# Minutes of SMP PPG held 6th April 2022

- 1 Apologies AC, JG, LJ, KC
- 2 AoB Items Appointments (taken under SMP update)
- 3 Minutes of last meeting were accepted

Re Abuse - they have sms and letter to send to individual abusive patients - patients will be removed from the Practice if happens again within a year. In the case of violent or threatening patients they call the police and patient is asked to leave immediately.

EM Often the behaviour is caused by mental health problems so they have to be mindful that the patient does need medical help. HS explained that such patients can be referred to a special allocation scheme in Wimbledon.

CL reported there is money for training staff in dealing and coping with abuse and suggested they ask Nadine Wyatt. (Action EM/HS)

#### 4 Healthwatch

HS had sent back survey. Andrew has since left but they are recruiting his replacement.

The question of 16+ year old A level students participating in PPG meetings was discussed and it was felt this would be inappropriate owing to the confidential nature of some topics. The terms of reference were reviewed and it was agreed to retain the current position with membership open to 18+ year olds. In the event that a 16+-year-old student wished to attend as part of a course, this would be as a guest for an appropriate part of the meeting and would be under supervision.

AC had requested an additional update to the ToR and it was agreed to amend the point referring to the Practice Health Champion to read "The Practice Health Champion will sit on the PPG." and to omit the reference to responsibilities.

#### 5 SMP update

Appointments - the new system is working well and is popular with patients.

PPG members felt that a very small minority of patients might need some flexibility and they agreed to come up with a list of examples of who might be affected so the Practice could consider how to address those issues. (Action - PPG members)

EM made it clear that urgent callers will get fitted in regardless of whether there are any remaining appointments.

PPG members wondered if there could be some way of patients contacting the practice online in a brief message rather than by email. NF agreed to supply an example of this in another practice. (Action NF)

Where patients require a pre-bookable appointment appointment there is the extended hub and out-of-hours provision which is currently under-used by SMP patients. This needs to be promoted on the website. (Action NF)

The new Community Pharmacist had 19 referrals - it is particularly useful as it can be from post code you call from not necessarily where you live. This provision also needs to be on the appointments page. (Action NF)

In addition, there is now a full-time Practice Pharmacist who joined the meeting to explain her role. She is already taking over telephone calls to patients about medication issues. In future she will also be able to prescribe. The PPG was very interested and pleased to hear about the new role. It was agreed this should be explained on the website. (Action NF)

HS also reported that the "Get You Better" app for physio is up and running and being used.

#### 6 **PPG experience**

PPG members were unanimous in their praise for the new appointments system and the service they had received in recent months.

## 7 Pan PCN PPG

This useful meeting was held in March with attendance from more surgeries and four clinical staff. CL/RB reported on the idea of holding open morning to promote new PCN services and improve PPG representation

There is to be a PCN stall at the WCWC Heath and Wellbeing day

CL happy to hand out leaflet on new PCN services for Shotfield if HS can provide. (Action HS) EM distributed a leaflet "Why are GP practices working differently" and CL offered to promote on the Facebook page, along with any other useful material HS could provide re SMP services. (Action CL/HS)

The PCN now has several additional staff which SMP will be able to use: Care co-ordinator; Health and Well-being Coach; Pharmacist; Dietician; Physician Associate, Social Prescribing Link Worker; Physiotherapist; Mental Health Practitioner.

# 8 Health Champion

AC said that the Practice should let her know if there was anything with which she could assist.

# 9 Community Health Champion

CL has attended several meetings focusing on uptake of vaccination particularly lower-thanexpected numbers of over 75s.

Also looking at how to reach under-represented groups such as homeless, drug or alcoholdependent, travellers, and others who may not be registered with a GP.

Project to help digitally-excluded eg go to social groups and show how tablets work.

CL had also chaired a meeting of Community Voice (a collaboration of NHS and community leaders) where she introduced the concept of Co-production. This is about collecting information on needs and feeding them into the way the NHS delivers care. Again this is about reaching under-represented groups, involving care recipients in a more equal way, and levelling power so that NHS and community leaders work as more equal partners.

CL is happy to provide more information on this.

# 10 Wallington Community Wellbeing Charity

CL reported that WallyWalks will be 5 years old in May and has been very successful. She congratulated and thanked the walk leaders.

Chair-supported yoga at Honeywood and Tai Chi at Wallington Library both started recently and are a great success. These are free classes supported by National Lottery funding. Monday Art classes for older people are starting soon at Honeywood.

They are also working on a new project being planned to help the digitally-excluded as this affects a large number of older people and can make their medical care more difficult in the digital age. This was also discussed at the Pan PCN PPG meeting as it is an increasing problem.

CL reminded the meeting that the next Health and Wellbeing event is on Friday 29th April at Trinity Church and Centre. There are a few NHS stalls including from the PCN eg social prescribers, health coaches, pharmacies and others. It promises to be another excellent event.

The meeting thanked CL for her reports and all her hard work in the community.

11 **PRG** - no report

## 12 Website

NF reported that a lot of work had been done to simplify the website. She circulated a summary of web analytics for the year to date.

Some requests for future work arose in item 5. Others were: to compare with other websites to see if easier routes to key pages could be incorporated; to promote self care; to ensure that end of life information was covered in an appropriate way; to facilitate patient feedback. (Action NF)

NF suggested asking receptionists what most calls are about so that these topics could be prioritised on the website. (Action HS)

## 13 Survey

HS said there is no definite requirement for a survey at the moment although this could return. In the meantime it was agreed that if a survey was to be undertaken it should cover topics of genuine interest to the practice and that questions should be simple and asked in a structured way to ensure responses were useful.

The Practice is already getting feedback via sms questions and there is also the NHS survey so it was not considered necessary to ask questions about topics covered by these.

A possible survey subject could be website use and online access for test results.

NF suggested that the survey could be set up on the website and a link sent to patients via sms. HS queried if it would be possible to get funding from the CCG to use iPlato sms system for sending out the survey. (Action HS to investigate costs)

# 14 AoB - none

15 **Date of future meetings** - 13th July, 9th November 2022, 11th January 2023 (Action - HS to provide further dates for 2023 at next meeting)