

Clarendon lodge PPG
Minutes of meeting 23rd February 2022
(Via zoom)

Present: Martin Blows; Dorrette Mc Auslan, Gethin Williams, Stephen Gallagher(Practice Manager), Marcia Davis, Sylvia Juba, Robin Verso, Nicholas Renton, John Pickering, Heather Storr, Bridget Winn

Martin welcomed everyone and explained that as he has tested positive for Covid the meeting has had to be via zoom rather than in person at the surgery. A special thanks to Stephen who attended the meeting on the last evening of his leave

Apologies : Sandra Grafton, Maureen Hirsch

Minutes of last meeting and matters arising: the minutes were approved as an accurate record. There were no matters arising

Practice Manager Surgery News

Staff changes

- Vicky Petefield and Dr. Rothwell have left
- Dr Hussain will no longer be a partner at the Practice but will be expanding his IT role within the Practice. He will be available for locum work
- a full time nurse Jo Floyd will be employed to work with older patients
- there will be a new Advanced Nurse Practitioner (ANP) Vicky Hills
- A new clinical pharmacist Kieran Laeder will be starting in April

The reception team is under pressure as two members of the team are off long term sick and three of them have been off work due to covid. The Practice will be recruiting 2 new receptionists

The Practice has won a Nat West Community Achievement Award for its work with the Covid vaccination programme. Photos of the presentation were requested by the PPG for inclusion in the next Newsletter, together with a short explanatory piece to be written by someone from CLMP to accompany it.

Friends and family: Martin pointed out that the latest feedback has been the first time that there have been no negative comments about Reception staff. There were many positive remarks and Martin asked Stephen to congratulate them from us.

John and Nicholas had received certificates/ badges in recognition for their volunteer work on the covid vaccination programme

Possible changes to the Doctor led system

Martin said that he had received messages from at least 5 patients saying that they had been unable to make online appointments. Stephen explained that this facility had been suspended for the time being while the Practice looked at a central triage model. There is no opportunity for triage when making online appointments and the online form cannot be changed to accommodate this. The new system hopes to make this available, so that every patient is put on the triage list.

There was some discussion around the need to communicate to patients any changes to the system. The means of making appointments needs to be clear and available to patients through the website which was not the case at the moment. PPG members agreed that the changes proposed which included a change in how patients were triaged, were in the best interests of patients and supported the proposed move. However, as the Practice had been encouraging patients to make online appointments it was disappointing that they were now unable to do so and were unaware of why.

Stephen is to arrange for a presentation to be made to the PPG about the new system. Martin felt that, in the meantime, something needs to be put on the website to inform patients that online appointments are currently not available. This proposed change again raised the issue of how best to communicate with patients en masse bearing in mind Data Protection issues

Future role of the PPG

Gethin spoke to the paper he had written and which had been distributed to members. He would like to address the challenges facing PPGs in a changing context. To address one of the central issues the PPG was arranged into break out groups to discuss where on the continuum of PPG as patients' friend or friend of the Practice members felt the PPG stood:

- Group 1 felt that where possible we needed a coincidence of both the patient and practice interest where possible, but at the moment they felt that support for the patient interest was only average at best.
- Group 2 Felt that a distinction between the PPG supporting the practice on one hand the patients on the other, was not realistic on both sides. There needed to be high class communication about what and why changes were proposed and implemented.
- Group 3 felt that the PPG moved up and down on the spectrum between supporting the patient and one end and the practice at the other. The PPG need to be able to collect views of the patients and the practice.

Stephen listened to the feedback and commented that the PPG supported patients by challenging the online appointment issue but acted in the best interests of both patients and CLMP by supporting the proposed new system.

Website Review

Martin reminded members of the work that had already been done on the website review and how it would be put into action. The questionnaire would centre around 3 questions to be answered by each reviewer via the website. It would be emailed to the 21 volunteer participants and the results would be entered by individual reviewers into a specially prepared SurveyMonkey form. Participants would be told that it would take approximately an hour to complete.

It was pointed out that the Practice had a tremendous resource in Martin and one that was free of charge. It was suggested that Dr. Hussain should be invited to look at the survey in view of his new role at CLMP together with the suggestion that he be one of the participants in order to enrich his user experience.

Martin will send out further details about the survey to PPG members. A completion date has yet to be agreed although it was agreed that reviewers would be asked to complete their survey within two weeks.

Stephen was asked what the surgery has in place to keep the website updated. (Updating is a common problem across websites). Stephen suggested a partnership model where the website was reviewed at regular intervals involving PPG and CLMP. The meeting felt that this could be a useful approach.

ICR update

Robin had contacted Coventry and Warks CCG regarding the timetable for ICR implementation and how patients will know about it. They have offered for a speaker to give a zoom based presentation to the PPG about it. PPG members thought this an excellent idea. Robin to arrange.

Sharing across PPGs

There is the possibility of sharing practice with a Kenilworth PPG and members were asked for their views. It was agreed to include this as an item on a future agenda although some reservations were raised

- the role of PCNs in getting together for this purpose
- the need for confidentiality
- the need for a structured, targeted and time -limited sharing of practice.

PPG noticeboard

Martin asked for a volunteer to take over the PPG notice board and Nicholas offered his services

Content for the March Newsletter

- Details about the change to online appointments
- Surgery news, new staff etc
- Details about a prostate awareness meeting organised by a prostate charity which also does free PSA tests.
- Robin offered to write an article on Health Watch

AOB

Martin will be unable to attend the next PCN meeting but Gethin will attend in his stead.

Date and venue of next meeting

Wednesday 23rd March at 5 pm at CLMP