

Brighton & Hove PPG Network meeting

Notes and Actions

When: Thursday 19 May 2022, 1.30pm – 3.30pm

Location: Virtual Zoom Meeting

Present:

Martyn Yeats (MY) – Brighton & Hove PPG Network - Chair

Lilly Kennard (LK) – Brighton & Hove CCG Public Involvement Manager

Clare Potts (CP) - Public Involvement Team (Interim) – Note taker

Val Cane (VC) – Park Crescent Health Centre

Mark Dixon (MD) – Portslade Health Centre

Robin Guilleret (RG) – Regency Medical Centre

Mark Richardson (MR) – Preston Park Surgery

Sunita Shier (SS) - St Peters Medical Centre

Mike Whitty (MW) - Withdean

Eve Castle (EC) – Beaconsfield Medical Practice

Fiona (F) – University of Sussex Health Centre

Gemma Clayton (GC) – Goldstone PCN

Apologies:

James Hatch, Lloyd Ungoed and Sharon Lyons

Item ref	Item description	Action Number
1.	Welcome and Apologies	
1.1	Apologies and welcome	
1.2	Declarations of conflicts of interest - None declared.	
2.	Last meeting updates	
	<p>Action points:</p> <p>Previous actions were from quite some time ago and are now out of date.</p> <p>NHS Long Covid Presentation from last meeting was circulated with the last minutes.</p>	

	<p>Matters arising: None declared.</p>	
3.	<p>The future of the Brighton & Hove PPG Network</p>	
3.1	<p>MY opened a conversation about resuming face to face meetings and whether a hybrid with Zoom is a possibility. Responses include:</p> <ul style="list-style-type: none"> - Hybrid can be difficult to organise, and not many meeting rooms in the city are geared up for this yet. - Seeing people is good for mental health and encourages useful conversations. Some people are happy to travel for face to face to meet with the group. - MD agreed that it is important to have hybrid meetings for those who cannot travel. He did a doodle poll of members and although the majority wanted to attend in person, some preferred virtual meetings. - SS prefers face to face but is happy with hybrid. - MD suggested trying both face-to-face and hybrid to see which is most successful. - RG stated that face to face enables you to see people's reactions. - Fiona added that students are more likely to come online and having full diaries makes virtual meetings easier to attend. <p>The group agreed that hybrid is the preferred option to cover the above points and enable as many people as possible to attend.</p> <p>Action: LK to organize the next meeting as a hybrid session 1.30pm – 3.30pm at Hove Town Hall on 25th August as the next meeting date.</p> <p>MD said it would be helpful to confirm remit of the group.</p> <p>Action: LK to distribute the Terms of Reference in advance of the meeting notes going out.</p> <p>MY said the group should consider meeting content and the balance of being given information by presentation from healthcare professionals versus having time to invest covering other aspects of PPG management. For example, providing support to practices, the development of new PPGs and engaging younger people.</p> <p>MW asked if PPGs could identify common issues of consistency of service and channel suggestions in the appropriate direction – such as practice telephone systems.</p> <p>VC said as individual businesses practices are in competition for staff, and this can resolve wage levels. Would it be useful or valuable if staff payments were level?</p> <p>MY said his surgery (Links Road) is good at answering calls and has invested in a new telephone system. Demand is causing severe pressure on all practices though.</p>	

GC stated that as a Primary Care Network Manager (Goldstone) it would be interesting and helpful to look at shared issues and how services could be improved. Would it be helpful if a representative from primary care commissioning attended this meeting? Work is underway across the city regarding the telephone systems. PCN's are designed to share expertise and support with each other.

Action: LK to invite Primary Care Commissioning Team to PPG Network meetings in future

MD hopes that PPGs are supported by NHS management and are useful and appreciated by practices.

MY confirmed this group is supported and would like the group to be felt more relevant and useful rather than a focal point for complaints. There is a need to contribute value to services, such as providing feedback to practices.

GC responded to MY and confirmed that PPG's and patient engagement are a contractual obligation for the GP Practices. GC wants to restart the Goldstone PPG. There is a lot of new information about engagement in the new ICP guidance. The group's valuable time needs to be used properly. GC will be seeking PPG expertise for some structured tasks.

EC says her practice never cut people off and the voicing system says where you are in the queue. People are saying they would like to see a GP rather than have a telephone consultation and not being offered a face-to-face appointment.

MR finds they have issues which need to be addressed straight away and cannot attend to. MD suggested that a PPG representative is invited to any working group where new services are being introduced and this was well received.

MY would like to change the name of PPG's so that the perception of groups is not just as patients but lay people, which is often more positively received.

CP introduced herself as seconded to the patient and public involvement team from the community commissioning team. She has found the meetings useful for getting insights about services such as the Post Covid Assessment and Support Service. CP also suggested (if not already underway) that members provide practices with understanding about individual skills so that members can be meaningfully assigned to provide help to the practices with specific tasks.

MD asked if it be possible to get some explanation about how PPG's fit in to the huge hierarchy including the Health and Wellbeing Board?

LK agreed it would be useful to find out more about the ICS and how we all fit in, including the Health and Wellbeing Board. We speak about people and communities, and how PPG's are part of them, as well as helping individual practices. Changes this year include practice mergers and building projects and whenever these occur, we involve PPGs, Healthwatch and local communities more generally.

LK added that there is a new piece of work starting with Healthwatch and the CCG. They are developing a PPG toolkit to help develop this work and expand on the benefits. Please feel free to contact the team if they can help with anything.

MY confirmed that Healthwatch is always invited to this meeting with the objective of complimenting (not being in competition with) each other's work.

MY suggested having a speaker from primary care commissioning next meeting.

Action: LK/MY to meet and arrange the next agenda.

Action: Invite Healthwatch to discuss PPG Toolkit at the next meeting

Action: Have a speaker discuss the ICS and how PPGs fit in

MY requested brief action points from this meeting in a week or so to maintain momentum.

Action: CP/LK to produce brief action points for distribution a week after the meeting.

LK suggested it would be useful to send questions in advance for the next speaker.

Role of the Chair

MY is a temporary Chair and nominations are required to take part in the recruitment process. The Chair is elected, which gives the position weight.

Q&A

Goldstone PCN has three practices which did have PPG's that no longer exist and she is now planning to start up a PCN PPG (with individual practice representation).

GC asked how do we communicate what a PCN is, when the roles are for the PPG, to the public?

MR said it was important to think about why people join PPGs. Very difficult to attract under 65s. Do you wish to contribute to the development of services in your PCN?

	<p>MY suggested describing how PCN's work by telling how some clinical roles work across practice PCNs, such as physiotherapists and pharmacists. Also providing practical examples of how PPG members have helped (for example Covid-19 vaccinations).</p>	
4.	Comfort Break	
4.1	Comfort break	
5.	Round-table PPG Updates	
5.1	<p>MR – PPG has been meeting quarterly by Zoom but planning face to face/hybrid in July. Are we getting fewer on Zoom than face to face? Preston Park PCN gets 15 to 20 people quarterly including a clinical chair and GP. Hybrid meeting. Has not yet been asked to join any groups as lay members.</p> <p>MD - Portslade. Members have been hesitant about meeting face to face, but they have been meeting at a cafe. The GPs are keen for the group to restart. Economic pressures will cause more people needing GP help. Challenging times ahead including waits.</p> <p>VC – Park Crescent. She is unsure which other practices are in her PCN or how they are doing. She thinks meeting at a café is a good idea.</p> <p>Action: LK to send VC a list of which practices are in her PCN</p> <p>RG – Regency Surgery. Has a virtual PPG and is also looking for a successor.</p> <p>EC – Beaconsfield Medical Practice. Had a PPG at the end of last year and there should be another date soon. They are having a PCN meeting on Monday. She suggested the Brighthelm Centre if Hove Town Hall has no space – dependent on whether there is equipment.</p> <p>SS – St Peters Medical Centre. Has had no meeting this year, just correspondence. The merger is keeping them busy. She will find out what they are planning.</p> <p>MY said he would offer support to re-establish the PPG if useful.</p> <p>Fiona – Health Centre at University of Sussex. The PPG was in place but hard to engage students when they are temporary. But they have good examples of things that students can help with, Face to face appointments with pharmacists is the kind of thing they can get involved in. Also interested in mental health practitioners and physiotherapy.</p>	
6.	Any other business	
6.1	Action: JH to add GC to circulation list.	JH

	Date of the next meeting:	
	<p>Thursday 25th August 1.30pm – 3.30pm.</p> <p>Venue TBC (possibly Hove Town Hall). Following feedback from the group’s members, we will aim to hold the next PPG Network meeting in a hybrid setting, to allow people to come together face-to-face with the option to virtually call-in as well.</p> <p>Action: Everyone to let James Hatch know about any venues your PPG / community group uses that could potentially host a hybrid meeting, with space for up to 20 people and the option for video conferencing.</p>	All