

**Clarendon Lodge PPG**  
**Minutes of meeting Tuesday 15<sup>th</sup> August**  
**held at CLMP**

The Chair welcomed everyone and introduced Sue Wensley who was attending as a potential new PPG member, and Julie Bradley who had suggested the Aging Health project

**Present:** Stephen Gallagher, Martin Blows, Robin Verso, Michael Pearson, Heather Storr, Gethin Williams, Sue Wensley (guest), Julie Bradely (Guest).

Dr Lawton Joined the meeting at 5:30.

**Apologies:** John Pickering, Sandra Grafton, Marcia Davis, Bridget Winn

Martin reported that Sandra had very recently lost her son Ben. The PPG expressed their deepest sympathies to Sandra and her family.

Dorrette McAuslan has resigned

**Minutes of last meeting and matters arising:** the minutes of the last meeting on Tuesday 6<sup>th</sup> June were approved as an accurate record. There were no matters arising.

**Surgery news and update**

Stephen mentioned the National Annual GP questionnaire results which were very positive for the Practice who were mentioned in the Coventry Evening Telegraph as the best performing Leamington Practice.

There are a number of staffing changes:

- Dr Blayney has joined the practice and Dr Lucas will be joining later in the year.
- Dr Birch will be on maternity leave from 4<sup>th</sup> September, her role with the Nursing homes and frailty will be performed by other staff. She will return to the Practice as a Partner.
- The Practice is appointing two apprentices, one in reception and one on the administration team. The apprenticeships will last for 18 months and involve reaching NVQ Level 3 in Business and Management.

The PCN are extending the role of the Action Hub which is funded from the Additional Roles Reimbursement Scheme (ARRS) for PCNs. This will now have four workstreams and eventually have six staff dealing with:

- Hospital Discharges
- A&E reports
- Ambulance reports
- 2 week waits for referrals.

The Citizen Access to full medical records which is now mandatory for all Practices by 30<sup>th</sup> October will be introduced by the Practice on October 4<sup>th</sup>.

The Practice now has to have a Carbon footprint Reduction plan. This will be a challenge for the Practice as their premises were built in 1865 and there are limited opportunities to reduce the carbon footprint. Stephen asked the PPG for any ideas for achieving this.

**Meeting agreed to add this to a future Agenda item.**

Stephen then talked about the Rapid Health Triage System that the practice are considering trialling over the next year. The system would help to remove traffic from the phone as patients could use an online set of questions and responses that would triage their problem and then decide who best it could be dealt with. Stephen is hoping to arrange for a demo For the PPG on either August 22<sup>nd</sup> or 24<sup>th</sup> of August. (This has now been arranged for the 24<sup>th</sup>).

### **South Warwickshire Patient Engagement**

Robin reported back on the meeting for PPG Chairs which he had gone to as Martin was on holiday at the time. There were 3 interesting points:

- Not all of the PPG for South Warwickshire were represented and Robin was the only one from our PCN. Robin asked SWPE to provide contact details for other Leamington PPGs. SWPE only had contact details for 4 others which he passed to Martin who will decide whether to contact them.
- The meeting presented a PPG self-evaluation maturity matrix and chairs were asked to say where they thought they were on it. Most were at Level 2. Robin felt that we were probably working at Level 5. The matrix was shared with the group who agreed. Only 3 other PPGs assessed themselves at this level
- Interesting project from Abbey (Kenilworth) PPG on training volunteers to contact over 80s who had not been in touch with the practice for 12 months or more. A number of positive outcomes for patients were reported by Abbey. **Action-** Robin to seek more details for circulation.

### **West Midlands Shared Care Record**

Martin briefly reported back on an online meeting that he had attended about the West Midlands Shared Care Record. This is a project that is seeking to provide researchers with secure access to patient data for research purposes across the West Midlands. They are developing a website through which researchers can apply to access for specific projects. The online meeting were shown a working version of the website and asked for feedback on the work so far. It was felt by many that patients were unlikely to be accessing the website themselves as it was really geared up for research purposes. Participants were invited to get involved in the project if they were interested.

### **New Constitution**

A copy of the proposed new constitution had been sent to all PPG members. Robin thought that although he understood the focus of section 4.2 he felt that the wording could be clearer about what this meant in practice. **Action -Robin agreed to have a go at rewording it with this in mind.** There were no other comments. It will be re-presented for adoption at the next meeting.

### **Dr Lawton**

Dr Lawton talked to the group about this year's PCN Access Plan. The PCN had achieved most of the 29 targets from the previous year. However there is a new focus for the current year and the 29 targets have been reduced to 5 with a focus on Patient Access. This year the focus has been on collecting and collating data to provide a baseline for the practices in the PCN and it was clear that Clarendon Lodge already exceeds the requirements on most of the criteria.

However Dr Lawton was keen for the PPG to be able to suggest any other ways in which the practice could improve access for patients. **The group agreed to make this a focus for their next meeting.**

Dr Lawton said that he is thinking of creating a citizens' panel for the PCN as a means of engaging patients in the work of the PCN. The PPG had concerns about this and decided to discuss it at the next meeting.

### **PPG Action Plan**

- **Support for over 75s** – There was a discussion about the focus of this project as it was felt that involving patients in care homes, who were already receiving care from medical practitioners was probably not appropriate. It was agreed to have a rethink about how this could move forward. Heather was going to contact Dr Hussain who was keen to get involved in this work to see how it could move forward.
- **Getting the views of younger patients** – Heather reported that they were ready to go on this work. Stephen had reported back that DB checks were not needed. The group, on advice from Stephen, had decided only to talk to parents who were members of the Clarendon Lodge Practice
- **Newsletter** - Martin reported that we now had over 600 subscribers to the Newsletter and he was working on some slides to go on the Waiting room screen to encourage more sign ups. Stephen was asked about the draft letter that could be sent to patients encouraging them to sign up, but he reported that although he had seen the letter he was waiting to receive an electronic copy. **Martin agreed to follow this up.**
- **Pharmacies** - Michael and Robin reported back on the pharmacy work which was starting to make progress.

### **Appointment of New PPG Members**

Martin highlighted that with the resignation of Dorrette and the decision by Sylvia to leave the PPG there were at least two vacancies that needed to be filled. Sue Wensley had expressed an interest in joining and Martin had invited her to the meeting so she could get a feel for our work. Martin also thought that we should create some kind of application form and presented a form that he felt might work. This was generally agreed by everyone.

### **Content suggestions for the next Newsletter**

- Surgery News
- Friend and Family report
- Parking at Warwick Hospital
- Report on the Annual GP survey results
- Website update

### **Dates of the next meetings**

Martin proposed that we should set dates for the next three meetings to help people plan their diaries.

- October 24<sup>th</sup>
- December 5<sup>th</sup>
- January 23<sup>rd</sup> (AGM)

### **Any Other Business**

There was no other business and the meeting closed at 6:40pm