

Abbey Medical Centre Patient Participation Group Minutes

Tuesday 27th January 1800 – 19:30 Venue: Teams

Present: Stella Moore (Chair), Louise Griew (minutes), Dilys Skinner, Jackie Prestwich, Jean Curry, Lesley Holiday, Chris Bennett (up to 18.47)

From surgery: Angie Newton (Practice Manager), Nikki Bowles (Deputy Practice Manager)

Apologies:, Pauline Hayward (PH), Michelle Walsh (MW), Jackie Lewellyn (JL), Helen Braithwaite (HB), Dr Peter John (PJ), Colleen Crawford (CC) Richard Dickson (RD),

Welcome and PPG membership update (SM) – Chris Bennett (CB) welcomed as a new member and introduced himself to group.

Minutes and Actions from last meeting – SM

LG visit to toddler group – no useful feedback for AMC. **SM asked for feedback is PPG members attend other groups locally.**

Triage survey – to be repeated asap. Triage now opens at 8am – 6.30pm to manage demand safely. **(Survey was done in January and will be forwarded once analysed).**

Check if time out setting can be lengthened on triage form and on survey (LW/NB) Not under our control but can pass on to provider.

inform patients that they need to fill in non applicable Triage boxes with an X (NB) Done.

Use all messaging opportunities to clearly explain, once again, how to make an appointment, AND highlight that phone lines are open for those patients who cannot get online access.

Tried hard via newsletters, Wellbeing Calls etc, believe fairly successfully.

SM and Ryan Smith PCN to work together to consider how to get more funding in place for Health Checks in our PCN. Can't do much at moment as budgets tight at WCC.

AN/PJ to look into plausibility of repeating local mole clinic – Happened Jan 2026

NB will look at feedback form on website and make more prominent. Done - however LG suggested feedback form could be improved further (AN/NB)

'Family& Friends test' is NHS jargon - not readily understood by public.

Action: to review feedback mechanisms on website. AN/NB

Raise staff awareness of South Works Welfare trust. Ongoing and have had a few referrals from Charlotte. PH and JC to meet and discuss if Compassionate Kenilworth can refer in. Link given to PH

PPG coffee gathering outstanding

Action: to arrange spring PPG social gathering (JL)

Progress of Working Groups

Menopause Group - LG

We meet at the Kenilworth Centre 7-8 pm on the 2nd Monday of the month. From Feb we are back in the larger room at no extra charge. We had 15 people attend Dr Jaques Q& A in October and she is coming again in March. The physio came in January. Recent meetings have been smaller but the people who attend get a lot out of them, and we continue to get new people - especially when we have speakers. Flyers taken to Castle and the group is more prominent on the Abbey website. Considering advertising on Nub `News to get the word out more. LG regularly mentions it at the Ken Women's walk. The event in Stratford in October had about 300 attend and there is a real community building that we can network with.

Wellbeing Calls (SM) 3 volunteers make calls to patients age 85 – 89. From over 100 calls trends identified include hearing issues, sight problems, many don't use mobiles (even if they have them) so miss texts, lack proficiency with technology, if it exists at all, whilst others use Apps/website etc effectively. Dexterity issues/arthritis, often mean difficulty filling in form on phone.

Our calls are extremely welcome, and leave patients reassured they are valued, and can still contact AMC by phone if need be. Repeat Prescription issues are addressed. We identify Carers, vulnerable patients etc and their records are updated at AMC. We pass on worries. Patients feel valued by calls. JC said they can claim Attendance Allowance if have care needs.

Wellbeing Walks - SM for Mary McGrath - see end

Christmas Party was a great success and PJ and NB attended from the surgery. There is still a hard core of walkers returning regularly, but the Christmas break and the recent extremely cold , wet weather have caused a drop in numbers attending the walks. AN and MM are working on initiatives to increase those attending. Importantly we are in discussions about whether we stay with Ramblers or run the walks under AMC's auspices/insurance. Ramblers requirements are onerous and we only get insurance from them in exchange.

Ryan developed a training program for leaders which would be helpful to have a copy of: NB to pass on to MM.

Action: AN/NB continue to discuss insurance & training with Mary McGrath

Action: surgery staff attendance once a month was requested - Michelle - Social Prescriber - will come when can.

CB invited to go along to a walk.

Action: Xmas Party Photos have permission to go on website.

Surgery Update – AN

Action - NB to supply web visit data - Web hits peaked in July and steadied at 21,000 a month **Graph circulated previously by SM**

Online triage

Seems to have settled – overwhelming before Xmas – Mondays always busy, Tuesdays fairly high – Weds quiet – up a bit Thursdays and bit more Friday. Triage doctor – 2 on Monday – 1 Tuesday + 1 am. At least 50% of requests are not clinically urgent, so are sent amber and green appt booking links for later in week. Most people stick to 1 issue per form - Sometimes Drs would like more info.(CB left 18.47)

ACTION: Education re busy times.

Concern expressed that triage might miss important ‘by the way’ clues. AN said currently most GP appointments are face to face now so this is not such a worry. Seeing same GP is not easy - if patient has complex issues then a GP who knows the situation is preferred.

Vaccinations update winter campaign drawing to close – can still do flu. Spring Covid Vacs will be age limited – invites coming soon.

How do housebound/ vulnerable get vaccinations at home? JP

If patient is on list, team will go to the house. Patient can ring reception and they will liaise with vaccination team.

Staffing changes Charlotte on Maternity leave - Michelle replaced her. 3 new receptionists started.

Building work – scaffolding up – converting admin mezzanine space to 2 new clinical rooms upstairs, and reconfiguring to keep admin use. Fairly minimal disruption and it is nearly complete.

5. PPG News

Ongoing Action: Recruiting new members: SM still trying to get new members with a focus on diversity. SM wrote email which went

out to all the Lions members. **Result - 3 enquiries but only 1 appropriate. (SM to follow up)**

Kenilworth School Link - SM meeting with Student Welfare Contact at Ken School to discuss possible projects involving 6th formers/ D of E students: **Aim** - to enable students to express opinions and to help them navigate GP appointments in future. Their Patient Voice is valuable to us.

CONCORD STUDY – See end

SM is involved in this research project.

SM and Lily plan newsletter content together. Newsletters now come out monthly and are well received. It is agreed that Compassionate Kenilworth events e.g. Tech Cafe, and other groups benefiting patients, are advertised.

Waiting Room (AN) – feedback from Family and Friends said waiting room is dull – clock needed? TV screens are informative. JP highlighted the need to keep our noticeboards tidy, with laminated sheets displayed. LH suggested walls need colour.

Action: To consider what might improve waiting room.

AN and SM previously discussed placing a small PPG noticeboard in staff room so all staff are aware of our role.

Action Needs further discussion

6. PCN PPG Update - SM

PCN current focus is defining the exact organisation and project focus for the INT - (Integrated Neighbourhood Teams), linked to our PCN. SM attending Steering Group meetings as the patient voice in this process. It involves community groups etc, hospital representatives and other health roles.

There is still an issue setting up and maintaining effective PPGs at other practices, but this is being addressed.

South Works Patient Engagement Group meets every 2 month. It provides valuable information regarding organisational changes within the ICB, by the Head of Primary Care for Cov & Works, Christina Ramos from GP Federation attends. Caroline Graham (HealthWatch) expects organisation to be abolished in 2027, but their input is invaluable as it is independent. This would be a real loss to patient groups.

7. A.O.B.

DS praised reception staff who efficiently sorted out a few issues for her. LH also had praise for them from Wellbeing Call conversations with patients.

SM thanked Kenilworth Community Gardeners for recent work on flower beds to cut back plants.

Action - Can we ask our gardener to reseed grass as it is wearing thin? (NB)

NEXT MEETING: 30/4/26 AT 18:00 HRS ON TEAMS

Wellbeing walks report for the meeting of PPG, 29th January 2026

Overview

There is still a hard core of walkers returning regularly but the Christmas break and the recent extremely cold weather have caused a drop in numbers attending the walks. Angie Newton and Mary McGrath are working on marketing initiatives to increase those attending. Importantly we are in discussions about whether we stay with Ramblers or run the walks under AMC's auspice.

Attendance

The weather, very cold or very wet, and the Christmas break have conspired to cause reduced numbers in January. Angie and Mary are actively planning how we can market the walks more to increase the overall numbers

Leaders

We have a stable number of very competent leaders.

Ramblers or AMC

Ramblers have tightened their requirements for leaders. For us to remain part of Ramblers and therefore insured by their public liability insurance, all leaders will have to complete a 3 hour online course, however long they have been leading. We are also obliged to register all our walkers with Ramblers and submit regular figures to them. All our walk routes need to be registered with them.

An alternative would be for the walks to be covered by AMC's insurance. Angie is verifying whether this is possible because it would reduce the administrative burden on the walks. The only benefit we receive from Ramblers is the insurance. We have to yet to get any additional walkers via Ramblers.

If we are unable to insure the walks via AMC, I am concerned that we will lose some of our leaders if we ask them to do a 3 hour online course. Not all of our leaders are computer savvy and we have already asked them to do an in house training course and first aid course.

Ryan Smith devised a training programme which has proved effective in preparing leaders. It would be helpful to have a copy of this.

Since the extra admin required by Ramblers will very likely fall on me, I am keen that we try to make the walks work under Abbey Medical Centre insurance.

Christmas party

The Christmas party was a big success and provided the only celebration that some of our walkers had. Thanks are due to the leaders who prepared much of the food, Gillian Dean for her musical skills leading the singing and AMC for funding a big portion of it. The party visit by Dr John and Nikki Bowles was very well received!

Mary McGrath, 20th January 2026

CONCORD STUDY

Whois organising and funding the study?

This project is led by Dr. Emily Rowe at Warwick Business School, commissioned by Rose Uwins, the Head of Communications and Public Affairs, Coventry and Warwickshire Integrated Care Board and funded by the Integrated Care Board of Coventry & Warwickshire.

What is the study about?

Background: In 2022, the Coventry and Warwickshire Communities Strategy was designed to respond to NHS England's guidance for Integrated Care Boards (ICBs) and Integrated Care Systems (ICSs) on how to work with People and Communities. One of its core objectives was to establish collaborative community involvement as the standard in service design, delivery, and evaluation across the health and care system. This strategy is driven by the Involvement Coordination Network (ICN), which leads initiatives such as shared involvement resources (Engagement calendar, Insight Library) and building stronger connections with the Voluntary, Community, Faith and Social Enterprise sector (VCFSE). As part of the Communities Strategy, members of the ICB & ICN identified the need for an Involvement Assessment Framework, which promotes good standards of involvement across ICS organisations, and ensures that involvement activities across the system are appropriate, where relevant stakeholders are involved and processes are executed; legally

compliant, ensuring that involvement activities adhere to statutory obligations and other legal requirements; and impactful, acknowledging that good involvement results in meaningful change as community input drives service priorities and decision-making.

Aim: The CONCORD project aims to address this gap by investigating the current state of involvement and developing a best-practice framework for informed, evidence-based involvement. This framework will support citizen and community involvement in service planning, delivery and evaluation, and enhance decision making by drawing on local expertise, alongside national and international best practice, to improve and support involvement activities for organisations and communities in the Coventry & Warwickshire ICS.