

## CLARENDON LODGE PATIENTS PARTICIPATION GROUP

### MINUTES OF MEETING 28/07/15

**Present:** Michael Pearson (Chair), Martin Merson, Martin Blow, Maureen Hirsch, John Pickering, Marcia Davis, Sam Grover, Daphne Edwards, Bridget Winn, and Stephen Gallagher (Practice Manager)

**Apologies:** Ann James

Daphne was welcomed as a new member

#### **Notes of last meeting:**

These were approved as a correct record of the last meeting.

#### **Matters arising**

Stephen put out the fliers provided by Michael about the Town walks.

#### **News**

- The government will require the NHS to make huge further savings in a way hitherto unprecedented.
- The government are also encouraging federations and joint working with other agencies including social care.
- As the Local Plan was rejected by the government the proposed Lillington practice may not now go ahead
- West Midlands Ambulance Service have lost the contract to run the 111 service. As there is no one else an interim provider Care UK has been asked to do this.
- there has been a computer system change planned and imminent at Clarendon Lodge
- it has been decided to put Friends and Family into abeyance. The number of responses has dropped to about 60. It is thought that people are getting tired of giving the same feedback
- the residential project and reminiscence project are going well. The latter project has been the initiative of the History group but the opportunity was provided by the PPG following their visit to the Homes. Michael is on both groups and discussed the project with Stephen prior to instigating it. It will be managed by Michael and run by the History group. Members of the PPG are invited to volunteer to take part in the project which will require about one hour per month. John will give Michael details of a group that might be interested in getting involved.
- Michael attended a meeting about the project. He wrote a report about it and sent it to the CCG. They requested that he gave a talk about it
- The Newsletter continues. There were about 30 new subscribers June/July. This makes a total of 279. There are 13,000 patients in the practice and it

would be good to be able to reach more but the PPG has to act within the constraints of patient confidentiality

- it was agreed that there will be a link to the Minutes of PPG meetings in the Newsletter
- Michael does not feel able to continue in his current role in the CCG patient group. He wanted to know if any member of the PPG would feel able to take over his role. Maureen explained that everyone is expected to belong to a sub group and that Chairs of PPGs tend to be given large amounts of work to do. Maureen will continue to attend the meetings (in a different role) and would share the work with someone else if they would be prepared to attend. Daphne offered to attend the next meeting to observe before deciding whether or not she would be able to take on a part of the role. Michael has already established that the CCG would accept a member of the PPG who was not the Chairman

### **The future format of meetings**

Michael wanted the group to consider whether or not they wanted the meetings to continue the same formal way with an agenda and Chair. He also wanted to know how the group wished to operate in the future.

The group decided that we should meet in person and continue to operate with a formal agenda, with a Chairman and minutes being taken. It was unanimously decided that Michael should continue as Chair, which he is prepared to do.

There was some discussion about political issues and how far they should be the remit of the group. All felt that the prime aim was to discuss practice issues with staff and to support the practice. Inevitably government policies will be discussed as they impinge directly on what the practice does or can do.

It was agreed that, in future, the agenda will be limited to fewer items but that there will be a maximum of two issues to discuss in depth. Information about them will be provided in advance of the meeting so that members can make informed contributions to the discussions. Issues for discussion can come from doctors in the practice or from PPG members.

### **Practice overspend on prescriptions**

This will be the first topic for discussion. CLMP has a 15% overspend on prescriptions and needs to reduce this. It was felt that one way of helping patients to understand the proposed changes in their prescriptions would be through patient education and that the PPG could have a role in this.

Information about the overspend and some of the reasons for it will be provided in a paper that Stephen will write for the PPG so that they can read it before the next meeting when it will be discussed. Stephen said that it could not be guaranteed that doctors would not change prescriptions before the PPG's next meeting where suggestions about reducing the overspend would be discussed.

Meeting closed at 7.50pm

Next meeting:- Tuesday 29 September. Michael to meet with Stephen prior to this meeting.

Newsletter to be produced - Martin/Michael

Daphne to be assisted with information about the CCG Patients meeting - Maureen/Michael

