

Clarendon Lodge PPG Minutes

Date & Time:	Tuesday 29 th July 2025, 17.00-18.30 hours
Place:	Clarendon Lodge Medical Practice
Present:	Martin Blows (Chair), Robin Verso (Vice Chair), Sarah O'Malley, Carolyn Pickering, Jean Murphy, Heather Storr, Peter Beard, Caroline Green, Bridget Winn Also in attendance: Dr Tom Harper (GP CLMP), Emma Matthews (CLMP Practice Manager), Stephanie Parker (CLMP Operations Manager)
2. Apologies:	Pauline Pears, Amy Miller

3. Minutes and Matters Arising from the last meeting

Discussion & Actions:	Matters arising <ul style="list-style-type: none"> Stephen had suggested a change of day for PPG meetings, in order for a GP to be in attendance. Emma advised that we should stick to Tuesdays for the moment as there were a number of GPs at the practice on Tuesdays. Stephen had passed on the GP's thanks for organising the recent patient survey. PPG Facebook Page - Emma to follow up with Partners. Martin had redesigned the newsletter. PPG Members liked the new format and no negative comments had been received. Martin will continue with this new format. Four further people had unsubscribed to the newsletter. <p>The minutes of the meeting held on 10th June 2025 were accepted as accurate.</p>
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4. Correspondence/Feedback

Discussion:	A lady had written in to advise that she had used Rapid Health for the first time and found that there were too many questions. She was looking for something more simplified. Martin had responded. Martin felt that this was going to be an ongoing issue especially with the proposed changes with the majority of the patients contacting the surgery this way for all appointments.
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5. Review of Actions

Discussion:	<ul style="list-style-type: none"> <u>Carers Project</u> still on hold. Due to staffing issues a staff member had not been appointed to take the lead for Carers. <u>Financing a GP Practice</u>. Robin is in the process of rewriting this. <u>Warwick Hospital repeat medication leaflet</u>. This has now been referred to the Chief Nursing Officer. Carolyn will continue to follow up.
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6. Surgery News and Update

Discussion & Actions:	<p><u>Staffing Changes</u></p> <ul style="list-style-type: none"> Emma advised that they had successfully recruited a reception manager, who was due to start in September but the candidate was given a counter offer from her current practice when she resigned and has decided to remain there. The practice is still looking to recruit for this position. The practice currently has 7 care navigators, with one of the team currently on long term sick leave. Steph, Emma and two members of staff from Admin/Meds Management Team are helping to cover reception. It is very difficult to recruit care navigators at the present time probably due to a number of reasons including hours, long/late shifts. The Care Navigators are going to require help and support when the new Rapid Health system takes effect. Alison Admin/Meds Management has agreed to assist with this. <p><u>Website</u></p> <ul style="list-style-type: none"> Steph shared the new Website. It looks very similar to the NHS Site. The practice are required to include certain items e.g. urgent appointments. Accessibility allows patients to change the look of the site i.e. make the text larger. In the additional information the practice can customise this section. Steph is hoping that the site will be up and running in conjunction with the relaunch of Rapid Health. However, it might still take a couple of months to ensure that all the forms have been attached correctly.
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	<p>PPG to browse and test the site, to establish any errors or problems with the running of the sections, Steph to notify us when this is ready. Meanwhile, she has sent some information to Martin to test.</p> <p>Martin thanked Steph for all her hard work.</p> <p><u>No other surgery news.</u></p>
7. Feedback from SW Patient Engagement Group	
<p>Discussion & Actions:</p> <p>Actions in Bold</p>	<p>Robin & Carolyn attended the last meeting. Carolyn found the meeting very interesting. <u>Briefing from ICB.</u> They need to make massive savings and are forming a cluster group with Hereford and Worcester. This means that there will be one team shared across both ICBs. <u>Briefing from Chief Executive from SW GP Federation.</u> They had now completed their 10 year plan, which is available to read online. She highlighted that the government were wanting to set up Integrated Neighbourhood Teams but that there was no blueprint for this. <u>Briefing from Healthwatch.</u></p> <ul style="list-style-type: none"> • Healthwatch will be abolished, by 26th October but it will probably take longer than this. The current responsibilities will be shared with ICB and Local Authority for Social Care. • They stressed that they are still open for service. • Meanwhile they had completed a survey regarding Rapid Health and other Triage providers and had established a number of problems, including groups of people that won't use or don't want to use this type of service. Reducing the number of options to make an appointment with the surgery. Significant number of people felt this would create a barrier to enable patients to book an appointment. <p><u>PPG Round Up</u> As there was no time for PPG members to advise what their group was doing. Each member would submit their report and this will be included in the minutes. Robin to update us when he has received these.</p>
8. Feedback from PPG/PCN Group	
<p>Discussion & Actions:</p> <p>Actions in bold</p>	<p>A letter from Dr Lawton has been sent to all PPGs with the minutes from the initial meeting. A request had been made for members of PPGs to put themselves forward to represent the PPGs on the new Integrated Neighbourhood Team (INT). Now waiting for the INT to take shape. Richard Brooks from Sherbourne Practice had offered to do this. Nobody from CLMP PPG had put themselves forward. Emma thinks that this will now move forward quickly based on the above 10 year plan.</p>
9. Patient Survey Update	
<p>Discussion & Actions:</p>	<p>Nothing to add, other than the Doctors/Practice were pleased with the survey and thanked us. Martin thanked everyone for their input, particularly with creating the questions. Martin had not received any responses to publishing the findings in the last newsletter.</p>
10. Rapid Health	
<p>Discussion & Actions:</p> <p>Actions in Bold</p>	<p>A detailed discussion took place. Some of the key points raised. Emma thanked the PPG for raising all the questions regarding Rapid Health, she said that they were very helpful.</p> <ul style="list-style-type: none"> • The relaunch for Rapid Health will begin at the beginning of September. This will include all appointment requests whether new or repeat/follow up. • The Managing (Duty) doctor will receive all appointment requests into an inbox. These will be already triaged and colour coded. The managing doctor will look at the patients notes together with the request and assign to the best clinician for them to call back. Urgent cases will still be seen on the same day. Non urgent requests: patients will be sent text messages to arrange a suitable appointment time, some of these will be seen on the same day dependant on number of requests. • Surgery is also going to now allow for some free text on the forms, for example patient's will be able to ask to see a specific Clinician. • Some people will not need to use this new system i.e. Care Home Staff, people with learning difficulties. Patients who have difficulty completing forms are highlighted on patients notes. • Rapid Health is going to be advertised on TV screens in the practice and website. Text and email messages will be sent to all patients that the surgery have details for, which will cover the majority of patients. The messages will have a link to a "Landing Page". The text

	<p>message and landing page will be sent to PPG for comment and review. Text message should be available within a week. The landing page will explain how to book an appointment etc.</p> <ul style="list-style-type: none"> • The Phone message will need to be amended advising that all patients will need to complete an online form for all appointments. This to be sent to PPG for review/comment. • There will be some pressure on Care Navigators to fill in any forms for those patients that can't or won't complete the forms online. At busy times patients will be advised that someone will call them back at an approximate time to help complete the relevant forms. • If someone refuses to give any information and won't complete a form then they will still be put on a clinicians list. • Nurses appointments will still need to be arranged by telephone. • Patients will be able to book ahead • Leaflet to be produced by PPG to give to all patients explaining the Rapid Health process and FAQ.
11. Newsletter	
Discussion:	August Newsletter to be finalised by 22 nd August and to focus on Rapid Health
12. Dates for next meetings	
	<p>Tuesday September 16th 2025 Tuesday October 28th 2025 Tuesday December 9th 2025 All meetings to take place 17.00-18.30 hours at CLMP</p>
13. Any Other Business	
<p>Vaccinations. Annual Flu and Covid Vaccine to take place at Ahmadiyya Centre Thursday/Friday/Saturday commencing 2nd October. Flu vaccine clinics will also be held at CLMP dates to be confirmed</p> <p>Clinics to be highlighted in the newsletter advising why it is good to get your vaccine at the practice i.e. that is where your medical records are held.</p>	