



SWL Integrated Urgent Care Patient Partnership Group

Minutes

10th August | 2020

Date	Version/Notes	Author
8 September 2020	V1 DRAFT	Jacqueline O'Meara
10 September	V2	Paul Pegden Smith

Held at 18:00 10th August 2020 - Virtual Meeting

Attended by:

Paul Pegden Smith – Chair	PPS
Tariq Salim – Vice Chair -Croydon	TS
Paul Dong – Wandsworth	PD
Katie Hackett – Vocare	KH
Steven Pink – CEO SELDOC	SP
Richard Okerchiri - Merton	RO
Scotty McLeod – Kingston	SM
Dr Kevin Barnett - SELDOC	drKB
Jacqueline O’Meara - SELDOC	JOM
Roy Simpson – Croydon	RS
Logie Lohendran - Merton	LL
Karen Birbeck – Croydon	KB
Apologies:	
Shaun Crinion – Vocare	SCr
Charity Mutit	CM
Michael Hembest – Croydon	MH
Shakeel Cockar – Croydon	SCo
Juliet Motley-Wilcock - Croydon	JMW
Anne Milstead - Croydon	AM
Maureen Levy - Croydon	ML
Chris Coke - Kingston	CC
Jeffrey Vanhek - Kingston	JV
Shakti Mathers - Kingston	SM
Yvonne Peel - Richmond	YP
Robin Bishop - Wandsworth	RB
Mark O’Connor	MoC
Anabel Claro	AC
Jatinder Bhuhi - SWL	JB
Andy Gregory – Vocare	AG
Eddie Ramlakhan – SWL Alliance	ER
Wendy Micklewright – Richmond	WM
Caroline Cameron – Wandsworth	CC
Launa Watson – Sutton	LW
Janet Marriott - Richmond	JM

Paul Pegden Smith chaired the meeting and Jacqueline O’Meara took the minutes.

	Agenda	Action
1	<p>Introduction and Apologies for absence</p> <p>PPS noted that the meeting was quorate (see list above for apologies)</p> <p>PPS noted that TS has resigned as Vice Chair with immediate effect. PPS wished TS well and thanked him for his positive service on behalf of SWLondon patients. The current schedule of future end-to-end meetings, working alongside Vocare and SELDOC would be circulated to all PPG members by JO'M for their interest and potential attendance.</p>	JO'M
2	<p>Approval of Minutes from 10 February 2020 –</p> <p>The minutes from 10 February 2020 were approved. PPS noted that there had been a meeting on COVID impact with Providers and Commissioners on 11th May where PPG were represented by PPS and TS. A copy of the minutes from this meeting were circulated to PPG members. It was not a formal PPG meeting.</p>	
3	<p>Action Log Update</p> <p>Please see updated action log for changes</p>	
4	<p>Provider Performance Presentation</p> <p>KH gave a summary of the presentation for June 2020 with key points listed below:</p> <ul style="list-style-type: none"> • 93.2% calls answered in 60 seconds • 0.8% calls abandoned • 76.69% Category 3 and 4 calls validated. • 66.83% ED dispositions validated. • Both Vocare and SELDOC reached 100% in all 10 quality audit KPI's. • 98.22% patients seen within the 2 hour target • 98.00% patients seen within the 6 hour target. • Since May 2020 call volumes have decreased back down to 'normal' levels. • Focus is now on diverting patients away from turning up to ED/UTC without an appointment • 111 First is the national scheme to do this. • Will enable senior clinicians to book into ED, UTC and Secondary Care Services. • Changed the profiling for SELDOC with increases in triage and decreases in face-to-face activity. <p>Next Steps</p> <ul style="list-style-type: none"> ❖ Plan and enact an intensive recruitment drive to support "111 First". 	

	Agenda	Action
	<ul style="list-style-type: none"> ❖ Plan and work with commissioners for winter pressures and the flu campaign. ❖ Work on increasing ED validation rates to 85%. ❖ Continue to work with HLP and Commissioners to respond and adapt to changing requirements. 	
6	<p>Area Patient Feedback on local IUC Provision Updates</p> <p>PPS noted that Primary Care Networks (PCN's) in Richmond are discussing collaboration on emergency care issues. SP noted the SELDOC are in the process of communicating with PCNs. <i>SP to speak to PPS and KH before communication is sent out.</i></p>	SP
7	<p>Update on Engagement Strategy</p> <p>Given the recent changes in the structure and direction of Urgent Care Provision, SP advised that two basic questions needed answering by Patient representatives:</p> <ol style="list-style-type: none"> 1. What are the key messages you want people to hear about? 2. Who (which organisations) from each PPG locality can proactively help spread the message? <p>PPS also noted that the members can support local campaigns in line with the National campaigns.</p> <p>All agreed for JO'M to send out to PPG Members and collate responses (via survey monkey) by mid to late September 2020. PPG to drive this forward and to push this out, for example to Healthwatch.</p> <p>POST MEETING NOTE from PPS:</p> <p>Dear members of the SWL Integrated Urgent Care PPG,</p> <p>At our last meeting on 10th August, we agreed, Item 7 to shape the Engagement Strategy progress by providing from our individual knowledge, answers to the following questions and allow the Provider to set up an effective Engagement Communications Network. Whilst this is referenced in the 10th August minutes, we would like feedback from you in time for the 9th November meet.</p> <ol style="list-style-type: none"> 1) <i>From your local knowledge, who and what organisations do you think we need to engage with as the PPG?</i> 2) <i>What do you think they need to hear about and what do we want to know from them?</i> <p>For example, in the Richmond CCG area, we could be including:</p> <p>Who?</p> <ul style="list-style-type: none"> • Healthwatch Richmond • NHS Richmond Community Involvement Group 	PPS/JOM

	Agenda	Action
	<ul style="list-style-type: none"> • NHS Richmond PPG Practice Network • Richmond Borough Council • Others not covered • Key individuals for best communication • Key CCG officers <p>What?</p> <ul style="list-style-type: none"> • IUC basic rolling data • Local and national changes in Urgent Care provision • Best channels of communication for news feed e.g. local media, social media, sms/email, printed newsletter, events e.g. public consultation meetings etc. 	
AOB	Meeting ends 1900hrs	
	Next Meetings 9 November 2020 –Venue TBC	

Dear Patient Members,

Those of you who attended this meeting will know that Tariq Salim has resigned as Deputy Chair of our PPG on account of the pressure from his other roles for representation of NHS patients. We have wished him well and thanked him for his positive service on behalf of SWLondon patients.

However we are now without a Deputy Chair, a role required by our Terms of Reference. Tariq led our contribution to the End to End meetings and represented us on the work being developed for our Communications Strategy. If any member wishes to take on this important role, please let Jacqueline and myself know by the 9th October and we can hold a simple vote of patient members at the next meeting on the 9th of November.

This, of course, applies equally to those patient members not present at the 10th August meeting.

**Regards
Paul Pegden Smith
PPG Chair**