

**East Staffordshire District Patient Engagement Group Minutes
of the meeting held at the
Voluntary Services Centre, Union Street, Burton DE14 1AA
Thursday 21st March 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)
EM	(Alrewas PPG)
RJB	(Trent Meadows PPG)
KB	(Rocester PPG)
LH	(Peel Croft PPG)
CD	(Trent Meadows PPG)
CR	(Bridge PPG)
LT	(Carlton Group PPG)
IL	Support Staffordshire Community Officer, Burton on Trent District
DB	Healthwatch Staffordshire

2. Speaker

Richard Hibell, Primary Care Research Nurse | LCRN West Midlands Core Team | NIHR Clinical Research Network (CRN)

3. Welcome

The Chair, SAR, welcomed everyone to the meeting.

4. Apologies

The Secretary, JB, had received the following apologies:

TB	(Yoxall PPG)
SG	(Yoxall PPG)
JW	(Barton PPG)
LK	(Peel Croft PPG)

DH	(Tamworth) via Zoom for part of the mtg
SMcK	(Trent Meadows PPG and Social Prescriber)
RB	East Staffs PCN Research & Support Mgr.
DM	East Staffs PCN Community Manager

5. Minutes of the Meeting held on 15th February 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.

6. Action Log Update

(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 is taking place. Further meeting 2nd April.

(ii). Speakers for 2024

Can we have someone to come and speak on the procedure that takes place to set up a DNR, (do not resuscitate). **Update: As previously mentioned, this has been put on the list of speakers for 2024**

(iii). Feedback from UHDB PPG Meeting February 2024

The Vice-Chair, JB, had sent out the following update prior to the meeting.

- 7 members from PPGs attended.
- Discussed the Terms of Reference, (Details at the end of these notes).
- Consideration to be given to having a joint Chair, UHDB representative and PPG representative.
- The Forum responds to the Operational Patient Experience Group, (OPEG), which in turn responds to the Patient Experience, Engagement, and Insight Group, (PEEIG).

This to be on a quarterly basis. When asked if any UHDB Governors sit

on these group it was indicated, not at present, but being reviewed. Members expressed concern that they currently aren't.

- The proposed speaker unfortunately ill so the talk on Update on Freedom to speak up.
- Had an update on the Patient Experience and Engagement Dashboard Report, PEASS. The dashboard gives overall information on patients' feedback, complaints and concerns, Trends, etc.
- Had the usual round the table discussions where the PPG representatives can raise questions/comments.

On this occasion topics included:

- Endoscopy Service at Sir Robert Peel
- Situation around the weekend availability of X-ray facilities at the Samuel Johnson Community Hospital, SJCM.
Patient experience example.
- Any plans to develop Imaging and Diagnostic Services at SJCM?
- Reminders for National Screening Programme as concerns raised around older people maybe being missed. Examples given.
- Having someone from the Community Hospitals Team to come and discuss the range of clinics currently in place and any plans for further ones in the future.
- Queries around ICB funding to the Trust being as it spans 2 ICB regions, Staffordshire/Stoke on Trent, and Derbyshire.
- Discussion around capital projects, especially the multi storage car park at the Royal Derby Site and the traffic chaos the work will bring.
- It was agreed that in future the meetings will focus on one topic.
- Cervical and Breast Screening Criteria.

Date of Next Meeting:

Tues 9th of April 5.30pm – 7pm via Microsoft Teams

(iv). Feedback from the ICB Patient Assembly

The Vice-Chair, JB, had sent out the following update prior to the meeting.

Bullet Points: The meeting had presentations and updates on the following:

- ICB Update following meeting on 25thOctober:
- Transformation (Inpatient Mental Health & Assisted Conception)
- Healthwatch (Maternal Mental Health & Reports of Findings)

- Joint Forward Plan (End-of-Life, Long Term Conditions & Alcohol Strategy)
- Communities Strategy Engagement (Staffordshire County Council)
- Green Delivery Plan
- Future Meetings
- Frequency and Agenda Items
- AOB

The main comments and discussions from patients covered. –

- a. The Long-Term Conditions Survey, why were patients not told of the survey?
- b. There should be at every meeting an Agenda item and time allocated for the Patient Voice. –
- c. Dates should be organised for all 2024 Assembly meetings.

Following the meeting the following was put into place by the ICB.

(i). Long Term Conditions Survey

We are hosting a third online workshop to get your views on how we can support people with long term health conditions, as part of shaping the ICB long term conditions strategy. The workshop will take place on Tuesday 20 February 2024, 6.30pm to 8.00pm. You can sign up to the event by completing this registration form. Registration for the event will close at 6:30pm on Monday 19 February 2024. There is also still time to complete the long-term conditions strategy survey. The survey will close on Wednesday 21 February 2024. We ask that you share this information with people who are living with long term conditions, carers who support people with long-term conditions, NHS staff and health professionals providing services to people living with long term conditions, and stakeholders who are interested in how long-term conditions can be supported. Emails were circulated to everyone by the Vice-Chair JB.

(ii). People and Communities Assembly meeting Dates 2024 The meetings will remain quarterly. Please note the dates below for your diaries:

9th April 2024, 10am to 12pm

24th July 2024, 10am to 12pm

2nd October 2024, 2pm to 4pm

22nd January 2025, 10am to 12pm

(iv). PPG Network Discussions started on the formation of a PPG Network that will report to the People and Communities Assembly Meetings Update to be given at the March District Meeting.

(v). Proposed Constitution Amendment

Following the discussions on this topic the following was put forward for ratification.

1. The Constitution will be ratified at each District Group AGM. This procedure is to be added to the current Constitution and the date of ratification be added at the bottom of the Constitution.
2. The addition of a Management Committee to be added to the Constitution. Under this heading, the following will be added:

A Management Committee consisting of:

- *The East Staffordshire District Patient Engagement Group Chair and/or Vice-Chair/Secretary/ Treasurer.*
- *2/3 Patient Group representatives. These to be from different Patient Participation Groups, (PPG), and not the same PPG.*
- *A representative from Support Staffordshire*

will meet 3 times a year to look at and be assured that the procedures under the Constitution are being met.

These meetings will take place on the same day as an East Staffordshire District Patient Engagement Group meeting and prior to that meeting. Brief notes from these meetings will be kept and a brief report will be given at the following East Staffordshire District Patient Engagement Group meeting along with any actions/decisions.

All those present on the 21st of March meeting agreed with the above and it will now be forwarded to all PPG representatives for full ratification.

7. Topic raised by KB, Rocester

KB wished to raise the following questions regarding the work done by the Social Prescribers within East Staffordshire

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

- 2) NHS Patient records may not be seen by the Social Provider (hereinafter the SP); however, the latter should provide case notes for the GP related to the "treatment" that the SP has carried out.
- 3) There need to be specific criteria for the employment of SPs working alongside the NHS relating to their qualifications, insurance, professional supervision, professional codes of ethics adhered to. Otherwise, who takes responsibility/ is accountable for the outcomes of the outsourced intervention?
- 4) 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.
- 5) We now seem to be reverting to outsourcing as an alternative to direct employment, however I can't see where the safeguards are as regards Patient welfare. I am concerned also for the professional safety of GPs who may have insufficient information as to the outcomes of the external intervention, but who carry the responsibility for having made the referral in the first place.
- 6) 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?

All present agreed these were valid comments and although the aim of the social prescribers is to assist in the signposting of patients to various community and voluntary services it would do no harm in having clarification.

It was agreed that the above points should be sent to Debbie Melling, East Staffs PCN Community Manager to discuss with the appropriate people within the PCN and Burton Albion Community Trust, whom carry out the service within East Staffordshire.

8. Talk from Richard Hibell, Primary Care Research Nurse | LCRN West Midlands Core Team | NIHR Clinical Research Network (CRN)

RH firstly thanked everyone for the invitation to come and give an outline on the work that he does. Works closely with RB, East Staffs PCN Research & Support Mgr.

RH has been working with East Staffordshire since 2017/18. For the past 9 months been working closely with RB and could confirm that all 18 surgeries within East Staffordshire are now onboard regarding research opportunities. Explained the role and confirmed that all projects are fully inline with all NHS, and other organisations, guidelines and governance protocols. Some of the current projects include:

- Looking at the efficiency of long-term medications in the eldest people within our population, (80+).
- COVID Principles and Panoramic view. 16 surgeries on board and using a hub and spoke model. The hub surgeries are Peel Croft and Mill View with each having a GP allocated to the work.
- AF Was involved in a project with Tutbury and Yoxall surgeries two years ago,
- Currently there is an 8 month wait for people attending sleep clinics. Carrying out the FOUND study for East Staffordshire in the summer at Pirelli plus all 3 surgeries at Uttoxeter and Rocester.
- EDI Study, (Early Detection Initiative for Pancreatic Cancer). This study looks at newly diagnosed diabetic patients, and obtaining over a period of time, blood samples as biomarkers, which are then stored under special conditions. These samples will be reviewed to see if there are changes in blood samples in patients who then go on to develop pancreatic cancer, making early detection of this type of cancer easier.
- The research studies that are carried out are purely for academia. If studies are requested for commercial means, then the surgeries only are involved, not the research team.

There followed general discussions on the topic and the following questions were asked:

- Are you carrying out any research on the type of protective equipment worn during the COVID pandemic? RH indicated that this research would be carried out in secondary care.

- Do you refer individual cases to other research groups, for instance Lymphoma? Again, RH indicated would again be through secondary care.

On behalf of the group the Chair, SAR, thanked RH for a very interesting talk and asked if would be available to come again later in the year? RH indicated that he would gladly come again and also offered to send information on research links to the Vice-Chair for inclusion in the minutes. He also was happy to also have his contact details distributed. The members thanked RH in the normal manner. RH then had to leave for another meeting.

After the meeting RH sent the following information for inclusion in the minutes:

- A few website links for the group, to give an overview of the Clinical Research Network and some of the initiatives that they can become part of, I wondered if you wouldn't mind sharing with the wider group.

[Be Part of Research](#)

[Clinical Research Network - West Midlands](#)

[Join Dementia Research](#)

Also, as discussed, please feel free to share my contact details with the group too, as I'm more than happy to visit Practice PPG groups to give an overview of research within East Staffs.

Contact details are as follows:

Richard Hibell

Mobile: 07880 063357

Email: [**richard.hibell@nihr.ac.uk**](mailto:richard.hibell@nihr.ac.uk)

9. Update report from RB, East Staffs PCN Research & Support Mgr.

The following report was sent out prior to the meeting.

ELSA, (Early Surveillance for Autoimmune diabetes)

– **Rykneld Primary School** ELSA is looking at early detection of Type 1diabetes in children. Held a clinic at the primary School for children

consented by their parent or guardian to have the test. Finger prick test and dry blood spot card sent off to study team for analysis. 22

Participants

– **Mill View** Soon to participate in the same study at Primary Care level. This will be a good benchmark to compare uptake and participation through GP led clinics or community led (school) clinics.

FOUND

New study looking at patients aged between 50 & 70 who may be at high risk of Obstructive Sleep Apnoea based on certain medical conditions, overweight, have hypertension, diabetes, or both.

Patients who meet the criteria will be invited to take part in the study. They will be asked to wear a pebble like device during a night's sleep, return this to the study sponsor (Warwick Medical School) based on the results they may need onward referral to a sleep clinic for further investigation.

HANDS ON ASTHMA

Study just started looking at health and social factors and their influence on Asthma symptoms at work. Two Practice taking part – Wetmore Road and Peel Croft. Only certain practices were invited to take part, these were Practices in Industrial Areas.

EMIS Recruit

EMIS Clinical System solution to invite patients to commercial studies, had two studies to invite patients to.

RESTORE

Looking at a certain medication and the effects this has on patients with severe insomnia. Did have patients who expressed an interest but following review by the study sponsor no patients were found to be eligible for the study.

MPOX

Vaccine trial for patients aged between 18 and 50 years of age. Only 2 Practices interested in this study and invitation numbers were limited due to study already nearing capacity for participants. Excellent that East Staffs were chosen to participate using EMIS Recruit platform however little uptake now. RB working on a text message and social media message to alert patients that we are now using an additional platform to invite patients to partake in research.

10. PPG Reports

The following reports had been distributed prior to the meeting:

(i). JB Tutbury PPG Update

The meeting was held on March 13th.

We had updates on the success of the January quiz night which 80 people attended, the latest Trent and Dove Coffee Connect morning, and the first Dementia Group organised by the surgery and PPG.

The Practice gave their update and as of January, a small sub-group of the PPG will meet with them in April to discuss certain topics.

A Health and Wellbeing event is planned for Thursday, June 13th. This is during Carers week. Evenings are also being planned to hold both Prostate and Menopausal talks.

(ii). JG Yoxall PPG Update

We are holding another CPR & Choking session for adults, children & babies in Yoxall Village Hall on Tuesday 26th March from 5-7 pm. Our last session was well attended & there were lots of requests for another one, so fingers crossed. The AGM will be at the surgery on April 17th from 6-8 pm. Patients will receive a text message inviting them to come along & it is being advertised in the Parish magazine so once again its fingers crossed that some 'new blood' will join us. In August we will be holding our joint Health Event again in Barton. Response from exhibitors has been very positive so we're hoping it goes as well as last year.

(iii). JB Gordon Street, the Vice-Chair, JB, had received the following update from LB, Senior Primary Care Manager, Staffordshire and Stoke on Trent Integrated Care Board.

The Integrated Care Board, (ICB), continue to work with the practice during the termination period. At present the contract is still due to termination on Friday 3rd May. The ICB are working to secure a caretaker arrangement who will take on the contract from Monday 6th May. We met with Gordon Street PPG yesterday and had a good meeting, we are working on a FAQ document with a list of questions which we hope will support patients to better understand what is going on. That FAQ will be on the ICB webpage and live so that we can update it as things progress and we will be getting it out to patients.

The District Chair and Vice-Chair has requested their contact details to their PPG was that we can make contact.

(iv). KB Mill View

The Practice was prevented from functioning for a few days recently when the owner of the building, a previous Practice Manager, locked the Staff and Patients out. The locks were changed, and the car park access closed. Following legal action, it has been established that The Practice would be entitled to 6 months' notice as per any commercial lease. The rent is paid by the NHS, not by the Drs. themselves.

Whilst the matter was being resolved, the Practice did its best to function from the premises of a neighbouring business.

As an onlooker, I wish to say that the medical and office staff coped heroically and with great fortitude through a difficult event. Their efforts deserve recognition.

Normal services are re-established, and the Practice will resume previous levels of face-to-face appointments. This will be as from the beginning of April.

There were no further updates.

11. Topic raised by RJB, Trent Meadows PPG

RB 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 fully 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.

12. Patient Stories

Patient Story from IL

IL gave an update regarding his mother's care, was subject of the patient story at the last meeting). She is doing a lot better. Social care has been stopped. No communication whatsoever from the providers to say they were slowing it down and stopping it.

Had cause to contact the Occupational Therapist for blister packs. This resulted in a series of phone calls between Carlton Street Surgery and the Pharmacy, with poor information being given by both parties. The upshot of which is that the blister packs are not provided by the NHS now. Had to contact the Geriatric Medicine regarding appointments and confusion around dates. Had meet with the UHDB Patient Experience Team to discuss his mother's treatment.

Patient Story from CD

At the last meeting CD mentioned the delay in getting his 3month checkup. After getting nowhere found you could contact the Slot Utilization Department at Derby on 01332 78864. After contacting and after various cancelled appointments he had been given the date of 29th of April. Since then, the SLD got him an earlier appointment but at Burton. Has been and the consultation was excellent.

It was mentioned by someone present that they had tried the number, and it was not recognised. On reflection the number above is a digit short. CD will send the correct number for inclusion in the minutes.

The number is 01332 788641

Information from KL

Had a recent appointment at the cardiology department at Queens. Was well looked after and consultant very good.

Information from DB

- Had cause to ring the GP earlier regarding physio requirement for his shoulder. The receptionist rang back 5mins later with an appointment with, First contact physiotherapy services, for the following week.
- At Queens Hospital department the blood test clinic has a screen outside the clinic. On arrival, patients must enter their details then

enter the clinic. There appears to be lots of problems regarding the non-working of the screen. On investigation if you arrive more than 15mins before your appointment you cannot enter your details, but it does not say that. AB of Patient Engagement, UHDB, has been informed.

13. Healthwatch, Staffordshire Update.

DB, Healthwatch, Staffs, gave the following update:

999 Ambulance - Patient Experience Survey

Following concern from both the Public and the County Overview and Scrutiny Committee, Healthwatch have recently undertaken a patient experience survey on emergency ambulance responses in Staffordshire.

Three hundred and fifty-nine responses to the survey have been received and they are currently being analysed.

Some key themes are emerging from feedback received:

The paramedics deliver excellent care when eventually they arrive.

-Some patients have described having received truly lifesaving care without which they would not be here today and for which they are eternally grateful.

- A high incidence of calls for falls both in people's own homes, in public and frequently in Nursing Homes.

- Confusion from some members of the public over responses to deaths, especially if the patient appears to have been dead for some time.

-Confusion from patients and their carers about whether it is permissible to eat, drink or take medication while awaiting an ambulance.

- Families reporting transporting relatives themselves to A&E due to response times often of several hours,

longest reported to the survey, (16.5hours)

- Hours waiting outside A&E for admission, (Lost 10k man hours outside University Hospital of N Staffs during January 24 which affects response times).

- Gained a view from a community responder in East Staffs.

An initial follow up meeting with WMAS

WMAS crew every ambulance with a qualified paramedic and their two call centres answer all 999 calls within 2 seconds.

Discussed the serious loss of man hours across the W Midlands due to handover delays (400,000 in year) and the knock-on effect on Urgent calls with Cat 2 calls at one stage averaging 43 minutes and now down to 34 in February. (National Target -average of 18 minutes). It is the Cat 3 and 4 calls which have the longest waits, and they are often frail elderly patients.

More admission avoidance schemes in place including the fire service being commissioned to respond to falls calls with low level injuries.

Healthwatch will be following up with further enquiries into admission avoidance and hospital discharge schemes over the rest of the year.

Healthwatch to visit ambulance control in the near future along with some members of the Scrutiny Committee. The Director of Nursing willing to come out to meet the district PPG.

Support Staffordshire Update.

IL gave the following update:

- Has his Performance review the following week. Has been with Support Staffordshire for a year and in that time visited many local voluntary groups. Wants to concentrate on patient representation and the voice of the patient with an emphasis on communication. He will update at the next meeting.
- Following a meeting with CQC representatives on the impact of Virtual Wards. It has become clear from those attending that patients do not fully understand what they are and sometimes even the staff don't appear to understand.

14. Update from Debbie Melling, East Staffs PCN Community Manager

DM had sent the following update to the Vice-Chair, JB.

a. Winter Hub

7 day a week service running from Stretton has been very well received. Started beginning of December and running until mid-April.

b. Spring Covid Campaign will start April

Criteria:

All elderly care homes

Patients aged 75+

Patients Immunocompromised aged 2+ eligible

Wk com 15 April – Elderly Care Homes & House bounds

Wk com 22 April – Sessions at Pirelli will commence.

Plan to run clinics over a 6-week period.

c. Community Work:

- Diabetes 8 at Pirelli – 2 sessions ran in March as a test and learn
- Spirometry some practices are starting to offer this service again, other practices have asked the PCN to run on their behalf – This will be starting in April from Peel Croft Practice as central to town / parking available etc Need to run a test and learn session once again to ensure equipment and technology functions for multiple practice patients and if all ok and everyone in agreement, these will be built up to run on a regular basis. Should know more when I next attend the District PPG meeting.

15. The East Staffs and Surrounds Diabetes UK Patient Network

The Vice-Chair, who is also the Chair of the Diabetes Patient Network, Had sent his update, copy below, prior to the meeting.

The first round of face-to-face meetings within East and Southeast Staffordshire have been held. Regarding attendance, there was a mixed response although Burton continues to be good with 16 attending the last meeting.

The Zoom virtual group meeting was held on the 7th of March. There was good attendance, and the speaker was.

Charles Odiase

Consultant Pharmacist Primary Care and Diabetes

The Centre for Advancing Practice credentialled (NHSE/HEE)

MPharm, MSc Clinical Pharm, MSc Diabetes, PgDip Advanced Practice in Urgent Primary Care with IP

DUK Professional Conference Organising Committee member (2017 to 2023), and Chair 2023/2024

DUK Primary Care Course Co-chair 2018 to 2024

Who gave an excellent presentation and Q&A session on Medications and Diabetes.

Regarding other work, the Chair attended the following events,

- Having a stall within Burton Market Place on various days throughout January and February.
- Attended, with a stand, at the MSK Community Day at the Sacred Heart in Tamworth
- Attended, with a stand, at the recent 2 Saturday "8 Care Process" days at Pirelli. This was where patients with diabetes could come around and either have all, or some, of their diabetes checks including retinopathy.
- Attended a meeting at Nestle, Hatton, Derbyshire to assist in their planned Health and Education events. being planned throughout 2024, for all their employees, (approx 1000).

Over the next few weeks/months the Chair will be involved in:

- MSK day at the Uxbridge Mosque in April
- In the planning on further Health Days within the mosque and Hill Street Clinic for May/June
- Attending events at Tutbury in June, and the Burton Marketplace in June.
- Attending a Diabetes Conference at Coventry in May.
- Sitting on the Diabetes Grants Advisory Panel looking at proposed research grants.

Finally, I have been representing the Voluntary Sector on the Integrated Care Board ELF Portfolio, (End of Life, Long Term Conditions and Frailty). To date attended both the ELF Portfolio Board and the Long-Term Conditions Programme Board.

16. Any Other Business

(i). Who manages the District Nurses and is there a Telephone Number?

Midlands Partnership University NHS Foundation Trust

*Trust Headquarters, St. George's Hospital, Corporation Street,
Stafford ST16 3SR*

Email: enquiries@mpft.nhs.uk

Telephone: 0300 790 7000

(staffed 24 hours a day, every day)

(ii). RJB had dental problem. Saw his GP who informed him to go to the hub? DB, Healthwatch informed everyone that NHS 111 has a separate line for dental care. When you call NHS 111 ask for dental services.

(iii). The Chair, Vice-Chair and DH have had recent discussions with the ICB regarding patient representation. This has resulted in the formation of a new Staffordshire and Stoke On Trent ICB Patient Participation Group Network. Brief details were given out and the Vice-Chair will forward the ICB communication, sent out earlier, to everybody.

17. Review of the Meeting.

Highly informative, good discussions.

18. Date of Next Meeting

Date of Next Face-to-Face Meeting: Thursday 2nd of May 2024, 14.00 – 16.00. The Chair, SAR, thanked everyone for their contributions to the meeting.