

**Minutes of Personal and Public Involvement (PPI)**  
**Service User Panel Meeting held on Friday 14<sup>th</sup> June 2019 at 10.30am in the**  
**Promoting**  
**Wellbeing Training Room, St Luke's Hospital, Armagh, BT61 7NQ**

**Present:**

Sharon Doherty	Carer
Peter Murray	Service User
Carol McCullagh	Service User
Annie Burrell	Service User
Peter Donnelly	Service User (Chairperson)
Jessica Murray	Patient Client Council
Marian Thompson	Service User
Ian Stafford	Service User
Ray Hamilton	Service User
Ruth Martin	Carer

**Apologies:**

Willie McKeown	Service User
Andrew Martin	Service User
Mark Bloomer	AD Estates Capital and Development

**Did not attend:**

Hayley Smith	Service User
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**In attendance:**

Carolyn Agnew	Head of User Involvement and Community Development
Lisa Poland-O'Hare	Senior User Involvement Officer
Majella Gorman	User Involvement Officer (OPPC & Acute)
Blaine McCartney	User Involvement Officer (Mental Health & Disability, Children & Young People)
Andrew Cunningham	Estates Capital and Development

**1.0 Welcome & Introductions**

Peter welcomed everyone to meeting particularly Andrew from Estates.

**2.0 Apologies**

As listed above.

**3.0 Minutes of last meeting**

Agreed

## **4.0 Matters Arising**

### **4.1 TOR/Membership**

Carolyn advised the Panel that the terms of reference need updated alongside the membership pack.

**ACTION: Lisa to take forward with PPI Panel**

### **4.2 Service User/Carer Consultants & PPI Small grants report**

Funding now confirmed for B5 Service User/Carer Consultants; five individuals have been recruited and are currently going through recruitment checks. This process has taken longer than anticipated due to a temporary hold on transformational funding. The service user/carers consultants will work on an as and when basis.

Carolyn gave the Panel an update on the PPI small grants funded projects. Carolyn advised that Lisa is currently developing a report on the impact of the scheme which will be completed in July.

**ACTION: Lisa to share report with Panel at next meeting in September**

### **4.3 Car parking and signage**

Chairperson welcomed Andrew Cunningham from Estates to the meeting and asked for an update on car parking and signage issues across the SHSCT area.

Andrew thanked the Panel for the opportunity to provide an update and passed on Mark Bloomer's apologies.

Andrew provided an update on Craigavon Area Hospital and Daisy Hill Hospital and advised that plans continue to develop around extending the existing car parking in both acute sites as Estates recognise this is a problem.

Andrew advised that there has been an additional gravel car park created in Craigavon and that staff have been encouraged to use this car park.

Andrew gave an update in relation to Daisy Hill Hospital and informed the Panel that through the Pathfinder project facilities have improved and that access has been made safer with improved pedestrian walkways throughout the site. Andrew explained that while there are limited options to extend car parking provision this remains a priority with Estates.

Andrew informed the Panel that the Banbridge Healthcare Treatment Centre is currently having additional work carried out onsite for service users who are visually impaired. This work is being undertaken in partnership with the 10,000 voices Coordinator to use yellow and black signage in key areas which will be implemented

across the Trust alongside any corporate information. Plans to increase the number of hearing loops are also underway.

Peter Murray expressed his concerns around the limited car parking on the Daisy Hill site and asked if any other sites were currently being considered.

Andrew advised that Estates are aware of the problem and acknowledged car parking on Daisy Hill is limited. He advised that Estates continue to explore other potential sites.

Ian Stafford raised issues in relation to South Tyrone Hospital and the lack of car parking available and raised concerns that the public are using this facility as a park and ride and for general parking rather than solely for visiting the hospital.

Ian raised concerns that no preplanning has been carried out in relation to the 2 new GP surgeries that recently relocated to the site and the extra volume of service users/ traffic this has created on site.

Ian also raised concerns that there now additional clinics are being offered onsite alongside elective care centres which provide routine day surgery for cataracts and treatment of varicose veins and highlighted that no new car parking spaces were created with these new services.

Andrew advised that to his knowledge there were no prior conversations regarding car parking between the Department of Health and Estates before the new elective centres opened. Andrew thanked Ian for his contribution and advised that this will be monitored.

Andrew advised the Panel that Estates are broadly looking at car parking on all Trust facilities as poor public transport links in Northern Ireland have created additional pressures on car parking provision.

Sharon raised the issue of public transport costs and how this extra cost could put a strain on vulnerable groups in regard to current proposals on moving breast services and stroke services to regional centers. Sharon queried who sets the price policy and asked why it differs across NI HSC sites.

Andrew advised that Support Services set the price policy for the car parks in Southern Trust however he was unable to answer the query as to why it differs across NI HSC sites as he is only aware of policy in regard to Southern Trust sites.

Peter Donnelly advised that some groups can gain free car parking although this isn't widely advertised.

Marian highlighted that when entering the acute sites there is signage displayed advertising mile per hour and available car park spaces, she suggested that it would be helpful if signage also displayed emergency department waiting times and advertised other services such as minor injuries to reduce non urgent cases of care presenting to the emergency department and encourage them to attend other services.

Carolyn advised that she had previously forwarded this feedback to Estates on behalf of the Panel but had not received a response to date.

**ACTION: Andrew to follow up and feedback.**

Carol stated that she is a regular bus and taxi user and advised that since the bus stop on the Craigavon Area hospital site had been relocated to accommodate the new Blossom unit this can be quite difficult for people with poor mobility/poor vision. Carol suggested that the Trust should consider outdoor seating along the pedestrian route in case someone needed to sit down.

Peter Donnelly seconded Carol's suggestion and advised that alongside the lack of outdoor seating there is also a chronic shortage of portering staff on all HSC sites which is important for those with disabilities. Peter stated that he regularly needs the assistance of portering staff when navigating hospital sites.

The Chairperson thanked Andrew for attending the meeting and providing a useful and comprehensive up-date.

It was agreed that the Panel would extend an invitation to the HOS Support Services to attend next panel meeting.

**ACTION: Lisa to invite Kate Corley to attend next meeting and provide update.**

#### **4.4 Trust PPI Annual Report 18/19**

Carolyn advised that this is currently being developed and draft will be shared with Panel for comment prior to submission to SMT, PCEC and Trust Board in September 2019. Chairperson and Panel thanked Carolyn and PPI officers for bringing this together and stated this highlights the brilliant work the Trust is doing around PPI and how PPI has been enhanced across the Trust over the years

#### **5.0 PPI Panel Action Plan 19/20**

##### **5.1 PPI Panel Annual Report 18/19**

Peter advised that he is currently undertaking the OCN Level 3 in Quality Improvement for service users and carers and that he will be developing the PPI Annual Report 18/19 as his project.

Andrew kindly agreed to write a piece about being a member of the Panel, provide a bit of background and outline what he gets out of it for inclusion in the Panel Annual Report.

**ACTION: Peter and Lisa to work with Panel to compile.**

## **5.2 PPI Panel Induction/Refresher training**

Lisa is currently co-producing training called SCOPE through the QI course. This will be piloted with the Panel before Trust wide roll out.

**ACTION: Lisa to share with Panel for comment and suggestions.**

## **5.3 PPI Toolkit/resources**

Printed copies have now been delivered. Blaine and Majella have started to distribute around the different teams within the directorates, Carolyn also advised this can be accessed through the Trust website and on SharePoint for staff.

Carolyn thanked the Panel for their input and suggested a photo at the end of the meeting to formally launch the resource.

## **5.4 Consultation Scheme**

This is a legal requirement for all Trusts and outlines the processes they have in place for public consultation. The PHA has developed a regional template and the Trust has up-dated its current consultation scheme in light of this. The revised version was then circulated for comment and the feedback forwarded to PHA for clarification. The PHA is now making further amendments to the template and the final version will be circulated shortly. The Trust will then up-date its consultation scheme in light of this and circulate for further comment.

There was a general discussion among Panel regarding the confusion caused by terminology as co-production is good PPI and it shouldn't be seen as two different concepts. Concerns raised around why we need new standards for Co-Production when we already have PPI standards. It was agreed that this should be raised at the next Regional PPI Forum meeting

Comments were also made around the lack of consideration around PPI events and meeting in terms of locations, accessibility and distance from car park/entrance and also the limited car parking at some venues.

**ACTION: Peter D and Sharon to raise both issues at the next Regional PPI Forum meeting**

## **5.5 Review of Trust Website**

Email circulated from communications explaining how to view and gain access to page, Sharon and Ray highlighted they were still having difficulties.

**ACTION: Sharon and Ray to follow up with Jessie**

## **5.6 Excellence awards**

Excellence awards taking place on 19/06/19. Annie and Ian were involved on the shortlisting and assessment panels.

Annie commented that although it was a lot more work than she had anticipated, she had enjoyed the experience. She thought that all the nominations were deserving cases and found it difficult to decide which ones should be shortlisted for awards as they were all so different.

Ian agreed that a lot of work is involved in the process and suggested that the system is reviewed before the next round.

Chairperson also agreed that the process is a lot of work and advised that this may be due to the growing popularity and number of applications received.

**ACTION: Annie and Ian to feedback to Jayne Carr.**

## **5.7 PPI Desktop Calendar**

Discussions around branding PPI across the Trust with good practice messages in a calendar

**ACTION: Panel to bring back to the next meeting**

## **6.0 PPI Action Plans 19/20- feedback from relevant fora**

6.1, 6.2, 6.3, 6.4, 6.5, 6.6, 6.7, 6.8, 6.9, 6.10, 6.11, 6.12 & 6.13 reports submitted and circulated in advance of the meeting

## **7.0 Regional PPI Forum Update**

7.1 Minutes and presentation from the last meeting 25<sup>th</sup> February 2019 circulated in advance of the meeting. Next meeting is scheduled for 27<sup>th</sup> June 2019.

**ACTION: Sharon, Peter D, Carolyn and Lisa to attend**

## **7.2 PPI Monitoring Return**

Monitoring return submitted to PHA October 2018 and acknowledged. No further correspondence received.

## **8.0 Patient Client Council up-date**

8.1 Unfortunately Jessie had to leave the meeting early so no update could be given

## **9.0 Any Other Business**

9.1 There was discussion around the pressures currently being faced in primary care among GP surgery's in the SHSCT area and how this is impacting service users in accessing appointments and repeat prescriptions.

Carolyn advised that while the Southern Trust took over the contract for general medical services at Bannview Medical Practice in Portadown in 2017 until a permanent solution is found, the Health and Social Care Board manages the other GP contracts. Further information is available at:

<http://www.hscboard.hscni.net/our-work/integrated-care/gps/gp-contract/>

9.2 Chairperson and the Panel acknowledged that this was Carolyn's last PPI Panel meeting. They thanked her for her massive contribution in developing good PPI practices in the southern trust area and regionally and wished her well in her retirement.

Carolyn thanked the Panel for their kind words and for making her last meeting so memorable and enjoyable. She said that although the Panel will be in existence for 9 years this autumn, the time has flown and she was proud of what members have all achieved individually as well as collectively. Carolyn stated that as far as she was aware, this is still the only service user led PPI Panel in Northern Ireland and it is very much respected and valued within the Trust and regionally. Carolyn thanked the Panel for their hard work and commitment over the years and said she had no doubt that the Panel would continue onwards and upwards and now that Lisa, Majella and Blaine are in post she was content that PPI is in very good hands.

## **10.0 Date of Next meeting**

The next meeting is arranged for 4<sup>th</sup> October 2019 in the **Promoting Wellbeing Training Room, St Luke's Hospital, Loughgall Road, Armagh BT61 7NQ.**

### **Abbreviations:**

<b>PPI</b>	Personal and Public Involvement
<b>PCC</b>	Patient Client Council
<b>TOR</b>	Terms of Reference
<b>PHA</b>	Public Health Agency
<b>PCEC</b>	Patient Client Experience Committee (sub- committee of Trust Board)
<b>PCE</b>	Patient Client Experience
<b>SHSCT</b>	Southern Health and Social Care Trust
<b>PWB</b>	Promoting Wellbeing (Team to which Carolyn and Neil belong)
<b>UCSIG</b>	User and Carer Service Improvement Group (mental health)
<b>SMT</b>	Senior Management Team
<b>OPPC</b>	Older People and Primary Care



<b>CYP</b>	Children and Young People
<b>MHD</b>	Mental Health and Disability
<b>LEP</b>	Local Engagement Partnership
<b>LNG</b>	Local Network Group
<b>DoH</b>	Department of Health (formerly DHSSPS)
<b>ED</b>	Emergency Department
<b>NIAS</b>	NI Ambulance Service
<b>HSC</b>	Health and Social Care
<b>AD</b>	Assistant Director
<b>CAH</b>	Craigavon Area Hospital