

Notes and Actions

Meeting Wednesday 6 August 2025 1.30-3.30pm

Attendees:

Kate Tebbs – Executive Partner (KT)
Ian Baker PEF/PPG SECRETARY (IB)
Ann Talbot PEF COMMITTEE (AT)
Denis Costello PEF COMMITTEE (DC)
Joan Carter PEF COMMITTEE (JC)
George Gard PEF COMMITTEE (GG)
Jacky Gulczaynski PEF MEMBER (JG)
Julie Bowden PEF Member (JB)
Geraldine Stupples PEF Member
Maureen Donovan PEF MEMBER (MD)
Mike Redfern PEF Member (MR)
V Balachandra PEF Member (VB)
Carmel Francis PEF Member (CF)
B Gibbs PEF Member (BG)
Janice Heredia - Patient Liaison Officer (JH)

Apologies

Andrew Smith PEF COMMITTEE (AS), Simon Parton - GP Partner (SP), Elizabeth Atere-Roberts PEF COMMITTEE (EAR), Alex Camies PEF/PPG CHAIR (AC)

Matters arising from previous meeting (04.06.25)

C/F Action SP: Saturday Patient Medication Review Surgery update.

SP said the Board is happy with the principal, but the budget and recruitment is still required.

C/F Action JD and All: The PPG requested that the recommended website structure and content (previously provided by IB and latterly AC) continue to be the basis for the PPG/PEF's to communicate with the broader patient group. KT suggested that the JD will look at the perhaps more advanced Modality Mid-Sussex website (<https://www.modalitymidsussex.co.uk/>) to better assess the potential and shape for our own web offering, as should interested PEF members; although the site carries virtually no PPG information beyond joining instructions.

Action KT: KT agreed that a direct meeting with the Group communications officer (Ryan) and key PPG members seemed a helpful next step in development of the website. KT agreed to move this forward.

Action KT/PPG: KT requested the PPG propose a small group of members who could add value to the current 'Capacity & Access' Team meetings which are being held weekly, and are primarily focused on the longer online opening hours and revised appointments arrangements required for October 2025. The initial suggestion was for AS, AT and IB to represent the PPG.

C/F Action: JD to produce timely Data sharing suitable for Modality's PPG committee as well as for the PEF's. **SP** has no objection to sharing anonymised data with the PEF, providing the information was not shared outside the meetings. It was agreed the PPG and PEF's must respect the confidentiality of any data provided. SP noted that a new graphical format of data was now available and could be shared with the PPG committee, and that it was the practice aim to monitor performance and 'compete' within the changing market.

Action AC: Following AC's review of the text message formats used by Modality Lewisham, the meeting felt that it was desirable that she share her amended versions with the PEF/PPG for any further comment.

Feedback from PPG Meeting (26.02.25)

AC confirmed the circulation of the notes and actions for the PPG Committee meeting on 18 June, which provides fuller information about the meeting.

There was an update at the meeting, noting another Lewisham GP service using Klinik had been approached to see if any 'good practice' could be shared, but this approach had been gently declined.

Practice Update

Performance Overview

KT gave a brief overview of the Department of Health and Social Care (DHSC) 10 year plan to move towards more/better integrated neighbourhood teams. The plan wants to embrace 3 significant strategic changes from the current arrangements, namely embracing:

- Analogue to Digital
- Hospital to Community
- Treatment to Prevention

It is currently envisaged that 'neighbourhoods' will have populations of approximately 30,000 to 50,000 people (similar to current PCN sizes). An Integrated Health Organisation will hold the budgets for the new structures, although there is currently no clarity of the budgets or detail about how the new arrangements will work. The DHSC will be putting pilots in place (short term) to begin to test the proposed new strategic arrangements.

Staffing

KT confirmed the appointment of a new Nurse and Health Care Assistant, alongside a new Jenner based GP who would help manage Monday Triage pressures. A new Medicines Support Team member has also started, to help ease the pressures on the team. Further GP's will also be joining the practice in August.

Key Task Programme

IB advised that whilst a number of significant and helpful improvements had been made in relation to the carers pack, the prescriptions process and improved signposting to services, the pace of improvement was being seriously impaired by the lack of time and multiple clinical priorities of those involved. The PPG suggested that there seemed to be a pressing case for a small investment in an analyst/coordinator to help support, report and help move the various initiatives along.

Action IB/KT/SP: IB agreed to further discuss the potential needs of this 'business analyst' type role to support the various Key Task and other improvement initiatives, and support staff currently struggling to deliver these.

The PEF raised the question of where the Carers Information Pack was currently available (online, at Receptions or specifically sent to known carers)? No one at the meeting was clear, so IB agreed to raise this with John Liebthal and SP to gain greater clarity.

Action IB: to clarify the publication and availability status of the latest carers pack with JL and SP, to share across the PPG.

Systems

In relation to 'signposting' the PEF believed that, in relation to most clinical and health initiatives and news, this would best sit in a 'what's on' or 'latest news' page/s within the Modality website and not with the PPG.

Action JD: to explore how best to gather and communicate ongoing clinical and health news through the Modality website, to help keep patients well-informed about the practice, DHSC and other stakeholder initiatives.

KT confirmed that Modality Lewisham will be adopting a new document management system which will incorporate AI to help improve the speed and direction of documents within the practice.

Other Partnership Matters

KT advised that Sian was currently in the process of building a more robust business case for the Integrated Care Board (ICB) to try to secure first floor space at the Jenner to house a larger, centralised Triage Hub for the whole practice (as Modality have to cost justify the use of this space against competition from other potential users). An alternative could be the creation of a 'virtual hub.'

KT noted that newly diagnosed diabetics (type 2) were being invited to a surgery session to provide information and help answer questions that this patient group were facing.

PPG Activity Update

IB apologised that he was not fully up to speed with the planned PPG activities, but it was noted that AC was routinely issuing updates.

Any Other Business

KT advised that Vijay Kumar, the National Lead for research for Modality, undertakes funding bids for various trials in conjunction with practices across Modality.

Key Task Meeting Dates

Signposting Meeting 13 June (10-12)

Dates of Next Meetings

Modality South Lewisham PEF meeting 1.30-3.30

October – To be determined (Wednesdays PM preferred)

December – To be determined (Wednesdays PM preferred)

Modality PPG meetings 1.30 – 3.30 pm:

Wednesday 29 October

Wednesday 17 December

SUMMARY OF ACTION POINTS

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