body of minutes, followed by abbreviation. 1

member commented on the Smoke free Town Survey - *“I think that a no smoking zone in the town centre is a wonderful idea, but unless it’s heavily policed it hasn’t got a hope and will become a bit of a game among the ignorant/addicted”*. 1 lady wishes to join as a virtual member and 1 requiring 1–1 training.

Chair’s Update: The Chair SG had attended 3 meetings at the CCG today. 1. Self-care in Bexley and GP Hubs. Members aware of GP Hubs, surgery doing well referring. Discussed Self-care leaflet, how it should be designed, and make public more aware. This should reduce spending if people follow it by going to the right place the 1st time. 2. Patient Council. (Pt.C) The Chair had applied for position of deputy chair of Pt.C but unfortunately was pipped at the post by Vicky Wilkinson, Chief Executive Officer of Bexley Voluntary Services Council, (BVSC). This is a co-opted position on the CCG governing body but is non-voting. Discussion from commissioner regarding the Greenwich & Bexley Community Hospice who had applied for a new contract for 10 years; MSK service specification for next 2-3 years going through. From Mind in Bexley, IAPT, (Improving Access to Psychological Therapies). Practice has counsellors here Monday – Thursday to see patients referred via IAPT’s. The Chair reminded that a criteria applies, you go through a telephone interview first. Carers Support Bexley having an Open Session on 18th May.

Then “Developing local consultation quality indicators” and “Information Commissioners Office Guidance” regarding GDPR (General Data Protection Regulations) new regulations which come into force on 25th May.

1 -1 Training – The Chair advised that he was now doing this and completed 1 and has 1 to do.

Some patients still not aware of the 8-8 service.

Has signed up lots of practice staff and 1 Dr. onto the Mystery Shopper scheme. It was asked why you do not get an automatic message from the CCG website to confirm receipt of your feedback? This will be raised with Bexley CCG’s IT department/

Annual Meeting Virtual Members and Practice Patients: A date was discussed for the large hall at the Bexley United Reformed Church, Hurst Road would be available to host the forthcoming meeting. The members present agreed on Friday 13th July. Now need to consider what to do at the meeting. The Chair suggested 2 presenters, possibly from CCG, BVSC, H/W or Carers Support Bexley. Purpose of meeting **“Get to know the PPG”**. Event open to all patients of the surgery. We will prepare for 50, tables and leaflets, pull up banners, microphone etc. Members will be needed to help put out chairs, prepare tea/coffee/biscuits and clear up afterwards. The Chair will be on the door to welcome people and give introduction.

Advertise – What is a PPG? And potentially Community Connect, Mystery Shopper, 8-8, GP On-line services, Patient Services etc. The surgery to advertise but PPG to invite. To go on noticeboard and website, in the Patient Group and News sections. It was suggested to have a shortened agenda at the next meeting and a large portion to be spent on finalising details/duties for the annual meeting (planning time). No speaker at May PPG meeting.

Practice Manager Update: The Practice Manager updated on recent purchases from donations. Fridge data logger for immunisations/vaccinations. 2 peak flow meters and blood pressure cuff. £142.02 left to spend. A few donations have not been collected. The surgery to organise staff raffle and funds raised to be added to the total available to spend.

All practice meeting hosted 6th March at local church hall. Had an external person from the CCG to facilitate the meeting. Considered worthwhile, action plan drawn up which Practice Manager will implement. Follow up meeting in 6 months' time. Surgery was closed and cover provided by Hurley Group. The Practice Manager discussed confusion felt by some patients regarding the NHS Online app and Patient online services. NHS Online app featured on the recent Tonight programme allows Econsult, where you don't have to come to see a GP. Response by the end of the next working day. May invite you in, or prescribe medication. Don't have to be logged in. App allows you to book 1 appointment before you fully register at the practice. In future must register for patient online services. Can order prescriptions, access self-help. Will let patients access medical records shortly (date yet to be confirmed) From the website you can access Econsult, no registration, link to patients service features. If you have a smart phone you need to download the online app. Patient Services were previously known as Vision Online.

AOB: PPG offered their congratulations to the Practice Manager who applied for position as a voting member representing Frognaal Locality on the CCG Governing Body and was successful. Role commences 1st April 2018. The Chair advised of concerns raised relating to a patient who is wheelchair bound. Finds the 2nd entrance door not wide enough, require an inch off both sides and automatic. Dr's doors also just about wide enough to get the wheelchair through. Also threshold should be easier to get over. The Practice Manager will put forward to the practice.