

SHP PPG Committee Meeting

Thursday 16th November 2023, 6:30pm – 7.45pm Monkspath Medical Centre & On-Line via ZOOM

Minutes of the meeting

PRESENT: SM (Chair); AS; GC; MM; GM; LR; AD (minutes)

ONLINE: GA

Received apologies: SK; LW;

Acronyms

CO = Communications Officer
DC = Digital Champion (Item 5)
NAPP = National Association for Patient Partnership

SM informed the committee that HA had submitted her resignation from the group for personal reasons. Chair and those in attendance thanked her for her support and her volunteering on a range of occasions and wished her well. HA remains a member of the PPG.

It was also discussed whether the committee needed to recruit another PPG member for the committee. It was agreed that this wasn't necessary at this point in time.

1. Approval of minutes of last committee (21.9.23) and Full member meeting (26/10)

Both sets of minutes were approved as accurate. MM reminded AD that she had sent her apologies for 26.10 meeting and these have been adjusted accordingly. Received apologies are noted as above.

Actions arising from 21.9 meeting were not addressed but have been updated as recorded in the Action Log at the end of the papers. Action for Item 1 still needs clarifying.

Before moving to Item 2, GC presented a 'matter' arising from the 26/10 minutes relating to the process around scans particularly.

Q. Do scan results go to the admin team at SHP?

Q. Is the referring doctor involved and informed of the results? This whether the scan is clear/normal or requires follow up.

The current experience is that patients need to 'chase' the results when expectations are that they should be informed either face to face/phone call/ NHS app (when clear in the last instance).





ACTION: AD To forward the two questions to SHP for a response

2. Preparation for AGM, 18th January 2024

SM informed the meeting that Dr Lupoli and Steve New had agreed to attend the AGM on subject(s) to be decided.

GC interjected to say that he had a record that committee had asked for the following input from SHP:

'The progressive development of SHP now, and into the future.'

AD added that the committee should seek the ideas from the wider membership together with their thoughts on topics/ themes for a proposed 'Table Talk' session as in January 2023. A deadline date was suggested to allow SHP and committee planning team to firm up content for the evening. Committee agreed.

ACTION: AD to send communication to the wider membership with a 'Save the Date' headline, inviting them to put forward topics/themes for SHP element of the AGM and for the table groups to discuss.

GC suggested foci at 'Table Talk' could include:

'What more can PPG committee do?'

'How can we increase membership?'

GC also shard that he had tried to add a message to another patient FB page along the lines of 'If you are a patient of SHP and you want regular updates and information, join the SHP PPG' but his message was rejected.

Following this SM outlined the practicalities that needed to be carried out both before, during and after the AGM itself:

- meeting and agreeing the Hall's risk assessment
- establishing whether PPG can use the kitchen on the night (and the dishwasher!)
- establishing whether we can deliver a hybrid meeting using the Hall's hardware and internet link. (this will include setting up a meeting link and sending it to the Hall)
- Promotional posters use last year's as a model.
- Seeking attendance confirmation after next committee meeting (for refreshments and table organisation)
- Agree agenda
- Set-up on 18th January including name labels/ table plan at entry/ signing in proforma; refreshments in kitchen etc.

AS suggested that the whole committee meet early on 18th January to set up. **SM** added that the next committee meeting on 14th December should be given over to AGM planning given that SN is on a/l and will not be able to share his planned quarterly updates.





GM explained that at the January 2023 AGM he was a new member and found it difficult to find his place for the breakout table session. He suggested that a master list of placements be available at the entrance and that attendees be prompted to view this by PPG 'meeters and greeters' before moving on to the main Hall. **AD** asked that committee consider whether they wanted other groups' causes at the

AD asked that committee consider whether they wanted other groups/ causes at the AGM to promote their work eg Message in a Bottle; Dr Webb and carers. No decision.

Further discussions covered the potential timings for the evening.

ACTION: SM to put a skeleton agenda with timings together for the next committee meeting.

3. Update from SHP Board meeting and Review of PPG Action Plan AD shared this item.

- Thanks to Ed Turner for his input which was well received. Attendees are looking forward to the launch!
- Request for A4 copy of eConsult Patient Flow diagram to distribute asap.
- Request for the slides of pie charts showing 'General Feedback'
- Patient feedback:

'We recently had family staying from Australia. Our niece who is a qualified social worker but has no medical qualifications is employed by her local GP practice to visit over 75s and carry out basic health checks, assess issues and report back to the medical team. She received training at the surgery to do this. I asked if it meant uncovering a lot of unmet need but she said the practice saw it as a preventative measure, picking up problems before things worsened so a saving for the health service. and it resulted in better outcomes for people.

Worthy of thought'!

Brought this up at Board: Dr N Patel indicated that this was something that could be looked at PCN level aligned to neighbourhoods and the potential for developing a 'Health and Wellbeing Team' possibly in 2024. It could also fall under the remit of Social Prescribing. He also shared that he had approached Solihull Council regarding the use of libraries as spaces for health events.

Next SHP event March 2024 - Men's Health

- Pneumonia call in system/service response sent to database and in minutes of 26 October PPG meeting
- Nish Patel said that CO and AD could contact Poppyfields re use of space?
 PPG will need other places to meet if we are going to change meetings and attendance.
- SM asked about the proposed opportunities to hold sessions at Monkspath (originally a response last autumn to the energy crisis and the provision of 'Warm Spaces' for patients and their families). This did not





happen in the end as the Hub area was being used for vaccinations and so the infection control element was too risky. Perhaps another reason for seeking new spaces for PPG?

The PPG Action Plan had been circulated prior to the meeting by AD. It had been updated as far as was possible. There was nothing more that was added by committee.

Other updates:

SHP have invited the PPG to send four volunteers to visit SHP's
 Patient Experience Team on 13th December 10am – 10.30am.

Purpose of visit: to gain an insight into the processes the team use to monitor and learn from patient feedback.

The PPG representatives will draw up a report that informs and educates patients about the role and scope of this team and the broader spectrum of staff working within SHP for patient benefit. It is not a platform for personal experiences. The team deals with all patient feedback +tive and -tive. They analyse and feed back to staff.

AD: Perhaps offer to wider PPG members to get a broader view and stimulate interest?

ACTION: SM to decide approach and nominations.

4. Full Member meetings review how to motivate and involve members

There is still a tension within the committee regarding attendance at meetings of the wider membership. The tension concerns are around whether we invite speakers to encourage members to attend or we monitor attendance before inviting speakers. **AS** suggested that we monitor wider meetings for the first six months of 2024 and then carry out a committee review.

AD wondered whether our structure/activities were, in fact, barriers to achieving better patient attendance.

SM questioned whether it was worth having more meetings if attendance is so low.ie around 20 attendees regardless of the content of the wider meeting. It was also decided that wider meetings continue as quarterly rather than every two months as had been suggested at a previous committee meeting when drafting the PPG mid - year survey.

GM wondered whether the committee had enough subjects that would appeal to patients so that they attended meetings. He believed attendance needed boosting before planning too many speakers. He warned against 'running before we can walk'.

SM added that many patients do not want to attend meetings but happy to be PPG members.





AD asked 'What do we measure our committee 'success' by? Attendance at meetings/ activities/ feedback from members/patients? Maybe we need to be clearer about this so that we are being realistic?

ACTION: Consider adding 'How to motivate and involve members' to the questions for table groups at AGM.

5. PPG Digital Champion

SM explained that SHP Board had requested committee seek a volunteer to carry out this role in partnership with the SHP Tech team some time ago.

A discussion ensued with members asking what the role entailed. AD read out a statement from the CO to elaborate;

'To translate digital developments in lay terms and simplify processes and understanding for patients whilst building and encouraging confidence in digital developments.'

SM was not convinced that this was 'what we needed' in terms of the role purpose above. She believed a DC and SHP should 'talk to each other'. She continued that there should be a DC 'on both sides'. She exemplified this by referring to the recent eConsult pilot carried out by PPG volunteers. She believed that the DC and SHP tech team should have put the 'training' together rather than SHP doing it on their own.

AD disagreed stating that this example was 'part of Digital Lead's 'day job', not the remit of the PPG. PPG DC would 'interpret'/ put in 'Plain English', digital developments for patients as a result of SHP sharing these developments. She also reminded the meeting that it was in danger of making assumptions about the role before further clarification with SHP. It's a new role and it will evolve. We just need to accept the invitation and get on with it!

SM cited that SHP have said a number of times that the PPG is independent of SHP, so the PPG should decide what the DC does.

AS asked whether one of the committee should meet with the Digital Lead at SHP and ask him to give the PPG an example of the role, the expectations of the DC and the ongoing relationship between the two.

GC gave an example encountered when the committee were developing recruitment posters. He reminded the committee that they had removed a couple of statements that SHP suggested because they believed they would not resonate for patients. When the posters came back from SHP, the statements were reinstated. Therefore, it was important that any working relationship for the DC was clearly outlined and agreed upon by all concerned.

All agreed and **AD** added that this role and relationship should have the ambition of supporting digital development for patients because it is needed.

During further discussions and clarification, GC volunteered to take on the role on behalf of the PPG.





ACTION: AD to inform SHP and seek further information regarding the DC role and the way forward.

ACTION: GC to hold the role of Digital Champion for SHP PPG with immediate effect.

AD asked to add another update regarding the promotional material planned for sites. A new Facilities manager has been appointed and has volunteered to put up dispensers and posters as per the arrangement at SMC. AD volunteered to meet him to show where the committee had decided where the material should be positioned so that he could replicate this at other sites.

ACTION: AD to meet Facilities manager at SMC for the above.

Dr Clare Webb has asked the PPG whether they would be willing to support planned legacy Carer events possibly on a monthly basis for 1-2 hours at a location to be decided. This would be helping with refreshments (rather like coffee mornings that used to take pace at some of the sites) and the smooth running of sessions. Dr N Patel also shared at Board that he had approached the Council about future use of libraries for meetings and events.

ACTION: AD to notify Dr Webb of PPG's willingness to support future health related events.

AD confirmed SM and GA attending the upcoming National Association for Patient Participation (NAPP) on Saturday 18th November.

6. The meeting closed at 7.35pm

Next committee meeting 14th December 2023

Signed:Sandra Matthews Da	ate:14/12/2023
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ACTION LOG

ITEM	ACTION	RESPONSIBILITY	OUTCOME
1.	To forward two	AD	Completed (see
	questions relating to		minutes 14.12.23)
	the communication		
	around scans and		
	other test results to		
	SHP.		
2.	Save the Date	AD	Completed
	message to wider		
	membership and		
	invitation to supply		
	topics/themes for	A	
	the AGM		
	Skeleton agenda for	SM	To be revised
	AGM		
3.	Invitation for	SM (to decide	Completed 13.12.23
	volunteers to carry	committee or	Report to follow
	out a visit to SHP	wider	
	Patient Experience	membership)	
	team on 13	1,	
	December		
4.	Develop questions	PPG	Ongoing – referring
	and content for AGM		to wider database
	including specific		
_	from this item.		2024
5.	DC role – request	AD	2024 meeting
	further information		
	and action from SHP		ment of the second
	Brief facilities	AD	First meeting carried
	manager re PPG		out
	information at sites	4.5	Camaralatan
X	Inform Dr C Webb	AD	Completed –
	that PPG are happy		awaiting further
	to support future		details in 2024
	health events that		
	she plans to develop.		

