

**Castle Mead Medical Centre**

**CASAG PPG Minutes 01/09/2025**

**6pm to 7.15pm**

**Hinckley Site**

**Confirmed Attendees:** Nick Cameron PM, Karen Lucas, Leslie Gent, Glenda Bloxham, Brenda Sharpe, Steve Budd, Julie Chambers, Susie Goodlad and Jennifer Haines.

**New Members:** Alan Howison

**Apologies:** Helen Staniforth, Dr Julia Patterson

**Key:**

CASAG = Castle Mead and Stoke Golding Action Group

PPG = Patient Participation Group

ICB = Integrated Care Board

DNA = Did Not Attend

**1. Welcome and Introduction from Chair – KL**

- KL Wished everyone a warm welcome.
- Tony has emailed to confirm he is no longer able to be a member of the PPG due to conflicting schedules that don't allow attendance.
- Alan Howison was introduced as a new member of the PPG and applied after attending the Mens Health Event in June.

**2. Open Agenda Topics:**

As this was the first meeting since June due to the summer break the group decided to have an open agenda with discussion points focused on points raised at the last meeting which were.

- **PPG Development** – What does becoming more patient centred and self-sufficient as a PPG look like?
- **Development of PPG Patient Support Sessions** – Developing the in-practice PPG Patient support sessions.

**3. PPG Development** – What does becoming more patient centred and self-sufficient as a PPG look like?

- The session started by revisiting discussions for the PPG Patient support clinics which unfortunately, due to a number of factors, didn't happen as planned. NC reminded the group of the reasons why we decided to develop a PPG patient clinics in the surgery and it was linked to a discussion that started a around becoming more patient centric / self-sufficient PPG. The group agreed to discuss what that looked like initially and move onto what the session looked like later in the meeting.
- As discussed this is the first step to the group to driving the narrative and discussions in the meetings and really help the practice understand what was needed from a patient perspective.
- Last time members of the PPG asked NC what self-sufficient meant and he clarified that he has always envisioned the PPG managing themselves, liaising directly with the patients without any practice staff input and feeding back to the practice via the meetings. This would act as another set of eyes and ears.
- Members of the PPG didn't know what the remit was for this and what they could do for patients. Examples brought up previously were the practice becoming a Dementia friendly practice, Car parking issues and creating more space for mobility scooters. These topics came from direct correspondence with patients and were brought to the meeting for discussion and outcomes were successful.
- Speak to patients in the waiting area and get an understanding of their issues was one way the PPG could help the practice however other types of things we want the PPG to be helping us with are:

- Site walk rounds and audits where areas for development are identified and brought to our attention.
- Continue to help with notice boards up to date.
- Volunteering for Flu campaigns.

4. **Development of PPG Patient Support Sessions** – The discussion moved onto what would the first face to face PPG support session look like.

- We discussed that a trial a PPG support session would be held on Thursday September 18<sup>th</sup> from 10am to 12 noon.
- KL and AH will come into the surgery to do the first session.
- NC will order PPG Badges so patients know who they are and the first sessions were sorted – they will say: PPG Member.
- NC will ensure these sessions are promoted on notice boards, Facebook, the website and in the next newsletter.
- We will discuss again at the next meeting on September 29<sup>th</sup> and review what we can do better for the next meeting. There was a suggestion that we would run one every 6/8 weeks.
- PPG asked what kind of things can patients ask as they felt that they wouldn't be able to answer some questions without crossing some kind of line.
- NC said it would be easy to judge what was appropriate and what's not:
  - i. The feeling was that only questions or feedback that concern things like access to appointments, services issues with the building or car park, how to use the NHS app or access medical records, etc can be taken back to the meeting by the team for us to take away and get you answers.
  - ii. Any question that an individual asks about their own individual care or that starts with I'd like to make a complaint – Refer to the reception team.
- Suzie and Jenifer said they would do something at Stoke if they were available and after feedback.

5. **Any other business:**

6. **Future Events Carried over** - The PPG would like to carry on with the organisation of a future session tailored to other health concerns relevant to our patient population.

- Plans are underway to build on this momentum of the event in June, with additional campaigns and events, including further videos and targeted health weeks.
- Discussions centred around a future women's event – There was a discussion about menopause and HRT however NC suggested that we wait until Dr Patterson is able to attend to discuss the next event when you are there because she would be the best person to discuss clinical women's issues that are on trend at the time.
- We need to understand how to use our Social Prescribers, H&B Council and other ARRS roles next time.
- Headings for boards and potential future areas for an event are:
  - Patient Participation Group
  - CASAG - Castle Mead and Stoke Golding Action Group
  - Mens' Health
  - Womens' Health
  - Childrens' Health
  - Research

7. **Patient Survey** – NC will forward the Patient Survey to PPG members for the next meeting.

8. **Flu Clinics** – NC confirmed that flu clinics were on for Saturday October 4<sup>th</sup> at Hinckley and Monday October 13<sup>th</sup> at Stoke. NC asked for volunteers and a number of members volunteers for both clinics.

9. **Next Meetings**

- Next Meeting September 29th