

Board Meeting in public

Minutes

8th December | 2015

| Date | Version/Notes | Author |
|------------------|---------------------------|----------------------|
| 16 December 2015 | V1 – Draft | Farhat Qasim |
| 5 January 2016 | V2 – 1 st Edit | Dr Belinda Coker |
| 19 January 2016 | V3 – 2 nd Edit | Dr Emma Rowley-Conwy |

Held at 14:00 in Deptford Lounge

Attended by:

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| Dr Emma Rowley-Conwy (Chair of the Board and Lambeth GP) | ERC |
| Dr Riaz Jetha (Chair of Operations Committee and Lewisham GP) | RJ |
| Dr Robin Rastogi (Chair of Finance Committee and Southwark GP) | RR |
| Dr Kishor Vasant (Chair of Clinical Governance Committee and Southwark GP) | KV |
| Dr Michael Uti (GP Director serving on Operations Committee and Lewisham GP) | MU |
| Dr Paul Heenan (GP Director serving on Clinical Governance Committee and Lambeth GP) | PH |
| Dr Belinda Coker (Medical Director and Southwark Locum GP) | BC |
| Derek Witt (Director of Operations) | DW |
| Phil Ruthen (Non-Executive Director serving on Clinical Governance Committee) | PR |
| Claudette Parchment (Patient Experience and Quality Manager) | CP |
| Thelma Essien (Patient Experience and Quality Co-ordinator) | TE |
| Farhat Qasim (Executive Coordinator) | FQ |

Member of public

| | BOROUGH |
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| Jacqueline Best-Vassell | Lewisham |
| Longanza | Lewisham |
| Jane Hopkins | Southwark |
| Joyle Bgb's | Lewisham |
| Eleni Mastoraki | Southwark |
| Martin Dadswell | Southwark |
| Asha Patel | Lewisham |
| Mr B V Rivers-Simpson | - |
| Matthew | Lewisham |
| Jessie | Lewisham |

Dr Emma Rowley-Conwy chaired the meeting and Farhat Qasim compiled the minutes.

| No. | Agenda Items | Action |
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| 1. | To receive apologies for attendance Apologies were received from Dr Farhan Rabbani (GP Director for Sutton), Charlene Sables (Director of Finance) and Steve Dewar (Non-Executive Director). | |
| 2. | Welcome and Introduction RJ introduced the Board and staff to the public. The public were asked to introduce themselves. RJ presented an overview of the history of SELDOC, which was established as a co-operative in 1996 to provide primary care to patients in Lambeth, Southwark and Lewisham during the Out of Hours (OOH) period (evenings, | |

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| | weekends and bank holidays). | |
| 3. | <p>Patient Experience update (Quarters 1 and 2, 2015)</p> <p>BC presented a summary of patient experience covering the period April to October 2015, which included</p> <ul style="list-style-type: none"> • Introduction of the new Patient Experience and Quality (PEQ) Team • Demographic data on patients attending SELDOC, and • Data on complaints, feedback and the results of patient satisfaction questionnaires. <p>BC informed the public that SELDOC received more compliments and accolades than negative feedback, and that 53% of patients scored the service provided as excellent, 23% as good, 5% as acceptable and 3% as poor. BC confirmed that patient satisfaction questionnaires were received from a representative sample of patients, according to age, sex and ethnicity.</p> <p>SELDOC received 16 complaints in 6 months, lower than the number received in the same period in 2014. DW reported that in that 6 month period SELDOC had 53,000 patient consultations; therefore the proportion of complaints in relation to consultations was extremely low. RJ commented that compared to other OOH organizations our complaint rate is very low as we invest in quality care. RR explained that we are not a profit based organization, therefore any surplus we get is reinvested into patient care.</p> <p>Members of the public expressed satisfaction about the positive feedback received from patients and relatively low number of complaints we have received.</p> <p>One participant enquired about SELDOC's funding mechanism. ERC explained that SELDOC is a GP co-operative formed by GP practices within Lambeth, Southwark and Lewisham (LSL), who have remained opted in to the provision of OOH care for their patients. These practices have pooled the funding received from the CCGs to provide that care and have delegated responsibility for the running of the co-operative to the GP led Board of directors, who are elected by the practices. SELDOC are also commissioned by Sutton CCG to provide OOH services to patients living in Sutton and the LSL CCGs commission SELDOC to provide OOH care for patients registered at the small number of practices in LSL who have opted out of providing OOH care. ERC also explained that we provide services from a number of sites across the boroughs we serve.</p> <p>One participant asked how patients can provide feedback about the service. BC explained that hard copies of the questionnaires are available at the treatment centres and questionnaires are also posted weekly to a random sample of 5-10% of patients who use the service. Additionally, patients can complete the questionnaire online or download it from our website, send an e-mail, letter or ring to speak to our PEQ team.</p> <p>One of the patients suggested leaving hard copies of questionnaires for the</p> | |

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| | <p>elderly who are unlikely to use a computer or the internet and are often hesitant take phone calls at home from withheld numbers. ERC explained that home visiting cards are provided to patients who are visited at home; home visits are more likely to be elderly patients.</p> <p>One participant asked how patients who do not speak English can provide feedback. BC explained that the SELDOC website is set up with Google translate so patients can complete the patient questionnaire or provide feedback online.</p> <p>One participant suggested linking up with local GP practice patient groups. CP explained that a SELDOC PPG was being considered and would be taken forward with patient involvement in Spring 2016.</p> <p>Action: PEQ Team to involve patients and stakeholders in reviewing the potential formation of SELDOC's PPG.</p> | CP |
| 4.0 | Items for discussion | |
| 4.1 | <p>Sign Up to Safety</p> <p>BC explained that 'Sign up to Safety' is a national campaign set up by NHS England to promote and encourage improvement in safety. NHS organisations can sign up to the campaign by making a commitment to prioritise safety by agreeing to the 5 safety pledges.</p> <ol style="list-style-type: none"> 1. Putting safety first 2. Continually learn 3. Being honest 4. Collaborate 5. Being supportive <p>One participant wondered whether this would just be 'tick box' exercise and whether it would be of any benefit.</p> <p>DW explained that it is about putting the patient first. In some areas SELDOC is not being as open as possible with the patients, and he believed that there are possible improvements we could make. ERC explained that at the moment this campaign is voluntary and we are already performing well when compared with other OOH organizations; however, we should not be complacent. The view from the public was that it was good that Board Members were prepared to be honest and open.</p> <p>ERC explained that signing up would not just be a 'tick box' exercise, if the public held SELDOC to account for delivering on the pledges. PR stated that signing up, demonstrating and displaying our commitment to safety would also provide good supporting evidence to the Care Quality Commission. RJ suggested matching up 5 pledges to SELDOC values.</p> <p>Members of the public and Board agreed to sign up the safety.</p> <p>Action: The pledges are to be revised to line up with SELDOC values.</p> | CGC |

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| 4.2 | <p>Patient and Public Involvement Strategy</p> <p>BC presented Patient and Public Involvement Strategy to the public with the aim of ‘embedding patient and public involvement into the day-to-day operational and strategic development of SELDOC’.</p> <p>ERC suggested having an index and clearer implementation plan outlining who would be responsible for each action and by when.</p> <p>CP explained that the PEQ team have just started the process of wider public engagement; they have made contact with Healthwatch in each borough, locality groups and with GP patient groups and other patient and public engagement groups. The public suggested putting SELDOC leaflets in the libraries, GP practices and other places accessible to public.</p> <p>The Board and the public accepted the strategy, with the amendment of a more detailed action plan. <i>It was agreed that implementation of the strategy will be led by the Senior Management Team, and the Board would review progress in 6 months’ time.</i></p> | <p>CP</p> <p>SMT & Board</p> |
| 5. | <p>Summary and Close</p> <p>Members of the public gave thanks and appreciation for setting up the meeting, the discussion and the way their questions were answered using easy and understandable English.</p> <p><i>Minutes of the meeting will be circulated in February 2016 and posted on SELDOC website.</i></p> | <p>FQ</p> |

Date of next meeting: *Date to be confirmed.*