



**Minutes of the meeting held at the
Voluntary Services Centre, Union Street, Burton DE14
1AA Thursday 2nd May 2024, between 14.00 and 16.00**

1. Present

Sue Adey-Rankin, SAR	Chair East Staffs District Patient Engagement Group, (Tutbury Patient Forum)
John Bridges, JB	Vice Chair East Staffs District Patient Engagement Group, (Tutbury Patient Forum)
BJW	(Tutbury Patient Forum)
KL	(Peel Croft PPG)
RJB	(Trent Meadows PPG)
KB	(Rocester PPG)
JW	(Barton PPG)
LK	(Peel Croft PPG)
DH	(Tamworth PPG)
CD	(Trent Meadows PPG)
KB	(Bridge PPG)
LT	(Carlton Group PPG)
IL	Support Staffordshire Community Officer, Burton on Trent District
DB	Healthwatch Staffordshire

2. Speaker

SMcK (Trent Meadows PPG and Social Prescriber).
To give update on Social Prescribers within East Staffordshire

3. Welcome

The Chair, SAR, welcomed everyone to the meeting, especially to KB, from Bridge PPG who was deputising for CR.

4. Apologies

The Secretary, JB, had received the following apologies:

EM	(Alrewas PPG)
LH	(Peel Croft PPG)
TB	(Yoxall PPG)
SG	(Yoxall PPG)
BP	(Wetmore Road PPG)
RB	East Staffs PCN Research & Support Manager.
DM	East Staffs PCN Community Manager

5. Minutes of the Meeting held on 21st of March 2024

The Chair, SAR, went through the minutes and asked if there were any amendments. No issues were raised, and the minutes were accepted as a true record.

6. Matters arising from the Minutes.

There are no matters arising that will not be covered under the agenda.

7. Action Log Update

To reduce time, the update had been circulated by the Vice-Chair, JB. The details were as follows:

(i). My Health, My Way Project

The Vice-Chair, JB, is a patient representative on the My Health, My Way project. The steering group started meeting again early March 2024. The Project start date is now planned for May 2024. Currently, letters to the various patient groups and the set-up of a website are being put into place.

Update: Just waiting for finalisation of the governance procedures and sign off by the IBC. **Action still ongoing**

(ii). Constitution

Update: Changes to Constitution agreed and new document is separately attached. Final ratification to be made on 2nd May. The members accepted the new changes, and this will now be put onto the website. **Action closed.**

(iii). Social Prescribing

Several questions raised at the last meeting and sent to the Social Prescriber team for comment.

Update: Below are the questions raised and the responses, in yellow, received back.

a) A Patient referred for social care, eg counselling, is no longer a Patient, but a client of the outsourced Practitioner - **Yes**

b) NHS Patient records may not be seen by the Social Prescribers (hereinafter the SP); however, the latter should provide case notes for the GP related to the "treatment" that the SP has carried out – **Yes, if considered relevant and client consents, otherwise a discharge notification is sent back to practice records.**

c) There needs to be specific criteria for the employment of SPs working alongside the NHS relating to their qualifications, insurance, professional supervision, and professional codes of ethics adhered to. Otherwise, who takes responsibility/ is accountable for the outcomes of the outsourced intervention? – **This is all in place between PCN & BACT in line with national guidance.**

d) It is worth noting, for example, that the Protocols and Guidelines used in Derbyshire Primary Care, not too long ago, for the employment of Counsellors as non-NHS providers ran to 61 pages. The system changed to one where those Counsellors became direct employees, but the professional standards demanded in those original criteria would not have changed – **We as a PCN do not have counsellors only Social Prescribing service who refer / signpost clients to registered organisations / MPFT support services.**

e) We now are reverting to outsourcing as an alternative to direct employment, however, I cannot see where the safeguards are regarding patient welfare. I am also concerned for the professional safety of GPs who may have insufficient information on the outcomes of the external intervention but have, the responsibility for making the referral in the first place – **Consent is obtained and documented at the time of referral being sent. NHSE / VCSE / Council and other Integrated working is actively being encouraged from NHSE / GOV UK etc and features as part**

of the 5 year long term plan. Social Prescribing is considered a means to which people can be provided significantly more time and support than can be provided by a GP in a 10min appt and current data sets do seem to be supporting a much-improved wellbeing and change in patient / client behaviour, thus reducing burden on already over stretched services.

f) Following a comment made to me, by Dr Poonian, since Patients in this area may be referred to either Derbyshire or Staffordshire-based providers, are the standards/levels of outsourced interventions in these two areas based on the same criteria? I expect not as services will be commissioned by different ICBs etc.

In addition, to the above we have Emma Sykes from the Social Prescriber team coming to speak to the members on the 2nd of May. Action complete

(iv). Topic raised by RJB, Trent Meadows PPG

RJB was conscious that recent meetings had been extremely busy with some items having to be left off busy agendas. In addition, verbal updates from certain external organisations had to be rushed.

It was recognized that there is a lot to get through and wanted to ask whether:

- a. Should we have a longer meeting time?
- b. Shorter agendas?
- c. More frequent meetings?

It was also recognized that the meeting runs better if reports could be issued prior to the meeting and the time spent on taking questions or giving updates. This is something that has been introduced, as illustrated in the current meeting.

Everyone present, agreed and the Chair proposed that the members have time to reflect and send their thoughts to the Vice-Chair, JB. These would then be correlated and sent out prior to the next meeting. The topic would then be put high up on the agenda for the next meeting for discussion and agreement on the way forward. RJB was thanked for raising the topic. **Update: As of 27th April, no feedback received.**

The Chair, SAR, asked RJB if he would like to give further details on his thoughts. RJB agreed and gave the following, with input from the members present.

- The agenda needs to be shorter, or the meeting longer/more often. ***For this meeting an attempt has been made to reduce both the agenda and time. This has been by sending, the action log update and other reports have been sent prior to the meeting. This to enable further discussions on the topics to be brief.***
- Instead of peoples initials on the minutes use full names. ***The members present, were not keen on this as the minutes are in the public domain when they go onto the website.***
- Do not use acronyms. ***All in agreement with this.***
- Anyone who wishes to speak should go through the Chair and there also shouldn't be other conversations going on. ***All in agreement with this.***

Everyone thanked RJB for his comments and thoughts and will endeavour to keep to the suggestions made.

8. Update on Social Prescribing

Initially this update was going to be given by Emma Sykes senior Social Prescriber and Manager. However, due to other reasons the update is now being given by SMcK, who is a social prescriber in the East Staffordshire team.

The following update was given:

- Been in operation for a year.
- There are currently 6 Social Prescribers, SPs, in East Staffordshire plus two people who act as "form fillers."
- All goes through the Joy App. To date 2000 patients have been seen and it is estimated that 10,500 clinical interventions have been prevented in that time, (data as recorded on the clinical EMIS system).
- The SPs see the individuals within the community, connect and speak via the phone or if a home visit is required then it must be with another colleague.
- Can direct them to various other organisations that can assist an individual's needs. The following examples were given on

the type of organisations that people are referred to:

- Referral to Alzheimer's, Citizens Advice.
- Connect with Garden Groups, Art Classes etc.
- Tie in with the Staywell Clinic.
- Having time to listen to what the individual has to say.
- Most people are contacted within a couple of weeks, but some people are currently waiting longer. We are doing our best to triage and bring the waiting times down. We are not an emergency service.
- Each SP will have two or three surgeries to cover. Notes are taken on all contact with an individual and entered onto the Joy App and if clinical need onto the EMIS system.
- KB, Rocester PPG, mentioned that she knew of a patient who had a phone call and the questions being asked were very detailed and to do with mental health. SMcK indicated that would not have been an SP, more likely to have been a Mental Health Advisor. Also indicated that Rocester have access to both Staffordshire and Derbyshire SPs

Further comments were made before the topic was concluded. The Chair, SAR, thanked SMcK for attending and updating the members present. SMcK then left the meeting thanking everyone for the opportunity.

9. Patient Stories

Ian Leech

- Following her first stay in hospital back in January my mother was sent an appointment for the Urology Clinic. This was cancelled and re-booked for Tuesday 16 April 2024 at 2pm with Dr. Nair. My mother's re-appointment letter was written on the 5th of March 2024. As always there was no explanation about what the urology clinic was or why they wanted to see her, but I know that is standard.
- As my mother cannot get into my car, I arranged transport for her. This was done through ERS Group.
- I booked my mum's transport, giving them all the details and was given a reference number.
- On the 16th of April, I received a text from my mum at 13:07 to say the transport had not arrived and she was going to ring the

hospital to tell them she would not be able to attend as there was no transport. I told her to give them till 13.45 as it is only a ten-minute journey from her flat to the hospital. Through sheer worry, she must have rung ERS at 1330 as I received a text at 13.32 from my mum to say that they had told her that they were on their way.

- At 1408 I received a call from my mum to say that she had rang the hospital to tell them she may be late. They had no record of her being booked to see Dr Nair or his team at 2pm on the 16th of April, although I have the letter with the time, date, venue and who she was seeing. I cannot understand why they have no record when they have sent out a letter. Obviously, my mum has been stressed about this, I have had constant phone calls and running commentaries on her anxieties and phone calls.
- To top it all, the transport that I had arranged to pick her up for her 2pm appointment arrived at 2.30pm.

My mum now must wait for another appointment. She was given her catheter during her first hospital stay in January, and as far as she is aware, that was not changed during her second stay in hospital in February. Part of the reason for the appointment was to see if she still needed the catheter and if so, to change it, as she was told it should be changed after 10 weeks. She is way over that now and I would suspect running a high risk of infection.

So far, I have had three experiences of ERS Group.
the first time they had no record of her transport booking,
the second time they arrive half an hour after her appointment.
the third time they turned up.
It is beyond incompetence and another example of a broken system.

DH, (Tamworth), indicated that the issue with ERS have been raised to the Integrated Care Board. They are looking investigate the situation and look into the issues being raised.

The situation has also been raised with Healthwatch Staffordshire

KL, (Peel Croft PPG)

KL had to go to A&E recently with a heart issue. Was well looked after and had a 10day stay in hospital before returning home. 10 days later had medication delivered for her. Had her name and address on the package. However, when her carers opened the package, the medication was for another person who also lived in the building. Rang PALS for two reasons:

- Concern that if it were not for her carers, she could have taken the tablets as has severe poor eyesight and was expecting some medications.
- Had a prescription for someone else so her carer now knows she is taking so a severe breach of patient confidentiality.

At first A&E tried to blame the discharge assessment unit who in turn tried to blame the taxi driver.

After discussion, the discharge unit finally admitted it was their mistake. Discussion on this with other examples of errors mentioned. KB, Bridge PPG, indicated that what happened to KL was a data breach and that UHDB must report this within 72 hours.

Other stories relating to hospital care.

- Patient supplied with out-of-date medication at Queens which had been sent from Derby.
- KB, Rocester PPG, related the poor treatment her brother received when in hospital.
- JB, Vice Chair, related the excellent treatment he had received when having an operation as an outpatient.
- KL, Peel Croft PPG, related she had had superb care recently when admitted to A&E.
- A patient had an appointment for a wheelchair assessment at Cannock. The transport came and started off on the journey until the patient intervened and asked where they were going, to be told Stoke!
- BW, Tutbury PPG, recalled the times when her husband had to go to Birmingham for PET scans. No transport and they had to go there and back via the train. On a positive side her neighbour's son has mental health issues and is receiving excellent care.

The above stories illustrate both the good and bad sides of the NHS.

10. PPG Updates

(i). Yoxall PPG Update. Report sent prior to the meeting.

We had our AGM on Wed 17th April from 6 -8 pm at the surgery. Although it was widely advertised unfortunately no new members attended. However, the regulars are still keen to continue! The Chair & Vice Chair were re-elected, and we now have a new Secretary.

We will be having a stall at our village fete in June & plans for the Yoxall & Barton combined Health Event in August are well underway.

The Practice Manager assured us that all the surgery staff are very appreciative of our efforts to help & support them.

(ii). Tutbury PPG Update. Report sent prior to the meeting.

Our next meeting is not until May 15th.

The March quiz night in which 96 people attended, and over £350 raised which was the best and helps us do the work we do. The latest recent Trent and Dove Coffee Connect morning was well supported and gave the opportunity to sign up new members to our Forum.

A small sub-group of the PPG meet with the Practice to discuss certain topics, including a Patient survey that will take place throughout June.

The planning for the Health and Wellbeing event being held on Thursday, June 13th is going well.

(iii). Peel Croft PPG Update.

LK informed the members that the situation of the Peel Croft PPG is worrying as there are now only 5 members. At the last meeting there were only two members and Dr Faarup.

11. Support Staffordshire Update. Report circulated prior to the meeting. Update from the Support Staffordshire Community Officer for Burton/Uttoxeter.

Most recently the work of the Community Officers has been centred around the second round of Engagement Funding. This is a pot of funding for groups to bid for a minimum of £500 and a maximum of £2,000.

Number of Applicants: 16

Number that went to panel: 8

Number that was funded: 6

Successful projects included topics such as ...

- Deafness - Events (Hubs) twice a month (one in each location) for 6 months, preventing loneliness and isolation and signposting key support access.
- Rural Isolation - To focus on rural communities to support people, facing more demands and challenges because of the cost-of-living crisis, and the increased burden on wellbeing and mental health.
- Gardening for Mental Health - Raised bed and bug hotel project with mental health support group from their Horninglow, Burton location.
- Mindfulness sessions to offer insight and support for neurodivergent/SEND/SEMH young people to experience mindfulness, offering steps to adapt practices to mitigate harmful behaviours.
- Yoga sessions, peer support and Diabetes education for women over the age of 50 of South Asian heritage in Burton
- A project aimed at providing free loan push bikes, safety equipment and personalised, ongoing support to individuals referred to us by our health partners.

All successful bids will receive support from a Community Officer, if required.

As mentioned at the last meeting I wanted my role to have a particular leaning toward patient advocacy and presenting health information. Both topics have long been a passion of mine, are an important part of healthcare, but are often overlooked.

I've had meetings with Ali and Judith at PALS and have introduced the Patient Liaison Service (PALS) and a local learning disability group, Friends2Friends (F2F). Ali and Judith have opened talks with F2F with a view to their members working with them.

Later this year I am delivering a presentation to Support Staffordshire staff titled Presenting Information. If anyone group/organisation would like to know more and receive the presentation, just let me know.

Monday 6th May to Sunday 12th May is National Dying Matters Week. Dying Matters Week is there to encourage people to talk more openly about death, dying and bereavement. Have you made your will? Have you discussed your funeral wishes? Where can you get bereavement support?

I am a Bereavement Champion for Support Staffordshire and can deliver Understanding Bereavement workshops to community groups/health organisations. Again, if you would like more details, please let me know.

12. Healthwatch, Staffordshire Update.

DB, Healthwatch, Staffs, gave the following update:

Initially, updated those present of the situation at Gordon Street Surgery. For several years, the surgery has been in special measures. Earlier in the year the ICB gave notice they were cancelling the contract and putting in another team. This happened from the 3rd of May, Bank Holiday weekend, and from Tuesday the 7th of May, the East Staffordshire Primary Care Network will be in charge. There has been an additional complication as the existing surgery cannot be used so alternative accommodation had to be found. This has meant temporary accommodation at two sites will be used.

Patients have been kept informed and the District Patient Group Chair, SAR, has reopened the phone line, used using COVID, to take calls from patients. 10,500 patients affected. The situation is being closely monitored.

Discussion on the topic and the comments made included:

- This has been going on for too long and it is good that the ICB has at last taken this action.
- What can be learnt from this, what were the main causes and can lessons be learnt to prevent this happening elsewhere?
- Healthwatch has recently visited two new groups that have set up in Uttoxeter. A new Parkinsons Group is meeting in the Catholic Church Hall on Balance Street. The Forget Me Not Memory Café is meeting every Monday at Wilfred House.

- On the 27th of June, the local MP is holding a Pensioners Event in Uttoxeter Town Hall.
- Attending a bi- monthly meeting of voluntary sector groups that meets at the Health Community Centre.
- Currently working with an MPFT project team on a Community Stroke Pathway for Burntwood, Lichfield and Tamworth. Some patient engagement planned for June.

13. Additional Updates, circulated prior to the meeting.

a). University Hospitals of Derby and Burton NHS Foundation Trust Updates.

(i). Patient Forum

On Tuesday 9th April between 5.30pm and 7pm the UHDB Patient Forum meeting took place via Microsoft Teams. The Agenda and Minutes from the February meeting were sent to all District Members. The minutes from the meeting will be circulated once they have been received.

The next meeting date is 11th June 2024 between 10:00am-11:30am, via MS Teams.

(ii). Caring in the Community Event

UHDB are holding a Caring in the Community Event that is taking place at the Hilton Hotel at St George's Park, DE13 9PD on Friday 3rd May 2024 between 9.30am and 3.30pm.

The event is free to attend, and further details can be found by going onto the following links:

<https://www.facebook.com/share/p/6KjShSoyAJupQfVh/>

or

<https://bit.ly/3xeyjwH>

or contact Rachel at: rachel.kirby9@nhs.net

Full details have been sent out to everyone.

(iii). Patient Experience Week, Open Days

UHDB hosted 2 open days last week as part of Patient Experience Week. The events were a chance to have a chat and a drink with staff from Advice & Support Services (PALS, Complaints and Bereavement) about the range of support available. The dates and times were as follows:

- Tuesday 23 April 11am to 1pm in the PALS reception area, opposite Costa Coffee in the Main Entrance, Royal Derby

Hospital. Thursday 25 April 12:30pm-2:30pm in the Complaints Meeting Room, Ground Floor (along the corridor from WHSmith), Queens Hospital Burton

On both days, members of staff were on hand to direct people to the open days, and signs were displayed, to help people who were not familiar with the hospitals.

Full details had been sent out to everyone.

b). Integrated Care Board PPG Network

At the District meeting on the 21st of March reference was made to a new patient network that has been set up.

This will be Staffordshire wide and will provide a direct link between PPGs and the Integrated Care Board.

Full details are shown below and were distributed to all District members. The request was for members to discuss with their PPG and if interested to choose a representative and forward the details, via the email in the message below.

Sent on Behalf of Adele Edmondson Head of Communications and Engagement Patient Participation Group Network

Dear Colleagues

Please share below with your friends and colleagues who are members of PPGs.

We know PPGs play an important role in supporting practices to engage with their registered patients. They give people an opportunity to share their experiences of the services they receive and to work directly with practice staff to discuss any potential problems as well as possible solutions.

Due to the nature of PPGs, they are made up of people who live in the area and as such provide a localised view of the issues that residents may be experiencing, not just in relation to the GP practice but also wider health and care services. They are a valuable source of information and can help organisations to develop more tailored solutions to improve the health and wellbeing of residents.

To support PPGs and to provide an opportunity for information to be shared between them as well as with health and care organisations, a PPG Network is being developed for Staffordshire

and Stoke-on-Trent. Run by PPG representatives, it will provide a direct link between PPGs and the Integrated Care Board and support two-way communication between them. All PPGs are invited to nominate a representative to attend the network. This could be the PPG Chair, or another nominated representative decided by the PPG.

PPGs can send contact details for their nominated representative to

ssotics.comms@staffsstoke.icb.nhs.uk

The first meeting of the network is to take place via Teams on Wednesday 8th May at 6pm. A diary invite, including Teams link, will be sent to all nominated representatives.

c). East Staffordshire and Surrounds Diabetes UK Patient Network Update.

- The planned face-to-face meetings within East and Southeast Staffordshire have been held.
- The latest Zoom virtual group meeting was held on the 25th of April where the speaker was:

Sam Hussain,
Senior Clinical Research Practitioner/Inclusion
and Involvement Manager,
Research and Development
School of Health Sciences Room 420
Derby Teaching Hospitals NHS Foundation Trust

Who gave an excellent presentation and Q&A session on her research work with people who have diabetes.

Regarding other work, the Chair attended the following events:

- Health and MSK information day at the Uxbridge Mosque on the 25th of April
- Gave a diabetes awareness talk to group for partially sighted support group in Burntwood on 6th of April.
- Attended a further Diabetes 8 care event at Pirelli. Further ones planned for June and later in 2024.
- Been involved in the Grants Advisory Panel for the assessment of Diabetes UK Research Projects.
- Attended Clinical Diabetes Meetings

- Attending as a representative of the Voluntary Sector on the Integrated Care Board ELF Portfolio, and Programme Boards, (**E**nd of Life, **L**ong Term Conditions and **F**railty).

Going forward involved in:

- The planning for possible further Health Days within the mosque and Hill Street Clinic for May/June
- Attending Health events at St Georges in May, Queen Street in May, Tutbury in June, Burton Marketplace in June, Uttoxeter in June, and Barton in August.
- Further assessment of Diabetes UK Research Projects during May.
- Holding the planned face-to-face and virtual patient network meetings.

e). Primary Care Network Update

Firstly, DM, sends her apologies for the meeting but will be involved with COVID vaccinations at Pirelli. Regarding the current campaign 6500 vaccines have been administered as at close of play Sunday 28th April 2024.

Recently, the PCN held an event to highlight the collaborative work done with surgeries regarding East Staffordshire GP Improvements. A video was produced, and the link is as follows: East Staffs GP Improvement Summary

<https://vimeo.com/937358066/210f49ad19?share=copy>

14. Any Other Business

- IL, Support Staffordshire, informed the members that he gave a plasma donation recently. There are only 3 centres in the UK, New St, Birmingham, Glasgow, and Twickenham. The centre in Birmingham was excellent and was well cared for. Unlike giving blood, you can donate plasma every two weeks.
- The date of the next meeting unfortunately clashing with the Tutbury PPG Health Event. As both the Chair and Vice-Chair will be involved it means that a new District Meeting date must be found. The room is available the previous day, Wednesday 12th of June and all those present agreed to holding the meeting then.

15. Review of the Meeting.

Highly informative, good discussions.

It also showed how the time can be better utilised by having reports being sent beforehand.

16. Date of Next Meeting

Date of Next Face-to-Face Meeting: Wednesday 12th of June 2024, 14.00 – 16.00. The Chair, SAR, thanked everyone for their contributions to the meeting.