PATIENT PARTICIPATION GROUP

TUESDAY 18TH JULY 2.30PM

MINUTES:

- 1. Welcome and introductions Kas Shackleford (KS) Practice Manager thanks all the patients for attending the meeting and remarked on the excellent attendance.
 - a) My Care My Way team Andrew and Janet introduced themselves and explained that MCMW was for all patients in the Kensington and Chelsea area that are 65 years old or over. It's primary aim is to help patients to avoid unplanned visits to hospital and the funding for this service has been provided with this aim but the teams main objective is to be proactive with patient care and preventative. It is very patient led and extremely flexible in how the team can help each individual patient. Each GP practice has its own Case Manager and Health and Social Care Assistant (The Chelsea Practice has Hodan and Jean assigned to care for our patients). Examples of support they can offer: help with hospital appointments, finding local groups to attend, ensuring that when you return home from a stay in hospital everything is in place to keep you safely at home. They are also working with the clinical teams in the practices to provide in house care planning appointments in which patients are invited to attend a longer appointment than usual in which all you medical and social needs are reviewed. There are leaflets in the practice explaining how the MCMW team work and you can speak with any of our team if you think the MCMW team can be of assistance.
 - b) Healthwatch PPG Project Coordinator Odeta Pakalnyte (OP) introduced herself to the meeting and explained that she is supporting practices to develop their PPG and providing them with leaflets and posters to entice more participation from patients. She explained the importance of the PPG and how the evolution of the NHS focuses on the patient's views and their feedback. She highlighted the different ways that the PPG can come together – at meetings in the practice, via emails or even via live online feeds. KS mentioned that at present the practice has meetings quarterly and for those that cannot attend an agenda is sent via email or post prior to the meeting and any points arising from this correspondence is provided at the meeting. The minutes are then fed back to all members. OP also explained that she coordinates the Local PPG Network which is made up of local GP practice PPG members. The PPG Network is useful for distributing information about the health and social care developments and initiatives that affects patients locally, share PPG good practice and project ideas. Three or four times a year, OP facilitates free PPG members' events: network meetings/workshops/seminars. OP welcomed all PPG members to join the Network to keep up to date with the developments in Health and Social care locally.

OP went on to request that the PPG at The Chelsea Practice start to evolve to become run by the patients with the roles of Chairperson and Minute Taker to be

taken on by the patients allowing autonomy and the ability for the patients to offer objective feedback and make suggestions for improvements to their practice without feeling governed by the practice staff. KS welcomed any volunteers.

2. Updates from GP Practice staff

- a) New staff KS went through the present and new staff:
 - a. Dr Claire Scudder Principle doctor. She works every week day morning and also offers care planning appointments on Monday and Tuesday afternoons for our MCMW patients.
 - b. Dr Savio Lewis with the practice for over6 years and has been fantastic looking after all our patients especially the children. He also works at the Urgent Care Centre Paediatric team at Chelsea and Westminster Hospital. He works Monday mornings and all day Thursday and Fridays.
 - c. Dr Sophie May she joined us in April after working at the practice on an irregular basis over the last year. She has already become a favourite with the patients. She works all day Mondays and Tuesdays.
 - d. Dr Rebecca Curtis she joined us in May and supports Dr Scudder on Wednesday mornings.
 - e. Janice Johnson is our Practice Nurse and she has been caring for our patients for over 2 years. She works all day Tuesdays and Fridays as well as Wednesday mornings.
 - f. Mehran Soomro is our Health Care Assistant and supports Janice in caring for our Diabetic and Asthma patients as well performing Health Checks and runs the phlebotomy (blood taking) clinic every Monday and Thursday mornings. He holds his other appointments on Monday and Thursday afternoons.
 - g. Sharon Devlin and Pavla Hynkova are our Receptionist that offer a caring first point of contacts.
 - h. Sam Blake (Administrator) and Kas Shackleford (Practice Manager) support the practice and look after all the back office jobs but also enjoy meeting with patients.
- b) Update on The Violet Melchett Clinic Patient Engagement
 - a. Brief overview KS presented a statement put together by the West London Clinical Commissioning (WLCCG) regarding the new development of the Violet Melchett Clinic and how they hope to improve the facility for our patients and the local community. Please see attached. The meeting discussed how the development would impinge on the practice delivering the day to day running. KS was unable to reassure the meeting as the Cadogan Estate had yet to submit the plans to the council proposing the changes therefore she could not impart on how different the inside of the centre would look. The building is not listed therefore no assumptions could be made as to preserving the centre although the WLCCG would like to keep the façade the same. Other points raised by the meeting which have been fed back to the WLCCG:
 - i. The meeting was concerned that Cadogan were submitting the planning to K&C and would try to change the centre into a residential site. They wanted reassurance that this would not happen.
 - ii. There was concern that the practice would be difficult to

- access during the build.
- iii. The group suggested that a notice board be up in the practice dedicated to letting the patients know the progression of the project.
- iv. They also felt that the residents in the area should be alerted.
- b. Survey ideas KS presented a survey that had been put together for all patients to be sent so they could have an opportunity to comment on the development. The meeting liked the content of the survey although thought that a list of all the services proposed to be available at the centre should be included. The feedback has been sent to the WLCCG to revise the survey to then be sent to the patients at the practice.
- c) IT at the practice KS briefly went through the new technological advances the practice has been bringing in to try and make the services as accessible as possible for all patients.
 - a. Online access this enables patients to be able to book and cancel appointments as well as order prescriptions and view their full medical records.
 - b. EPS is Electronic Prescribing that enables prescriptions to be sent directly to a pharmacy anywhere in the country which means patients can go directly to their choice of pharmacy and not have to come to the practice to collect the prescription and then take to a pharmacy.
 - c. Wifi will soon be available in the waiting areas for patients. KS reassured the meeting that the Wifi is independent from the practice internet therefore their data was completely safe.
 - d. Virtual PPG KS reiterated the facility for patients to have their say at their practice without attending the meeting in person allowing people with other commitments to still be a part of the PPG.
- 3. Patients' feedback, suggestions and comments unfortunately the meeting had run on for longer than one hour and therefore it was decided that this section would be at the beginning of the next meeting to ensure ample time was given.
- 4. Small project ideas and updates including important updates from the NHS and research at the practice
 - a) Community Service KS very briefly explained that more services are available in the community therefore aiming to decrease waiting times and lessen costs for the NHS.
 - b) COPD & Smoking KS explained that the practice is keen to work with research groups to help patients at the practice. At present the practice is working with COPD (chronic obstructive pulmonary disease) patients and the Royal Brompton Hospital. KS asked if there were any areas that the meeting would like the practice to look into for research possibilities. One member suggested Dementia and KS highlighted a posted on the wall inviting participate to take part in a local Dementia study.

KS thanked everyone for attending and taking part in the meeting.

Date of the next meeting -1^{st} or 2^{nd} week of October 2017.