



### **Notes of the PPG meeting Tuesday 3<sup>rd</sup> June 2025 2:00 pm by Zoom**

#### **Present:**

**PPG** Helen Carter (HC), Bernard Connolly (BC), Lyn Davis (LD), Sandie Helm (SH), Andrew Lewcock (AL), Janet Parker (JP), Tom Thacker (TT), Rosemary Stickland (RS),

**Practice** Dr Carrie Ladd (CL)

**Apologies:** Becky Collins (BCo), Julie Mabberley (JM)

#### **Agenda**

1/ The notes from the last meeting (Mon 28<sup>th</sup> April , Draft 4) were approved by the meeting for issue,

**ACTION AL** to send (amend label Final) and send to Kellie to post on the NSP Web site.

#### **2/ Practice update**

Triage system continues to work well, however some people “go round” the system when appointments are full by putting “medical issues” in the “Admin Request”; this is not advisable as it is not looked at as quickly as the medical request, and it means the request has to be resubmitted. The Practice will accept a phone call if urgent.

As the summer approaches the number of requests per week is expected to drop.

The Practice awaits the publication of the NHS 10-year Neighbourhood plan ( due in June); The plan sets out key ambitions for the NHS over the next 10 years, including a focus on clinical priorities, primary and community care, and workforce.

The work by the Integrated Neighbourhood Teams to address certain categories of “non-responders” to come in for a comprehensive check up started in the Spring and looks at patient groups such as those with long term conditions such as high blood pressure or COPD.

After a thorough health check patients needing more investigation/treatment are being contacted. SH asked if patients could be advised of the outcome one way or another by text, so they don’t think they have been forgotten. CL said this could be put in place.

**Action CL** to address follow up for all patients in the Neighbourhood Teams study, not just those actually needing more tests.

The work of the integrated Neighbourhood teams is not yet at a stage where it could suit a zoom talk or a newsletter article.

GPs are allocated time during the week to follow up patients with complex needs.

TT confirmed that Patient Access does also contain notes on these follow ups.

After a question from LD, CL confirmed that locum GPs can now access a patient’s hospital letters should there be any.

CL advised the Annual National GP Practice survey would probably be available in the next few weeks.

HC raised a question about Hospital transport. CL said that this is not booked through the surgery but patients are signposted to who they should contact. AL suggested having something about Hospital transport on the Practice Website. He would contact Kellie.

AL noted the new Practice telephone message is extended beyond the script on the NSP web site and has asked Kellie to update to Web site to reflect the changes.

### **3/ Future Talks /Podcasts**

After discussion it was agreed to run a talk on vaccinations in September.

CL advised a talk on the NHS app could be done via Zoom,

**Action** CL/SH to discuss to confirm speakers and possible dates.

Once published sometime in June 2025, the 10 year NHS plan would be a good subject for a talk

### **4/ Systems**

AL asked about AI in medical applications, Specifically “What is the route forward for the PPGs to help guide patients and advise when they need to alert GP Practices to unexpected issues from the use of AI systems ?

**Action** CL to respond in due course to this query.

AL asked about amending the Committee listing on the NSP PPG part of the NSP web site.

**Action** SH to discuss with JM

### **5/ Health and Wellbeing event**

SH had circulated the feedback notes generated by Liz Buckle (CSP PPG).

Generally feedback from both visitors and participants was good, the building was tight for space, and some “rival” groups should not be put close together in the hall next time.

It is recognised that the future of the Beacon is still uncertain, but alternatives to this venue are few. JP noted any venue used needed to have good wheelchair access.

### **6/ SOPA**

Wes Streeting has removed a layer of NHS management, and complaints were raised about care after patients discharged from Royal Berkshire Hospital. JP to send out notes of the last SOPA meeting as a fuller report.

### **7/ Wantage Hospital Progress.**

JP noted a Wantage Town Council meeting had advised there would be a meeting on ideas for the soft design elements – use of colour, artwork, finishings, wayfinding, etc, especially in the general public areas – for the ground floor of Wantage Community Hospital.

Both BC and AL have been in communication with Peter Gibson, Interim communications consultant Oxford Health NHS Foundation Trust about this, and meeting will take place sometime after mid June. It was apparent no actual building work had commenced so there was doubt that the work would be completed by October 2025.

### **8/ Communications:**

Newsletter. The question last month over funding seems to have been resolved, the Annual cost to the Practices/PCN of less than £1000 was accepted.

A review of distribution spots for the newsletters should be held jointly with CSP, some sites do not seem to disperse newsletter very quickly, and other do. We should focus deliveries on the effective delivery sites.

The content of the newsletters was not always Practice orientated enough, although both Practices vetted content before it was published. AL and Annie Dee are to meet with Diana Donald to discuss this. This topic would be discussed further after that meeting.

CL asked if other PPG produce newsletters? AL struggled to remember the name of the National Association for Patient Participation Groups ([napp.org.uk](http://napp.org.uk)) which might furnish and answer.

**Action** AL SH to investigate

(Note Post meeting AL had did a google search and found plenty of groups issuing newsletters, and message from LD confirms this)

AIMS. The DRAFT revised PPG Aims were discussed; Aim 6 should be amended to read PPG Committee not PPGC

Aim 1 should read “encourage Patients’ suggestions....

Aim 7 was discussed and slight rewording was required

**Action** CL to revise Aim 7 to amend the breadth of scope.

## **9/ Treasurer’s Report**

The current account balance is £934.04 Two cheques issue but not yet cashed are for a total of £130.22 which would reduce this balance to £803.82.

Approximately £780 is still due as the balance from the H&W accounts which would bring the total to over £1500.

**10 AOB** There was no AOB

**11/ Date and Time of Next meeting: Thursday 10<sup>th</sup> July at 7:30 pm by zoom.**

Reminder of Joint PPG Meeting to be held on Tuesday 10 June at 2pm by zoom. NSP to Chair.

## **12/ Summary of Actions**

**Action** AL to send (amend label Final) and send to Kellie to post on the NSP Web site.

**Action** CL to address follow up for all patients in the Neighbourhood Teams study, not just those actually needing more tests.

**Action** CL/SH to discuss to confirm speakers for NHS app talk and possible dates.

**Action** CL to respond in due course to this query. (Is there an equivalent to the “Yellow Card” scheme for medicines for new medical systems with AI ?)”

**Action** SH to discuss with JM regarding NSPG

**Action** AL to investigate whether other PPGs issue newsletters (see (8) Communications)

**Action** CL to revise wording of Aim 7 to amend the breadth of scope.

**Andrew Lewcock**

July 2025 (Precis version)