

**Minutes SMP PPG meeting at Jubilee Centre 10 July 2019 4.30pm**

1	<b>Present:</b> Nadine Wyatt (guest), LJ, JG, AC, CC, EM, HS, KC, RB, EA <b>Apologies:</b> CL, CB, JM
2	<b>Minute taking</b> – NF
3	<b>Items for AoB</b> – Interpreters (AC), CP Foundation (HS)
4	<b>Nadine Wyatt (Public and Patient Engagement Manager, Sutton CCG)</b> spoke about her role and answered questions on Primary Care Networks (PCN) and merging of CCGs. Aim is to share good practice and give every patient the same opportunity. PPGs might be able to save work by combining, share resources and problems. GP surgeries are going to align: Shotfield Medical Practice, Beeches MP, Maldon Road, Manor Park Road and Wallington Medical Practice. There will be a workshop on PCN for Practice staff on 2 October. NW will send slides showing full details of new NHS plans. NW also congratulated the SMP PPG on their work.
5	<b>Minutes of last meeting and matters arising</b> HS said all patients have now been informed of their new GP since Dr Munden left.  HS reported that free wifi had limited range and therefore could not be advertised. It was also felt that patients could more usefully watch the Jayex display than use the internet.  HS said there had been no progress re possible hygiene issues of reusing blood test numbers. The problem is that the phlebotomy nurses, and the premises are managed by different organisations. NW offered to ask the Infection Control Nurse to assist and this was welcomed. The PPG had previously expressed concern about the breastfeeding facility being located in a toilet and wondered if this could be included in the remit of the Infection Control Nurse.
6	<b>Social prescribing</b> EM reported that GPs were using the CL calendar and found it very useful  <b>Wallington Neighbourhood Wellbeing</b> – CL sent in a report to say that Wallington Community Wellbeing Charity is going strong. The event in April was visited by over 400 people and had 48 exhibitors including some from the NHS. NW was there and confirmed what an excellent event it had been. The next one is on Friday 25th October from 11 am to 3 pm in the same venue, Holy Trinity Church. CL will drop some updated calendars off at the surgery so they can swap over the ones they have.  <b>WallyWalks</b> – NF reported over 100 people now registered. The walk is becoming quite crowded and so in order to keep the friendliness which is so important when encouraging people to exercise, new walkers are not actively being recruited unless they come from SMP. There is no evidence to suggest that new walkers are SMP patients and EM said he did not think GPs were using the walking prescription forms. People who turn up are not being turned away. NF hopes to start a new walk soon, when the prospective leader is available. Additional monthly longer walks are offered to encourage progression to greater fitness.  NF also reported that the <b>Sutton Community Farm</b> offers volunteers the opportunity to work. They have a special group for people with autism or mental health problems but all are welcome.  All these social prescribing activities are now on the Practice website. NF suggested that patients could be referred to these when patients were advised to take more exercise.
7	<b>Jayex update</b> HS reported that the new cloud-based version is a big improvement. HS and LJ both raised the issue of NHS-produced slides which were often not fit for purpose. EG portrait orientation rather than landscape, writing which is too small.

	HS noted that it would be more useful to have digital material and to have signing or subtitles for videos. NW undertook to investigate these points. EM said there was not always sound when patients' names were displayed which meant he had to go into the waiting area to find patients. Overall Jayex is vastly improved and HS was thanked for all her work on this.
8	<b>Website project</b> HS reported that the revised site is now live and thanked NF and JG for their work. NF replied that there is still a great deal of work to do but that there was now a more intuitive framework. NW stressed the importance of simple language and the need for correct translations to be available. JG suggested that there should be a house style/branding/template for all in-house produced pages and documents. NF asked if there was an SMP logo and there is not but might be considered. NW asked if we knew how many views the site received. NF said she had used the page hits analysis to ensure the most-visited pages were easy to locate. We also need to add "Help yourself to Health", interpreting services and "You said, we did"
9	<b>Online booking app</b> AC reported that the app was brilliant but that it was more difficult to find appointments with a specific GP as there was no longer a filter for this. HS suggested she contact the app provider to suggest this as an improvement. AC also said it was only possible to book 4 weeks ahead which was frustrating when told to make an appointment 6 weeks ahead. EM said that this was in fact unusually good for GP Practices, some of which only allow booking 3 days in advance. The logistics of having a longer period were insurmountable. Furthermore, the further ahead patients were able to make appointments meant the DNA rate was higher. HS reported that there are in fact 8 apps on which patients can access their online accounts. It was suggested a table could be created showing the features of all the apps. HS said that EMIS continually made changes to how online services worked without informing practices and she would find out when a patient phoned for assistance. NF reported that membership of the PPG was recorded as a "minor problem" in patient records.
10	<b>Health Champion report</b> AC reported on activities since the last meeting. She was congratulated on passing the exam for health champions: Royal Society for Public Health Level 2 Award in Understanding Health Improvement. Self Care – AC felt patients were not really interested. Cervical screening and diabetes awareness raising had gone very well. The meeting discussed other possible topics for future sessions. NW suggested perinatal, and domestic abuse Other ideas were testicular cancer, prostate awareness, heart problems. Then NW suggested dehydration as she had run a session on this with Debbie the infection Control Nurse. She felt Debbie would be prepared to assist with this and even suggest other campaigns. Another thought was that pharmacists might run workshops on eg constipation or foot care.
11	<b>Awareness raising (including Essential Tremor)</b> NF had been approached by a patient with Essential Tremor and asked to raise this with the clinical team. She wanted them to know about the Essential Tremor Foundation and the support offered. Also, the new possibility of a cure. She has provided NF with leaflets which she will pass on. NF also asked the meetings view on how such issues could be raised in the group and it was felt this could be a regular agenda item so that PPG members could raise matters on behalf of patients.
12	<b>Self care – progress</b> EM reported that GPs are now giving out self-care prescriptions for over-the-counter items which patients can obtain from the pharmacy without a usual prescription. In this case they

	<p>only pay the actual cost of the medication and not the prescription charge. Patients need to be made more aware of how much pharmacists can assist them without the need for a GP visit.</p> <p>NF reported that there is a self-care link on the website and also a link to find the nearest pharmacy.</p> <p>It was felt that more awareness raising was needed and perhaps videos on Jayex and the website would be useful.</p>
13	<p><b>PPG Survey 2019</b></p> <p>The proposed survey was discussed and some amendments proposed. NF will amend and circulate.</p> <p>The survey will take place in September and NF will request possible dates and times from PPG members. Although 8am was recommended as a good time it was noted that not all PPG members would be willing to attend at that time.</p> <p>It was also noted that some people preferred to work in a pair rather than on their own. NF will co-ordinate.</p>
14	<p><b>PRG feedback</b></p> <p>LJ had provided a summary and he highlighted key areas.</p> <p>NW asked if we receive minutes from the PRG and NF said we did but that they were usually rather lengthy and had several attachments so that it was not always possible to take it all in. NW said she would investigate the possibility of an official summary being produced for circulation to PPGs.</p>
15	<p><b>Quiet Area</b></p> <p>CC reported finding the sub waiting area on the first floor was very noisy – the combined effect of the Jayex display and patients talking on phones. There is one sign on a pillar asking people to keep quiet but this is not visible from all sides.</p> <p>There was some discussion and it was felt that generally all waiting areas should be as quiet as possible.</p> <p>HS will check volume level of Jayex</p> <p>It was suggested that there should be intermittent reminders on Jayex to patients to keep quiet while in the waiting areas.</p> <p>It was also noted that a degree of background noise was desirable to prevent patients in the waiting area hearing what was said during consultations in Dr Kinsagra's room.</p>
16	<p><b>AoB</b></p> <p><b>Interpreting service</b></p> <p>AC reported that a telephone interpreting service is available for all consultations with nurses EM said it was also available to GPs but AC reported it was more usual in her experience for interpreters to be present in person for GP consultations.</p> <p>To use the interpreting service, patients must book a double appointment and request the service via reception. This takes time to arrange.</p> <p>NF said the Interpreting page could be reinstated on the website if some instructions could be made available.</p> <p>It was agreed that the key thing was to say: "if you need an interpreter, ask at reception" and that this should be available in all languages used in this area. AC undertook to compile a list of these.</p> <p><b>Crystal Palace Foundation</b> – HS has met with SK who asked what had happened about this project. NF and JG reported that it had fallen through because of lack of further funding at the end of the Sport London-funded project. This meant that venues and trainers were let down.</p> <p>NF said it would be useful to have the question in the survey about how much patients would be prepared to spend on a fitness activity so that if there was a future project to set up classes, this might be self-funding.</p> <p>HS said West Ham were now conducting a similar project but the meeting felt it was unlikely to benefit Sutton.</p>
	<p><b>Date of next two meetings – 30 October and 5 February</b></p>