

# Notes of Beechwood Medical Practice Patient Group Meeting

**Tuesday 25<sup>th</sup> October 2022 at 6pm**

**Attendees:-** Cheryl Benson; Subash Widge; Sue Thomas; Alan Pound; David Rowe; Pat Foster; Pawel Capik, Sally Williams (Social Prescriber); Sarah Monteith and Sarah McKay

**Apologies:** Rowena Sutcliffe; John Lawrence; Sylvia Rae; Barbara Davies

**1. Welcome to the meeting, introductions and apologies** – Welcome to new group member Pawel Capik.

## **2. Matters arising from the last meeting**

### **Terms of reference –**

This is something that we review every few years to check we are running the group how you want it run. Sarah Mon reiterated that this is the patients' meeting, and we are happy to take direction from you as to how you want to organise it. The ToR give ground rules for the group and are helpful to outline membership, meetings and aims and objectives.

No other comments were raised about the terms of reference tonight.

### **Feedback on Practice Website –**

Acknowledgement that our website needs modernisation and relaunch. SMon advised she has just volunteered to take part in a Bristol wide project to help standardise GP Practice websites. Hopefully will have more information about this next time. DR advised he would be happy to be involved too if we needed a patient's view of the prototype website when redesigning too. The group asked if we knew how many visitors our website was attracting. **SM will find out for next meeting**

### **Sally Williams, Social Prescribing Link Worker**

- Offers light touch social prescribing – so not long term – offer up to 3 sessions; can be over phone; face to face (in surgery or out in community). One to one and appt can be up to an hour.
- Support and empower people to manage their own health and wellbeing by signposting to services ideally their own local community / although may need to go to national service if very niche.
- As it is a short service they try to get patient to prioritise on the main things that would be the most helpful right now so they can help with those immediately and signpost to other things that are less of a priority to the patient.
- Play a part in some MDT meetings – i.e. frailty
- Signpost into financial services – Boost Finance – at Wellspring settlement; can refer into Citizens Advice Bureau; St Pauls Advice Centre; Money matters. Help with benefits claims eg PIP (Personal independent Payment) form completion
- Can put the patient in touch with lots of counselling services – Vitamins; Cruze; Harbor;
- PF asked if someone did not have confidence to attend a service on their own would they accompany them. Sally advised that they have done this in the past, so can happen.
- AP asked who refers people to the Link Worker. Generally the GP; Nurses or receptionists can refer in – or patients can self-refer to the service. Wait time is about 8 weeks currently.

- CB asked where are the leaflets? – Sally will email the leaflet that she has brought to the meeting to us – so we can print some off / add to TV screen etc.

There are several wellbeing activities that can be tapped into too – i.e. art; reading; cookery; exercise. Plus they can signpost to services who can help with some practical things, like lightbulb changes or help with putting flat pack furniture together. The food bank voucher scheme is something that they can access too. They have access to food clubs which is for getting school children a meal during school holidays. Sally advised there is another food club scheme where you normally pay £1 annual membership – then each week you pay £3.50 and are given up to £30 worth of food.

### **3. Update from Healthwatch/ One Care PPG representative (Pat Foster)**

PF not heard anything from One Care PPG Reference Group recently – Smon will enquire if it is still operational.

PPG Forum is hosted by Healthwatch – at the last meeting PF attended they comparing performance of local PPGs, their governance and whether the PPG function fits with the Practice's strategy and communications strategy.

Waiting lists for NHS treatments were discussed and the introduction of the Integrated Commissioning Board, this is the organisation that replaced our previous health organisation BNSSG Clinical Commissioning Group (CCG)

PF attended a PPG energising meeting in July which talked about ICB and the proposals for wider integrated neighbourhood teams in the future. Next PPG forum is 9<sup>th</sup> Nov

Future of GP contract was discussed too – 5 yr framework for GP contract with expires in 2024 – not sure if will get a one year contract or another 5 yr contract. We are aware the contract is due for renewal and that discussions have been going on at national level between NHSE and GPC for some time.

Oct meeting – CQC representative advised what they would look for from a PPG when they come to do inspections – They are looking for evidence that we pick up on pts view from the meeting, are aware of our patient population and that we take on board feedback. They also suggest we can expand PPG group by using Facebook. CB volunteered to help encourage use of practice Facebook profile.

Innovative ideas being run by other PPGs in collaboration with the practices included a memory clinic. With input from a GP and PPG volunteers.

SMon – advised one of our new partners is very passionate about being a greener practice – so although a different topic they might be interested in getting a PPG project set up and would welcome support and input from the PPG.

PF asked if ok to share our Terms of Reference at the next meeting – SMon advised they are the group's T of R. No one present had any objections to this.

Smon suggested revamping the newsletter – and we could send out a link via SMS text message once it was published to alert people to read it.

#### **4. Practice updates**

Currently have two GPs on longer term leave and have not been successful to date in recruiting salaried GP on fixed term contracts to cover. This is indicative of wider problem across many practices whereby replacement GPs are hard to find. We have secured good locums and most of these are working on a regular basis to try to maintain good continuity of care.

An action point from last PPG meeting was to publish how many DNAs we were experiencing. The group suggested publishing the figures in number of appointments not hours as this is easier for the wider patient population to visualise.

#### **Online Access to Medical Records**

There is a proposal that patient records will be made visible prospectively from 1 November 2022 online if you have a health App. The intention is that this will help people manage their own health. However practices across the country have raised concerns regarding the potential abuses of this data sharing and increased workload it will bring at the time practices are busiest. The BMA is in discussion with the ICO currently as to the risks associated with allowing all patients to see this information could be high. At the time of this meeting, we were still awaiting further guidance. (Post meeting note – Delayed launch until 1<sup>st</sup> December 2022)

#### **5. Feedback/Suggestions from patients**

AP – Reported he is inundated with requests for feedback – so would prefer to not be asked for any more feedback surveys.

#### **6. Dates/of next meeting – 24<sup>th</sup> January 2022 – 6pm in the Seminar Room, Fishponds Primary Care Centre.**

#### **Acronyms:**

BNSSG	Bristol, North Somerset & South Gloucestershire
BMA	British Medical Association
CAB	Citizens Advice Bureau
CCG	Clinical Commissioning Group
CQC	Care Quality Commission
DNA	Did Not Attend (appointments)
GPC	General Practitioner Committee
ICO	Information Commissioners Office
NHSE	National Health Service England
PIP	Personal Independence Payments
PPG	Patient Participation Group
SMS	Short Messaging Service (Texts sent via mobile phone)
ToR	Terms of Reference