**St John’s Way Medical Centre – Patient Participation Group (PPG)**

**MINUTES OF SJW PPG Meeting on 10th September 2020**

**Patient Representatives:**

**Chair: Jan Pollock(JP)**

**Staff: Jan Lenny(JL) - Operation Manager**

**Visitors:** Caroline Humphries(CH) **minute taker**, Jan Pollock(JP), Frank Jacobs(FJ), Frances Tomlinson(FT), Christina Sanchez de Beggs(CSdB), Patricia Barnett(PB), Stephen Wood(SW), Viv Ducket(VD), Dorothy Boswell(DB). Apologies – Mary Slow(MS)

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| **Agenda Item** | **Action** |
| **Agenda Item 1 – Introductions & overview of Agenda from the Chair**  Attendees introduced themselves and welcomed Stephen Wood to the group. DB and PB explained that she would have to leave the meeting early. DB mentioned she also represented SAGA and the CMC (Coordinate My Care) initiative. MS sent her apologies and said she would be stepping back from the group for the time being. |  |
| **Agenda Item 2 - Minutes & Matters from Previous Meeting**  The minutes of 9th January meeting were approved. |  |
| **Agenda Item 3 - Changes to GP Practice during Covid.**  JL explained that the pandemic has forced the practice to make signicant changes to it’s appointment system and the way it operates. Continuing changes of advice/guidance required constant re training of staff. In just one week the receptionists were trained three times in order to meet the updated guidance.  The practice now operates using ‘E-consult’. Patients are asked to visit the practice website and to complete an on-line form giving their reasons for contacting the surgery. The enquires are then triaged, urgent cases followed up and non-urgent enquiries are responded to within 2 days. GPs like this system as patients complete detailed background information before the consultation - information that a GP would not have time to gather in a ten-minute consultation and they feel that the time they have with the patient works better. Patients consultations can be via phone, video or in some cases patients come into the surgery.  Patients coming to the surgery to book appointments are asked to call if they are not able to use the website. If necessary, the booking is taken with the patient standing outside the door. Patients attending appointments in the surgery have their temperature taken with a thermometer before entering the surgery. Receptionist use ‘E Light’ for patients booking by phone.  Due to the pandemic many services are not available as staff, including practice nurses, have been co-opted into other parts of the NHS. For example the chronic respiratory paediatric nurse had to stop their practice based clinics and help support the hospitals throughout the pandemic.  FJ said that he had had an efficient response to his enquiry through the website. Following a consultation, the GP did make a referral; however, the email advising FJ of this went into his junk mail. JL to ask GP’s to text patients if sending a follow up email. Overall, the meeting agreed that the service had been working efficiently and is effective.  JL mentioned there was some resistance to using the new service from younger patients as well as those unfamiliar with web services.  JP found that calling the pharmacy direct to get a repeat prescription was much more efficient with no need to consult a GP. This service has been available since the introduction of the practiced-based pharmacist last year. | JL |
| **Agenda Item 4 - PPG to give feedback on Covid experience and changes to practice**  JL has been asked by NHS England to gather feedback from PPG participants on their experience since the beginning of the Covid pandemic. To follow GDPR regulations names have been withheld  **Patient comments:**  Patient 1 has been working mainly from home and found it too hard and is feeling burnt out from long days. Missing relaxation outside of the home, cycling around the area has become boring. Venturing out within Islington has been stressful as many people are not wearing masks and don’t keep to social distancing guideline.    Patient 2 Attends regular hospital appointments, follow up calls at home have worked brilliantly. Operations are on hold, no osteopathy/physiotherapy (usually twice a week) have negatively affected their mobility.  They contrasted the experience of visiting Spain where masks are compulsory in many settings (including for children), restrictions of numbers on the beach/swimming pools, forms required (and checked) at the airport etc with returning through UK airport forms were not checked or temperature taken. On returning they quarantined the family for two weeks but felt that other would not as no ‘track and trace’ in place in the UK.  Patient 3 has felt low during this time. Reconnecting with groups via zoom has really helped although singing alone at home does feel strange.  Patient 4 spoke of the sadness on not visiting their mother, who has vascular dementia, for three months and how her mother had been distressed that family had not visited and she thinks that family does not want to visit her. Her mother’s mental capacity has deteriorated during this time.  Patient 5 spoke of using public transport where (mainly white men) were not wearing masks. On requesting that they wear one, they received outbursts of abuse including sexist abuse. Bus drivers do not intervene as the wearing of masks is not mandatory.  Patient 6 spoke of care workers not being given instructions by their employer on Covid precautions. Clients the carer visits are expected to provide adequate PPE for their carer. Many carers are self-employed and it is only compulsory for companies with more than 5 employees to meet the Health and Safety guidelines. Self-employed cares do not receive sick pay which increases the risk of them continuing to work when there is Covid within their close network.  The meeting expressed concern that despite the ‘rule of 6’ being imposed, thousands of students are crossing the country to attend universities (potentially introducing the virus to local communities) and where the rule does not apply. The meeting has found the endless changes to the guidelines, often with contradictory advice, are unhelpful and confusing.  FJ is missing being a Whittington Health patient rep. FJ reported that there has been considerable disruption to hospital services and there is lack of communication between patients/clinicians/service providers. The Whittington Health Stakeholder update shared this link for up-to-date information [www.whittington.nhs.uk/ServiceStatus](http://www.whittington.nhs.uk/ServiceStatus)  Another participant spoke of the worrying change to clinical commissioning. The five Islington Commissioning groups (discussed in a previous meeting) have been abolished and Islington is now part of a much larger collective including Enfield, Barnet, Camden and Haringey. |  |
| **Agenda Item 5 - Officers Reports**   1. Chair JP – spoke of missing the PPG meeting and the people involved. Since the lock down there has been nothing to report on. She explained she had been self-isolating and going out into the community has felt dangerous. In particular JP mentioned the number of people in pubs. 2. Secretary – CH advised that no meetings had taken place since the lockdown and all the PPG wellbeing programmes had stopped. 3. Treasurer – accounts are up to date and the current balance is £1,788. A £20 cheque for Autumn celebration expenses, made out CH, will need to be reissued – the meeting approved CH being the second signature on this cheque. Public Liability Insurance is due end September. It was agreed the PLI should be continuous. CH to follow up. No other expenditure expected until the gardening restarts. | CH |
| **Agenda Item 6 - Appointment of Officers**   1. Current Officers Chair – Jan Pollock, Deputy Chair – Frank Jacob, Secretary – Caroline Humphries, Treasurer – Christina Sanchez de Beggs 2. The following officers were unanimously voted to continue in their current roles, Jan Pollock, Frank Jacob and Caroline Humphries.   As stated at the last meeting CSdB is stepping down from her role as treasurer. The PPG expressed their thanks to CSdB for the work she has put in to manage the accounts and to meticulously and professionally record all financial activity.  As no one was put forward for this role it was agreed to look for a new person and to formalise the appointment at the next PPG general meeting. |  |
| **Agenda Item 7 – Wellbeing projects**   1. Gardening – Grow for health   This project stopped at the beginning of the lockdown. CH and FT presented a risk assessment to the practice but were advised at that time opening was not possible.  The Islington Plant nursery has been open since the beginning of June and FT explained this had been a lifeline. CH and FT to revise the risk assessment for review by the SJW practice.   1. Singing for health   The Funding application for this project was unsuccessful, however an addition session was funded by the PPG. Once the funding ran out, the singing tutor invited the group to join the Loraine Estate group. Since lockdown this has been held via zoom and is now a closed group. Separate funding has been sought by a member of the singing group including setting up a separate bank account under a separate name. The PPG asked that any fundraising for the ‘Sing for Health’ project be brought back to the PPG and money raised held in the PPG bank account. The committee is keen to support any fundraising activity for this project.   1. Before the halting of the Well Being projects a representative from the Social Prescribing (SP) team was due to visit the ‘Grow for Health project’. JL explained that the SP scheme has been overwhelmed and only the most serious cases have been referred. CH ask if there was anything the PPG could offer to support the SP team. JL will follow up with SP team. | CH/FT  JP  JL |
| **Agenda Item 7 – date for next meeting**  Thursday 3rd December 2020 @ 13.00 either by Zoom or at St John’s Way  Chairperson to be confirmed |  |