

MINUTES OF THE MEETING OF PARCHMORE PRACTICE PPG HELD ON 30 JANUARY 2019

IN ATTENDANCE:

1. Chairperson: Raj Rajendran - Vice Chair
2. Brian Dickens MBE - Group Operations Manager
3. Mohan S Dhamait OBE - General Secretary
4. Mary Auguiste-Ernest - Secretary
5. Dr Fernandes
6. Pravin Kapadia - Committee Member
7. Emaline Weekes - Committee Member
8. Terry Guy - Committee Member

Apologies:

Luke Ernest, Frances Meer, Mukesh, Peter.

9. Minutes of meeting 5th December 2018 approved and change in wording on page 3, to be paid in 6.0. Brian will send this to Mary for the amendment.

The whole way of working in terms of social prescribing is not built on money. The money we originally received was spent on delivery of activities. Any money used for social prescribing has not been lost. We will need more clarification on the budget.

Page 1 Accurate,
Page 2, accurate.
Page 3, change in wording to 6.0
Page 4, Action points.
Page 5, Action point.

Matters arising:

Monies in the workplan we receive funds when we require it. Travel expenses etc. paid. We will give them a bill.

Page 3

Action point. Carers' Navigator – position no longer exists. Care Connector – Karen. Will come in and give a patient liaison overview and on anyone else who comes in. Will link in with social prescribing programme. Funded for more than the two hours. Will let us know when she will be attending the PPG.

Action – mentoring. Meeting with Steve. Has put us in touch with Barclays. Prince Charles Charity at Clarence House, will give us the infrastructure to put in the programme. **Action – Ongoing.**

Action point 3. Trumble Gardens - Meeting Beth from Crystal Palace. We have the Salvation Army providing this service in house and do not want to duplicate services. Streatham and Croydon Rugby Club have put themselves forward. Trumble Gardens is not indoor based and since the weather is cold, patients would rather be indoors than outside. The service in the Salvation Army is well attended. Will liaise with Crystal Palace and Salvation Army. Better to use the indoor base. **Ongoing.**

Page 4.

Dispensation of Medication - What will happen? There is ongoing concern about patients not getting their medication. This is a national problem and nothing has been settled yet. Dr. Fernandes radar. A national problem. May get medication – Nothing is settled yet.

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TV screens are now switched on. It has been recognised that they are too small. The PPG are looking to change them for larger ones. Maybe we can change them for upgrade. Can Les use master copies to fill screens – need to differ. There was an issue re switching off and cutting out which has been rectified. It was felt that much more information needs to be put on them –

5. New Staff – Jenny Reid from Haling Park – Team Leader. How we develop the capacity of our current workforce. Michelle and Roni are both ex-practice managers who are warmly welcomed by the PPG. Roni - is an ex-practice manager, she will take on patient experience, receptionist role, changing the appointment system and change in telephone – Senior Administrator. They are both welcome. A new practice nurse has been appointed – Lola. Dr Forest is going on maternity leave and will return once this is completed. We are currently looking for a locum to cover her role.

QUAFF Framework – we have to finish targets. We are doing well. Investors in People and the Investors Auditory will be here and interviewing staff to gain an idea of the support they received at Parchmore.

Finalisation of flu vaccine. People are coming in because they have flu symptoms. We must remember that a lot of people do become unwell when they have received it. We have sale and return targets to be met. Before there was one generic vaccine but now there is another for over 65s. We do have stock available.

Parchmore knows who has been vaccinated against flu. If patients are vaccinated in the chemist or elsewhere, do we still receive this information? Yes.

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Community

'Trust me I am a doctor'. Healthy lifestyle group consultations to be filmed. This has grabbed attention nationally as a way of working. A link has been put on to view. Facilitators will be practice staff.

Social prescribing – Thornton Heath Chronicle lists what has been done from here. Positive feedback on what we have done.

Two new initiatives.

‘This Mum Runs’ – Partnership with wider team and Mel, who was suffering with Post Natal Depression as a mum, and raises profile with Sport England. Funded programme with Thornton Heath. We have trained up Angels. 172 mothers have expressed an interest in the programme. We have been given access to a marquee programme. This activity gives mothers an opportunity to having their own time. Facebook has also taken an interest in this.

Partnership from community and patients to get access to water space. Difficult to work with GLL Greenwich Leisure. We have developed a relationship with Nuffield Health – We have access to free water space twice a week. Patients will be given a free health check and MOT. Twelve spaces are available which are quickly acquired. Women get access. If anyone wants to go please let Brian know. He will send out address. There is a Nuffield Centre in the Colonnades and one in Norbury. We can use with to work with local councillors. Gender sessions may be available at Royal Russell school – with Nuffield Health.

There have been four compliments on NHS choices about the practice.

We are in the process of setting things up and allowing the community to get access.

Morale. Reception staff to get more involved into the role of social prescribing. One of the receptionists was nominated for Employee of the Quarter.

On social prescribing nationwide, 2.5m people are doing similar things to us relating to this. Tower Hamlets has been doing so for nearly 20 years. In terms of South London, Lambeth. We are the first practice to do things on this large scale. This is a way of working together and building a community development programme. A report will be produced by the Major of London.

Dr. Fernandes came in.

Croydon Alliance or One Croydon have made up with Age UK, hospitals, CCG, PG collaborative who all work together towards one aim.

6. Draft workplan.

1. If we want to send someone to the NAPP Conference the Practice Board will cover this cost. So long as the expense is justified and agreed, there is no difficulty with this. The PMC will meet the expense.
2. Correction 2018/2019. **Priority** to change to **when appropriate**. **Lead: Alan**. Terms of Ref were revised last year. Decision taken that this was circulated and people put their names forward.

MEMBERS to GIVE FEEDBACK ON DRAFT WORKPLAN and add names under each items and if they wish to take lead. Comments should be sent to Mary within by 13th February 2019(2 weeks) of this meeting. Mary will collate all the

data, soon after meeting of the Sub-committee meeting to discuss the workplan and PPG awareness week projects. **Action: Mary.**

NAPP E-Bulletin. For information

In terms of primary care network, we will be involved. Changes will be part of Dr. Fernandes.

GP On line and appointments to get involved in. Part of the national plan is being able to book appointments, video consultations and look at patient records. Health watch.

Who would like to attend the Conference?

NAPP- Item 1d. Vacancies for Trustees.

AOB

Re budget item 6 in Minutes.

Mary stated that she would like attend NAPP Conference but no decision was made, this be discussed in future meetings.

A scheme laser printer is a good idea.

Teresa won Practice Manager of the Year Award. Asked to do an interview with UK Wide Magazine. Dr Fernandes will send a link about changing the way the practice works – reducing attendance, referrals.

Since the last time we met and the new NHS plan has been published.

The NHS long term plan holds 133 pages. The summary is given below.

Positive's in NHS Plan - improving access, digitalisation, integration, improving patient services, cancer outcomes, quality of care, cancer centres

The structure in plan states, "England covered by **integrated care systems (ICS)** in **two years** – involving a **single CCG** for **each ICS**".

However, not obvious the massive NHS organisational /structural change and challenge again to try and deliver the plan with the backdrop of costly distraction for leaders & managers and what will be the impact on the patients?

All CCGs have to make 20% management cost savings in 19/20.

The Croydon CCG has made excellent progress to balance the budget without reduction in services.

From the NHS plan does this means mergers of CCGs from six to one in SW London based at Wimbledon? If this is the case the services provided to Croydon on medical/ patients will have major impact. It will reduce the consultation with local patients on future proposed changes to the medical services etc.

This is the National issue we need to write to Steve Reed MP to take this matter in House of Commons as soon as possible. **Action: Raj, Mohan, Brian, Mary and Mukesh on his return.**

Currently everyone is thinking of Brexit.