

Windermere and Bowness Medical Practice

PATIENT PARTICIPATION GROUP MINUTES: 6th July 2023

Present:

Laura Brough (CHoC Facilities and Estates Manager)
Nicky Chapman (Windermere Practice Coordinator)
David Glover (CHoC Chief Operating Officer)
Nick Jackson (Windermere Practice Manager)
Lois Sparling (South Lakes Poverty Truth Commission)

Rae Cross (Patient)
Valerie Garvey (Patient)
Richard Glenister (Patient)
Ally Jarvis (Patient)
Helen Jones (Patient)
Sandra Lilley (Patient)
Fred Tattersall (Patient)

Apologies:

David Glass (Patient)

1) Welcomes and Introductions

- The group made their introductions.





 No new members present, but David Glover and Lois Sparling were welcomed to their first Windermere PPG Meeting.

2) Lois Sparling – Poverty Truth Commission

- LS introduced the Poverty Truth Commission. She met Susan Blakemore in Carlisle, and recently visited the practice at which point we thought coming along to our PPG would be really useful.
- The Commission's aim is to bring together people with a lived experience of poverty, to build relationships with local decision-makers, and raise awareness of what helps and *doesn't* help people in these difficult circumstances. The event itself is ear-marked for 20th October at Lakeland.
- There're currently active groups in Ulverston and Kendal, and we're keen to build the Windermere group. People can find themselves in poverty for various reasons, which include clinical challenges, domestic abuse, veterans... there is no right or wrong criteria to join. The next meeting in Windermere is scheduled for 10th July at 4pm, at the Ladyholme Centre, and LS will feed-back on its success.
- On the surface Windermere may appear generally affluent, but there's a huge disparity between those with a lot and those with the very least.

3) Minutes of Previous Meeting

- Acknowledged the sharing of Enhanced Access Hours.
- Discussed cross-practice PPG working.





Action: NJ to rebuild connections and plan for a shared event.

Reference made to resurrect our patient-facing practice newsletter.
We need to consider content and approach, previously text-messaging the newsletter wasn't received well by some. However, the group felt we should use this as a vehicle for our good-news stories.

Action: NJ to consider most effective means to distribute patient facing newsletter comms and instigate.

- An upcoming new role at the practice will see someone taking responsibility for introducing new social outreach programmes, to include the **Veterans project**.

4) Practice Update

NJ updated the team on current staffing changes...

New staff...

- o **Dr Nneka Okereke** (With Us Now and Getting on Brilliantly).
- Dr Ipsita Guha (Starting Regularly in August).
- Support Staff Covering Odd Days Tracey Bowman (HCA),
 Megan Owen (HCA).
- Staff changes...
 - Jane Owen (nurse) is now working four days p/week permanent
 Will be expanding her LTC knowledge to support our clinics.
 - Vanessa Taylor (HCA) had been doing odd HCA shifts, but is now permanent every Mon and Tue.
 - Dr Igwe and Sheila Sanders Have both sadly left us, and we wish them both the best.





- RG enquired RE: a phlebotomist role. NC/NJ advised that now we have increased nursing team provision this role isn't urgent as previously we need staffing with a range of specialities.
- Positive feedback was given by the group around the availability and range of appointments the practice provides.

5) Practice Renovations

- LB provided an update to our current renovations, and on-site portacabin move. We have slightly delayed from the original date, with works now planned to commence 24th July and complete mid-December.
- The site will accommodate 5 clinical staff, which isn't fair off our current provision, but will require to ongoing tweaking.
- SL thinks that there will be the possibility of staff parking on the Ladyholme site, which will ensure priority for patients and the room to ensure buses can turn outside the site. AJ encouraged us to contact local MPs who may support us.
- DG acknowledged that it will be a challenging time for the staff, but we will be aiming to make the temporary solution as comfortable for patients as possible, and the renovations will be more than worth it.
- NJ/LB opened the floor for any queries...
 - RG asked about the contractors. They are Acomb (from Yorkshire). They were coordinated by the building owners.





- AJ enquired regarding wheelchair access, and LB/NJ confirmed that there will be rampage to some of the clinical rooms, reception, and toilet in the portacabins. There will also be an improved disabled toilet fitted in the main premises upon completion.
- NJ asked if the group/anyone they now would be willing to support with chaperoning patients as regular attenders get used to the changed circumstances. The group agreed.

Action: Final note from NJ was to keep us posted RE: what is/isn't working so we can adjust as we go.

6) Community Engagement

- 'We Are Here for You, posters distributed to local businesses, to encourage people to register with us before they *need* our help.

Action: All present, to suggest good places/employers to share information with.

7) Any Other Business

- NC confirmed National Association of Patient Participation contract renewal. Explained that this is a useful resource.

Action: NJ/NC to share details of accessing the site.

LS emphasised the importance of 'blowing our own trumpet'.





8) Summary of Actions

No.	Action	On Whom	By When
1.	NJ to rebuild connections with other	NJ	Next
	CHoC Practices' PPGs and plan for a		Meeting
	shared event.		
2.	NJ to consider most effective means to	NJ	Next
	distribute patient facing newsletter		Meeting
	comms and instigate.		
3.	Keep us posted RE: what is/isn't	ALL	Ongoing
	working around the temporary cabins		
	so we can adjust as we go.		
4.	All present to suggest good	ALL	Ongoing
	places/employers to share information		
	on registering with us.		
5.	NJ/NC to share details of accessing the	NC	Next Meeting
	NAPP site.		Meeting

Next Meeting: Thursday 28th September, 14:00

