

St Austell Healthcare

Patient Participation Group

**Notes of the Meeting – Thursday 22nd July 2021**

**10 am – Pattern Hall**

**Present:**Shirley Polmounter (SP) – Chair; Sandra Francis (SF) – PPG Liaison Officer; Ros Atkinson (RA);Mike Chipman (MC); Deborah George (DG); Chris Harlow (CH); Norma Jarman (NJ); Margaret Phillips (MP); Lyn Whittington (LW).

**In attendance**: Alan Lawler, Executive Strategic Business Manager (AL); Julie Henebury (JH) SAHC Note-taker

**Apologies:** Jackie Bull; Nicole Grey; Amanda Jones; Lynsey West; Chrissie Knight; Alan Orme.

**1: Welcome:** SP opened the meeting and welcomed new members, she introduced AL to all present.

**2: Social Prescribing Update**

Hayley Burgoyne was unable to attend the meeting, arrangements to be made at a later date for Hayley to attend. Alan Lawler kindly agreed to include social prescribing in his update.

**Update from Executive Strategic Business Manager**

**Brief summary of points made:**

* Covid vaccination clinics – Carlyon House has proved invaluable for holding these clinics. Vaccination programme has been very well delivered and is still continuing.
* Confirmed flu vaccination clinics will be held this year.
* SAH signing up to NHS England Covid booster vaccination programme – it is hoped that Covid boosters and flu vaccinations can be booked for the same time.
* Volunteers have helped keep the Covid clinics running smoothly, huge thanks expressed to them. SAH will continue to work with the volunteers.
* The practice teams have undertaken home visits to administer Covid vaccinations for housebound and vulnerable patients.
* Covid walk in clinic held on 10 July for unvaccinated people, approximately 90 people took advantage, they will receive second dose by September.
* Staffing – Dr Nataliya Klid has now left the organisation. Dr Grant Joseph, Locum, is working for SAH for at the least the next three months. An advert has been placed for a salaried GP. Other healthcare positions advertised are: 2 Pharmacists; Contraception Nurse; 2 Practice Nurses; 4 Healthcare Assistants; additional 2 Physician Associates.
* AL explained that it is currently difficulty to recruit GPs countrywide. However, on a positive note, SAH are attracting many other healthcare professionals interested in joining our organisation.
* Discussion regarding new Carclaze development took place, some concerns were expressed regarding this. (Concerns were mentioned again later in the meeting.)
* Mevagissey Surgery is currently on a two year contract, new contract to be negotiated. Noted that many Mevagissey patients appear to be very pleased with the service delivered by SAH.
* Carlyon Suite, 3rd floor WN, offers ophthalmology services provided locally by RCHT in conjunction with the practice. The Crinnis Suite, 2nd floor WN, offers haematology services locally and includes blood transfusions, immunoglobins and non-chemotherapy infusions. This is an extension of the Headland Unit, RCHT. Recently started working with Multiple Sclerosis RCHT service to support patients starting new medications.
* AL said it hoped that these services can be expanded to deliver more care locally. A meeting is scheduled to take place with RCHT to discuss this. Any additional services would be staffed by RCHT and would not detract from the GP services available.
* The aim of the Social Prescribing team is to help with the mental health well-being of patients as well as physical well-being. Interventions are offered to help and support patients with weight loss, physical activities, mental health, walks and rambles. Helping with pain management and diabetes control. Sign posting to where help is available, for example, the App – Help at Hand. .
* Working with Tesco Community Champions helping the community and people to connect. Tesco Champions also donate surplus food to those in need.
* Community Connectors – helping people connect in the community. Short courses available for Community Connectors, 28 people trained at this time.
* Covid support – supporting families who are struggling; making welfare telephone calls to vulnerable and shielding patients.
* Working with Volunteer Cornwall, for example helping with the collection of medication for patients, dog walking.
* Social Prescriber for young people employed, based at Wheal Northey.

DG said she is interested in training as a Community Connector, unfortunately she missed the last course.

**Action: AL said he will find out when the next courses are due to take place and inform DG and other interested PPG members.**

PPG would like to be involved with volunteering for the Social Prescribing Team.

**Action: AL will ask Social Prescribing Team to contact PPG members directly.**

**Social Prescribing - Useful links from Hayley Burgoyne:**

You can use our app/online directory of services ‘help at hand’ to signpost patients to appropriate services if they need simple signposting as the app is a comprehensive directory of local services that can support people to improve their health andwellbeing. Forexample,it lists all the walking groups, physical activity options, mental health support, volunteering, social activities etc.

See below for the links on how to download:

1. Download the Help at Hand App for iPhones and iPads:

**https://apps.apple.com/us/app/help-at-hand-community-info/id1441107175**

2. Download the Help at Hand App for Android phones and tablets:

**https://play.google.com/store/apps/details?id=community.hand.help**

3. Use the Help at Hand Web App on PC or home computer via your browser:

**https://app.hand.community/#/**

4. Alternatively visit our Help at Hand web page to download from there:

**https://hand.community/**

The real benefit of the Help at Hand App is that it is so easy to use. Whatever information the user is interested in just needs them to tap it and it’ll take you there.

**PPG Discussion**

Further discussion took place regarding the PPG, AL asked the group to think about the aims of the group. The PPG is in place for the benefit of the patients. PPG should be autonomous, the group has its own Chair and Treasurer, AL said they should also have their own administration. AL said SAH would be happy to help with printing etc, but PPG should be self-managing.

**Action: PPG to find suitable member to undertake PPG admin.**

AL gave summary of his previous employment history and experiences which everyone found very interesting.

AL said he will be attending meetings to discuss Cornwall’s Integrated Care Area (ICA) which forms part of the new Integrated Care System (ICS). The ICS has chosen Kate Shields, cuirrentr CEO of Royal Cornwall Hospital Ttust (RCHT) as its new chief executive and this will integrate the NHS, local authorities, and other partners, including the voluntary sector, joining forces to create single integrated systems which will plan, fund and deliver all services needed by local people. AL also attends the Primary Network meetings (PCN) also which are groups of GP practices in areas working together..

**3: Treasurers Report:**

* CK has sent apologies, there will be an updated report at the next meeting.

**4: Chair Update:**

**Minutes of the last meeting – 27 May 2021**

Telephones – AL said this is still a work in progress, reception team handle a huge amount of calls each day, and are constantly multi-tasking. We are looking to streamline admin processes in order to make more admin staff available to answer calls. SF mentioned that she had telephoned SAH one day and an automated message came on saying the ‘operator is busy’ which she felt was not acceptable. AL said that SG has now recorded a message which will come on when the lines are busy.

The telephone provider we have at the present time is unable to facilitate a patient call back system at the moment.

Online facilities are available for patients, for example e-Consult, agreed online services need to be publicised more.

**Fundraising**

Discussion took place regarding fundraising.

* AL agreed he will discuss fundraising with the partners and report back to PPG with definitive ideas at the next PPG meeting.

The following fundraising suggestions were made by DG:

* All surgeries should have hoists and stirrups in consulting rooms, she said she felt this equipment would help eliminate health inequalities. Foldable hoists are available if there is a shortage of space.
* Slide boards would be useful.

**Action: AL to report back to PPG regarding fundraising suggestions.**

**5: Any Other Business:**

SP mentioned again that the PPG would like to hold a thank you party for staff, possibly around November time. She asked if the partners would be able to contribute £10 per head towards costs. AL said the viability of a party would need to be discussed with the partners.

PPG membership was discussed briefly, the PPG remains very keen to attract younger members to the group. SP asked if the meeting time of 10am was suitable for everyone, or if it should be changed. This will be discussed further at the next meeting.

SP reminded group members that some items discussed in the PPG meetings are of a confidential nature. Confidentiality agreements have been signed previously by members, to bring along confidentiality agreement paperwork to next meeting to update records. Up to date paperwork - PPG Terms of Reference and Contact Details for signing were distributed to those present, members that were unable to attend the meeting today will have the opportunity to sign paperwork at the next meeting. This is to ensure PPG paperwork held is up to date.

SP thanked everyone for attending and closed the meeting.

**Date of Next Meeting: Thursday 23rd September 2021, 10am, Pattern Hall, Charlestown**