

**Dr PAA Wood & Partners**

**Patient Participation Group Meeting  
Minutes of Zoom meeting  
Wednesday 19th May 2021  
Park Farm Medical Centre, Allestree, Derby**

**Present: Dr Woods**, Geraldine Comery, Val Haylett, Margot Keats, William Keats, Dee Coulthurst, Vanda Vickers, Richard Smith, Beth Soraka & James Burton of Health Watch Derby, Orla Smith of Health Care Foundation Trust Derbyshire.

**Apologies:**

**Vanda Vickers agreed to be Minute Secretary for the Group**

**Beth Soraka and James Burton of Health Watch Derby gave a presentation about their service.**

Health Watch HW Derby was established in 2012 following the Health and Social Care Act..

Their aim is to listen to and champion Health Service users.

Every Health Authority in England has a Health Watch. They work with regard to the demographics of their area.

Pre pandemic, Health Watch officers would visit surgeries, hospitals, clinics etc and ask patients about their experiences of that service and feed back to the service.

Post pandemic there is a generic online short survey [www.healthwatchderby.co.uk](http://www.healthwatchderby.co.uk), posters in public facing areas and social media platforms – Facebook, Twitter etc to gather patient views.

The anonymous survey asks what works and what improvements would service users like to see.

The results are collated looking at positive and negative comments and the results are fed back to the service monthly.

All findings are also sent to to the Clinical Quality Commission CQC.

The CQC considers what future CQC funded services are needed. The CQC refers to HW for comments or common themes and this feeds into reviews.

For example Primary Care Service – what are the overall themes highlighted e.g. any access problems, what are the good points and so on.

HW report to CQC monthly, having a two way dialogue. Bespoke projects are discussed following local themes/subjects/groups interests.

Currently HW Derby are working with black, Asian, and minority ethnic BAME women's experiences of maternity services with a view to implementing improvements. Communication barriers such as for non-English speakers are considered as well as the use of Plain English.

Other work involves Social Prescribing, Carer's Forums.

Special regard is made for hard to reach groups to ensure their voice is heard at the inception/ideas stage of work rather than at the end.

Beth was happy to report that since the pandemic all services appear to be working well together without duplication of information.

**Questions from members:**

Val asked if immigrants and rough sleepers could access services:

Asylum seekers and refugees had the same entitlement to Primary and Secondary Care as everyone else.

The Government arranges via immigration centres fair distribution of asylum seekers throughout country.

The Wilson Street Surgery deals with homeless people. Frontline EMAS can refer/signpost homeless people to services. Any person without a permanent address can register with a GP and have the same entitlement to Primary and Secondary Care services.

Margot asked about Social Prescribing:

This is a relatively new service set up by the Primary Care Networks PCN. There are 5 PCNs in Derby City. They are allocated a budget to address the needs of their area. Each one is different e.g. the elderly, social or mental health needs.

Geraldine explained the Social Prescriber are looking at the needs of 'heavy users' of the practice – these are people who may appear on the triage list 2 or 3 times daily. Is their need a social one? Are they lonely?

Work is done with local charities and other groups to best meet needs, e.g. gardening groups, book clubs and other hobby groups. The Social Prescribers are not therapists but they ask GPs to refer to a therapy service. Dr Wood stated the Social Prescribers are a very useful element of the services available to the community. Wider non-medical needs can be met. If the Social Prescriber feels there does appear to be a health need they can be referred to the GP.

Orla asked about themes picked e.g. Mental Health, up by HW:

HW does liaise with other Foundation Trusts.

All reports e.g. Mental Health, Diabetic Health are on their website [www.healthwatchderby.co.uk](http://www.healthwatchderby.co.uk)

Dr Wood asked how HW ensures any challenging is acted upon:

Any individual comments on General Practices are fed back monthly to the Practice.

Every quarter the PCN get a report on themes.

Large project progress is followed up by HW after 9 months, but often the Trusts themselves feedback on progress. Lines of communication are kept open.

Richard asked about HW links with Derbyshire, particularly regarding Burton Hospital's apparent resistance to joining up with Royal Derby Hospital.

Does Patient Choice exist?

Are the homeless, migrants getting the vaccination? :

HW Derby does work closely with HW Derbyshire. There are joint projects to ensure no duplication.

Since the merging of University Hospitals of Derby and Burton HW does have joint monthly meetings with HW Derby, Derbyshire and Staffordshire.

Val pointed out it can take 3 to 4 years for mergers to fully work. Staff are working hard across the 5 sites sharing training, experiences etc. Staff are pulling together very well.

Personalisation – a holistic approach to patient choice does exist and is being worked on.

HW also meet with the patient experience team and there is lots of partnership working.

Any comments can be logged on the HW website

Homeless people are regarded as vulnerable and so are regarded as a priority amongst other vulnerable groups

Orla asked if HW had done any work been carried out by the Teenage Health Services on Social Media causing health harm:

Not currently, areas of work are being decided.

Pat asked if the HW booth in the Council House will return:

The Council House is not currently open.

You can access HW services via the website or by telephoning 01332 643988

Dee works for Cruise Bereavement Services and cannot praise Social Prescribers highly enough. They have been signposting isolated clients to Social Prescribers with great success.

## **AOB**

Val, Chair of PPG joined the group in thanking Beth and Richard for their input into tonight's meeting. We all found it very informative and interesting.

Since 5<sup>th</sup> July the London Road site has been renamed the Florence Nightingale Community Hospital

Val has been asked when ear suction/syringing will resume at the Park Farm Practice.

Geraldine reported that it is not currently recommended because of Covid risks. It is an aerosol generated procedure. Ear micro suction is not available at the Practice or extended hubs – the specialist machinery and training are expensive.

If anyone has any ideas for future speakers please let Val know.

## **Future Meeting Dates:**

14<sup>th</sup> July 2021 via Zoom - delayed by a week as Practice Manager on holiday

6<sup>th</sup> October 2021 via Zoom

5<sup>th</sup> January 2022 via Zoom

6<sup>th</sup> April 2022 via Zoom