

Clarendon Lodge PPG
Minutes of meeting Wednesday 9th November 2022
held at Clarendon Lodge

Please remember to take a lateral flow test on the day of the meeting

Present : Martin Blows (Chair), Stephen Gallagher (Practice Manager), Nicholas Renton, John Pickering, Sandra Grafton, Heather Storr, Gethin Williams, Robin Verso, Marcia Davis, Michael Pearson, Dorrette McAuslan, Bridget Winn

Apologies : There were no apologies

Minutes of last meeting and matters arising:

The minutes were approved as an accurate record of the of the meeting held 5th October 2022. There were no matters arising

SWFT Governors input and questions

Jane Knight, a governor of Warwick Hospital and patient of this CLMP, attended the meeting to explain the role of SWFT governor and to exchange ideas with the PPG on the patient voice. She has been a governor of SWFT, headed up by Glenn Birley, for 3 years. She expressed her frustration at not feeling able to fulfil the role of being accountable to the Members of the Foundation. She felt that their role was no more than a tick box exercise.

All activity, more or less, ceased because of the pandemic and has not really been re established since .There have been some meetings using TEAMS, however. She thinks that Members (who can be anyone who has been a patient at the Hospital) do not know who the Governors are, what their role is and how to find them. Governors do not and cannot access patient views following their hospital experience.

PPG members pointed out that patients can express their concerns through the hospital, PALS or Healthwatch. It was suggested that the governors look at systemic problems rather than replicate what is already being done. There was some discussion about the interface between the primary and acute sectors, and the management of discharge information between hospital, GP and patient. Stephen said that delays in discharge information and medication were the most common complaints from patients and GPs. Martin explained the role of the PPG, the main strands being the patient voice and support for the Practice.

Following Jane's visit there was a discussion about tokenism in the NHS and remaining positive about the PPG, PCNs etc

Surgery news and update

Stephen reported that Dr. Farah will be leaving in March and will be replaced by 2 new partners: Dr. Lucy Blunt who will be starting in January, and Dr Birch who is already working at CLMP as a salaried GP. They will be joined by Dr. Ralph Collett, a salaried GP. This brings the total number of GPs to 10, 6 of whom are partners. The Practice is trying to recruit a receptionist. This is proving difficult as some invited for interview did not attend. There are 38 hours of reception time left uncovered. This

results in difficulties for the reception team some of whom are new in post and still need a degree of support and training.

The Practice has nursing students and 3 Nursing Associates. Practice Nursing is not a popular option at the moment.

Digitization of patient records will be done by Iron Mountain starting with a trial sample being started in January 2023. The scanned records will be available to doctors as a pdf.

The BMA has advised doctors of the risks, particularly to vulnerable groups, of giving full access to patient records from November 1st date and so things are on hold regarding when and how things will be taken forward. Members of CLMP recently had discussions about this following the warnings from the BMA. (Doctors were not consulted by the NHS about open access to records)

CLMP decided that the best strategy at present would be for all patients to be subject to a 104 code which means that access will be blocked until the doctor has checked that it is in the best interests of a particular patient if a patient makes a request to see their record. This gives further opportunities for discussion until the end of November.

Stephen asked the PPG if CLMP should be actively promoting patient access and would like the PPG's views on this. The PPG wanted to know how patients would know about access to their records and the best means of advising them. Stephen pointed out that requests to the Practice for medical records would be time consuming for doctors as well as financially expensive as no extra money is available for printing etc. PPG members were asked to consider the issues carefully before the next meeting when it will be discussed with a view to being able to give Stephen a clear idea of the PPGs views.

Working group reports

- Carers' : nothing further to report
- PCN: Gethin and Robin have looked at a Government paper on care and GP services. Robin invites comments on his paper on what PPGs can offer PCNs. Michael's work is ongoing
- Website: nothing further to report. Dr Hussain is still busy with C QC work. The feedback from PPG members tasked at looking at different parts of the website was generally positive. There were minor criticisms about some links not working, need for updating particularly about Covid, grammar, inconsistent font style, some graphics , column layout and repetition. Children's health and mental health will be put alongside Men's and Women's Health. It was felt that there is a lot of really useful and helpful information.

Content for Newsletter

John will do an article about getting younger members involved in the PPG

Date of next meeting 4.30 Wednesday 7th December at CLMP unless advised otherwise. Please remember to take a lateral flow test on the day of the meeting

AOB

ICP want people's views via a survey that can be found on their website.

Reference to this will be made in the Newsletter

The CQC Annual Report is worth reading