

Clarendon Lodge PPG Minutes

Date & Time:	Tuesday 4th March 2025, 17.00-18.30 hours
Place:	Clarendon Lodge Medical Practice
Present:	Martin Blows (Chair), Robin Verso (Vice Chair), Sarah O'Malley, Bridget Winn, Peter Beard, Caroline Green, Carolyn Pickering, Jean Murphy, Amy Miller, Pauline Pears, Heather Storr, Stephen Gallagher (Business Manager CLMP) Also in attendance: Dr John Fullbrook (CLMP GP) Congratulations were extended to Carolyn on her reappointment as a Senior Governor in Warwick & Leamington for South Warwickshire University Foundation Trust (SWFT).
2. Apologies:	No Apologies

3. Minutes and Matters Arising from the last meeting

Discussion & Actions:	<ul style="list-style-type: none"> Robin corrected the item concerning NAPP. NAPP is not a scheme but the National Association for Patient Participation Groups. Martin confirmed that the membership subscription has been renewed.
Actions in bold	<ul style="list-style-type: none"> Future renewal needs to be included on an Agenda towards the end of the year to ascertain whether this is something the group would like to be a member of in the future, whether it is value for money now that the membership costs have doubled. Martin to share his log in with all members for everyone to have a look at the NAPP site. The remaining minutes of the meeting/AGM held on 21st January 2025 were accepted as accurate.

4. Correspondence/Feedback

Discussion:	Correspondence from patients and the replies from the chair had been circulated prior to the meeting. The comments were noted by all.
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5. Surgery News and Update

Discussion:	<ul style="list-style-type: none"> <u>GP Industrial Action</u> - Stephen confirmed that a settlement had been agreed between the Government and the BMA of 7.2% This will help GP practices but there is still an issue with the additional NI costs that the practice will have to pay from April 1st. <u>Staffing</u> - CLMP have recently appointed an ANP, Charlotte Porter. She will commence work on April 24th and previously worked in Secondary Care at Warwick Hospital. Shortlisting has recently taken place for a Care Navigator, interviews to take place in the next week or so. A GP has been appointed to cover maternity leave and will start next week. The appointment has been made for 14 months. <u>Telephone Message</u> – A mailbox needs to be sorted and then the message will launch on Monday. <u>Website</u> – A meeting has been arranged with the current provider, next Wednesday, to see what they are able to offer. They have an updated format but the service will need to be managed. A further meeting needs to be arranged with another provider.
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6. Dr John Fulbrook

Discussion & Actions:	Martin thanked John for his attendance and support at the PPG meetings over the past 14 years. John then thanked the PPG. He has worked at the practice for the past 29 years and now feels it is the right time to retire. Patients are already wishing him the best. He said people don't forget kindness and remember sentiment and being a GP is a privilege, sharing patient's stories and secrets.
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7. Feedback from SW Patient Engagement Group

Discussion & Actions:	Prior to the meeting Robin had circulated a report from the last meeting he attended on 16 th January. He highlighted that briefings were received during these meetings from ICB, SWGP Federation and Healthwatch. Each PPG Group representatives shared what they were currently undertaking with their groups in order that each group can learn from each other.
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8. Pharmacy Survey	
<p>Discussion & Actions:</p> <p>Actions in bold</p>	<ul style="list-style-type: none"> The repeat medication leaflet for patients is now available in the surgery and a PDF version is now on the website. Dr Fullbrook said he was very impressed with the leaflet. Jean advised that she had been called recently about her medications for review, she advised that with a number of items for review she would have liked a little more notice. Dr Fullbrook advised that most people now receive their review around their birthday. Jean confirmed that she had received one and was surprised how quickly another review was taking place. Stephen would look into the reason why this was being repeated again so soon. A reminder to go in the next newsletter advising patients that a review for repeat medications will take place usually annually around the patient's birthday in order that they can prepare for this. If the timing is not convenient then patients can request a more suitable time. <u>Waste Medication</u> Richard Brooks from Sherbourne Medical Practice is going to write to Integrated Care Board to see if this work would be of interest to them. <u>Pharmacy First</u> A review needs to be carried out nationally rather than locally. It would appear more antibiotics are being prescribe under this new system. <u>Hospitals providing Medication</u> Carolyn has been investigating what leaflets the hospital provide regarding prescription medications, there appear to be none available at Warwick Hospital. There are still issues with communication between hospitals and GP surgeries when a patient is put on medication at hospital. Discharge summaries are sometimes delayed in getting to GP surgeries. Patients have to wait a long time in the out-patients pharmacy and don't wait or indeed go back to get hospital only prescriptions fulfilled, instead preferring to go to their GP practice. Carolyn will raise this issue if she is re-elected to the Patient Care Committee. <u>Patients with no Smartphone/Computer Access</u> This needs to be re-looked at as to how we can help these patients at a later date. <u>Network for Local Pharmacies</u> Robin to follow up. It was concluded that this project had been a very important piece of work with really positive results.
9. Patient Survey Feedback	
<p>Discussion & Actions:</p> <p>Actions in bold</p>	<ul style="list-style-type: none"> Martin thanked everyone for their feedback concerning the recently circulated suggested Survey. A few further amendments need to be made. Once the telephone message had been launched, the survey will be sent out. This will be included in the next newsletter. Stephen to see whether it can be embedded into the Friends and Family text message that is sent out to all patients that had an appointment at the surgery. A link will go on the website and also on the screens in the waiting rooms. We will not reach all patients. A team needs to be set up to analyse the results i.e. by question, age. Martin, Bridget, Heather and Sarah offered to do this. A note to go on to the questionnaire, suggesting that anyone ticking the box for being a Carer should register with the Surgery as a Carer, in order that they can receive support. Survey should remain open for 4 weeks
10. Feedback from ongoing projects	
Discussion:	<u>Newsletter</u> – Nothing to report other than the number of people receiving the emailed newsletter had slightly gone down.
<p>Discussion & Actions:</p> <p>Actions in bold</p>	<p><u>Family and Friends Analysis</u> - Bridget confirmed that the analysis was up to date. To show the results using the Skillen method was very complicated, she had received assistance from a 20 Year Old Post Graduate Mathematician who had struggled with the process. She suggested that it would take about a year to map all the information out. It was suggested that the most relevant points were the comments as opposed to the grading. It would probably be more beneficial to create our own headings i.e. "How easy is it to get an appointment". Heather, Bridget and Martin will look at the February comments, sorting these into relevant headings and produce a spread sheet on Excel. The aim for analysing the Family and Friends data was to see trends in comments. Therefore it would be better to move away from the Skillen method but Martin thanked the team for their persistence.</p>

Discussion:	PPG/PCN Group – A meeting has been scheduled with Stuart & Ollie to be held at CLMP next week, with a view to setting up a PPG within the PCN. The meeting agenda had been changed to Integrated Neighbour Team. More details to be shared at the next meeting.	
11. Facebook/Google/NHS Feedback monitoring		
Discussion & Actions:	It was suggested that the PPG should be more proactive at looking at the above. People can leave a comment on any of the above without having to be a patient. NHS feedback can be looked at by looking at NHS.UK site where all GP practices are listed.	
Actions in bold	It was suggested that the PPG Group should have their own social media platform. This should be a closed group and linked through the surgery. It would require two of the PPG group to act as Admin. Amy will put together a proposal for discussion at the next meeting.	
12. Carers Project		
Discussion & Actions:	<ul style="list-style-type: none">This is a potential project that the PPG can become involved in to identify more carers who are patients at CLMP. There are currently 291 on the books. A meeting had already taken place with Shipston and Hastings House as they had already carried out this piece of valuable work. Also a meeting with Emma Matthews, Practice Manager as she had previously led on work with Carers. Shipston have 600+ Carers. Initially 3 practices worked together but now work individually.It was suggested a joint practice PPG working group be set up to establish what resources are required, what we can do and the relevant costs. Also what actions can be taken at Practice Level, PCN Level or Leamington as a whole. This could be discussed with the PCN. The aim for this project is to identify carers, improve what help and support carers need i.e. carers' health.Group to come back to next meeting with a proposal.	
Actions in bold	Dr Fullbrook pointed out that there is a large population of elderly people but that many don't have carers as they are in care homes.	
13. PPG Projects/Targets for 2025		
Discussion & Actions:	Robin had advised that other PPGs do not have an annual target but have a rolling programme. We should perhaps do this but look at the length of each project and report back on all projects annually. A positive number of projects had been completed.	
Actions in Bold	<ul style="list-style-type: none"><u>Patient Education</u> It would be difficult to provide current information on specific medical conditions i.e. Osteoporosis, ensuring it is accurate and reliable, it would be far better to signpost to specific places i.e. NHS pages and do a spotlight in the Newsletter. Jean and Pauline to put together a tester for March newsletter.<u>Review of Rapid Health</u> – There will be an internal review of this system. Perhaps a questionnaire could be sent out to all people that had used the system in the last month. To be discussed at the next meeting.<u>How GP Practices Work</u> – Most patients do not understand how GP Practices operate. A few short articles to be written for next newsletters. Robin offered to write a piece on How the practice is financed. Stephen suggested a piece on how Flu Vaccines are purchased. Martin will write the first one on the Structure of the GP practice, how it evolved and what currently happens with GPs. It was also suggested that some of the members of staff could be interviewed as to what their job entails, i.e. Business Manager, Admin, Nursing.	
14. Content Suggestions for Next Newsletter		
Discussion:	<ul style="list-style-type: none">Patient SurveyPatient Education – Jean & Pauline to put togetherHypertension Article – Bridget to follow upFriends & Family – Stephen to prompt Emma for latest dataNHS App Test Results – Martin to write an article explaining how test results are now shown on the NHS App	
15. Dates for next meetings		
	Tuesday April 15 th Tuesday June 10 th Tuesday July 29 th	All meetings to take place 17.00-18.30 hours at CLMP
16. Any Other Business No other business was raised. Martin closed the meeting by wishing John a Happy Retirement.		

