



PATIENT PANEL

MINUTES

09/11/2021

15:00-17:00

Microsoft Teams

PRESENT	Name	Title
	Danny Sparkes	Chair
	Charlotte Broughton	Head of Patient Experience and Involvement
	Val Baker	Patient Panel Member
	Eiry Price	Patient Panel Member
	Kalli Graves	Patient Panel member
	Philip Goldenberg	Patient Panel Member
	Mark Lotinga	Patient Panel Member
	Shirley Holmes	Patient Panel Member
	Diana Moran	Patient Panel Member
	Andrea Lewis	Chief Nurse
	Andrea Knock	Patient Panel Member
MINUTE TAKER:	Joanne Rockett	Volunteer Coordinator
IN ATTENDANCE	Laura Ellis-Philip, Director of Digital, Senior Information Risk Owner Surrey Safe Care Update	LEP
APOLOGIES	Name	Title
	Bori Szegedi	Patient Panel Member
ITEM		ACTION
1.0	Welcome and apologies Apologies – Bori Szegedi	DS
	Guest Speaker Laura Ellis-Philip Director of Digital, Senior Information Risk Owner Surrey Safe Care Update	LEP

	<p>Presentation on Surrey Safe Care Surrey Safe care going live in March, almost replaces traditional paper notes. Patient Portal – 1st time ASPH embarking on this at large scale. Cerna partnered with Zesty, allows for cancelling and rebooking of patients, you can log on and cancel yourself. We will still have telephone cancelling booking and cancelling alongside this. Health record is available on the portal, clinic letters, appointment letters, virtual appointments access included. Messaging - you can contact via secure email. There is a screen where you can add your own measurements e.g. blood pressure, temperature if you have been asked to track your health record.</p> <p>Feedback from panel great, really positive.</p> <p>LEP – asking will people sign up for this? We need 10s of 1000s of new registrations in the first year. Any barriers? DS – if instructions aren't clear they won't. DM – any probs in the software they will give up LEP – needs to be easy to use CB – since we needed vaccine passports on our phones, I think people are more aware and more able to navigate NHS records. The benefit of being able to access letters much quicker, people will be motivated. KG – think its brilliant, husband been ringing for 2 days to change procedure. We are in our 70's but ok if quite easy to use. LEP – when you introduce electronic version and take away from phone you send off cancellation and rebook notifications and if you don't get a response quickly you start to worry they haven't seen it. You would phone or write as well. We might put on a response prompt. CB – can we help with the instructions? LEP – good idea, I do have screenshots of what it looks like, but not to show today. I can potentially show you what it looks like to register. Please have a think about it and give me feedback. What's missing? DM – is it up and running anywhere else? LEP – mainly in US, we are pioneering the technology. DS – can I suggest the members ask their friends and colleagues what they think? LEP – yes and what worries might they have? PG – how is it intended to get people to sign up? LEP – haven't got that far yet. Everyone who comes in for an appointment we will ask them to sign up. PG – make haste slowly, trial group? LEP – we will be doing exactly that, pilot study.</p>	
2.0	<p>Minutes from last Meeting – 13 July 2021</p> <p>– accepted</p>	<p>DS DS</p>
3.00	<p>Matters Arising -</p>	<p>DS</p>
	<p>None</p>	
4.00	<p>Members Reports</p>	

	<p>KG -nutrition steering group, 1st meeting terms of reference etc and asked to go on food committee.</p> <p>EP -Infection control comments on infrequently used equipment should be cleaned regularly even if standing around. Another next week and health and safety meeting next week.</p> <p>CB – can I ask that if you have a report you can send to Jo so she can add a detailed report into notes.</p>	
5.00	Members Concerns	
	<p>SH - patient letters or appointments arriving close to or on the day, experienced myself late notice.</p> <p>CB – did you have a telephone call before?</p> <p>SH - yes I did.</p> <p>EP – same thing happened to me, did not get the letter or the meds before a colonoscopy.</p> <p>CB – that’s why they you call you as well – contact PALS with specifics.</p> <p>AL – we need more complaints to get the data.</p> <p>CB – the letters come from the hospital and some from Bristol, we are getting late availability, this is why they call you</p> <p>DS- In Eiry’s case where she knew there was prep. Could she come in and collect.</p> <p>CB - new department lead who is improving and changing process.</p> <p>EP – husband went in to the clinic and collected, then more arrived next day, but we took it back.</p> <p>DS – not satisfactory at the moment, its taking a while.</p> <p>PK – postal services have been wonky since pandemic. Want to raise a different issue. Issue of recent case of employee (in another trust) murdered patients and interfered with bodies in mortuary. Concern with mortuary access. Has been a report on issues at a number of hospitals and St, Peters was one of them.</p> <p>DS – surprised it’s like Fort Knox.</p> <p>CB – there was an issue about 3 weeks ago when the lift was broken and we had to manually take the bodies in.</p> <p>AL -18 -24 months ago we had an attempted break in to the mortuary, it might be that that you have heard about. Appointments – lots of work going on around this. With the recovery effort trying to address back log, it’s intense but doesn’t excuse late arrivals. Flagging it is the only way we can gather the data and feed back to the departments concerned.</p> <p>EP – I remember the attempted break in which was mentioned in the health and safety meeting. They were caught on cctv.</p> <p>EP – another appointment during the traffic lights at car park, notices were not clear, will raise at health and safety next week.</p> <p>CB – high numbers and security did staff the area when peak periods.</p>	All
6.00	Any other business	
	<p>CB – to plan how we interview patient panel applicants. We have 5 applicants. Some through ASPH membership already. 5 to interview. Need to suggest and agree questions and decide who will take part in the interviews?</p> <p>ML – we had questions when I was drafted in, was there anything wrong with those questions.</p>	All

DS – have you all looked at role description?
 CB – quite a few comments on jd.
 ML – what was the general view? Thumbs up.
 PK – could you circulate the final text of the jd and a list of the questions?
 CB – feels like a good use of our time today.
 SH – what motivates that person, can they give time commitment?
 When it is likely to be required, it is regular. Do we state the number of meetings we think we will have? Times of meetings? In the long term are we looking at virtual or a mix?
 CB – we need to agree that today. You said you valued a group meeting, so we are only half in the room and half on teams? Could we alternate meetings?
 SH – prefer face to face, how is it for other people?
 DM – prefer face to face
 DS – prefer face to face, I have a cold I'm, being sensible staying away
 EP – prefer face to face
 CB – is it the wrong time of day?
 ML – how about for 2022 we meet in person as default, for those who can't or won't attend in person to attend virtually?
 If we have new panel members to meet in person and get to know us.
 KG – I can't drive after dark, maybe I could get a lift with someone?
 DS – I can't drive at night, I've just purchased yellow glasses will let you know if they work.
 PK – I prefer in person, but couldn't do it today?
 CB – shall we change it to 1pm?
 Generally everyone agreed.
 AL – really supportive about trying to do face to face. With my IPC head on check venue is big enough.
 KG – spoken to the WI ladies are interested in joining patient panel
 DS – they need to get in touch with Charlottes department and send in a statement of intent.
 CB – Who would like to be involved in interviewing?
 DS, SH, DM, EP, PK (want to interview) we don't have a closing date as we are not getting diversity so far. Will be a paid advert in local magazines.
 ML – could test location, questions etc. for these 5 applicants.
 DM – probus or Salvation army have reliable people
 CB – we have the advert if you have community groups you can take it there,
 ML – we are the best advocates of the group
 CB – I'm veering towards doing Teams interviews
 SH - ok to do on Teams to start with
 ML – good way of getting through numbers of people
 CB - will send out proposed questions and 2 dates to set up Teams days.
 ML – let's discuss questions, do you have everything else you need from us?
 CB – Invite to interview with role description, informal Teams meeting, explore their motivation.
 ML – have we acknowledged the applications so far?
 DS - yes

SH - are we getting an age group mix?
 CB – a dad with older children, teenage boy, others are similar to group at the moment, 2 female, 3 men
 ML - is there an upper limit to numbers.
 DS - 20
 ML - we aren't going to get most (number) at all of the meetings. Thanks for turning up and your interest. Practicality question around the commitment. Tell us about yourself opener.
 DS – we also need to know that they aren't joining because they have an issue they want to bang on about every meeting
 CB – just because they have seen the ad, low threshold for saying no. We must not just say yes.
 EP – useful to know what other groups they have links with?
 SH – previous career if they are retired.
 CB – should come out in the what motivates you section?
 DS – any specific interests? A specific area of interest.
 ML – what is the nature of your interest or association with the trust now?
 CB – I will do my best to book rooms etc. and keep to dates and either Ashford or Weybridge for patient panel meetings.
 ML should we send out terms of reference with jd?
 CB – we will need 2 references.
 ML – why don't we use this as the default? It's a good meeting space with the technology.
 CB – 1pm in weybridge suit the majority?
 DS – do we have to pay to park?
 CB – no it's free and the car park is free. There is public car park nearby.
 ML – anyone have an issue with Weybridge?
 KG – I would prefer Ashford
 CB – parking at Ashford not easy. We have a mix I will try Ashford or Weybridge. I will set a couple of interviewing dates and see who is available?
 ML – back to you, do you think we are ready and you have enough to go on?
 CB I wanted it to be inclusive and I now have your interest and input. I need involvement from you it is a panel.

11 Jan next meeting

9 Dec medal and get together at St. Peter's for volunteers

DM – I like to finish on a positive – had a call and an MRI booked on same day, Ashford were delightful. St. Peter's follow up not so good, what shall I do?

CB - call PALS. Will change to concerns and compliments, finish meeting on a high!! Blended meeting went ok for first try!

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Next meeting Tuesday 11 Jan

Microsoft Teams meeting

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