

## **Stanhope Mews West Surgery – Patient Participant Group**

### **Minutes of the meeting held on Tuesday, September 16th, 2025**

**5.30 - 7.00pm**

**Present:** Carol Joseph (Chairman), Elisabeth Burman (Secretary), Jan du Plessis (Practice Manager), Fay Amias, Viorica Bergman, Colin Cherrie, Zarrina Kurtz, Catriona Richie, Colin Ussher, John Walker.

**GP in attendance:** Dr Andrew Steeden

#### **1. Welcome**

**CJ** welcomed everyone to the meeting.

#### **2. Apologies**

Camilla Cazalet, Lynden Easton, Caryl Harris, Faith Williams (Brompton PanPPG).

#### **3. Minutes of the last meeting**

The minutes of the meeting on 10 June 2025 were approved.

#### **4. Updates from the GP**

- **Dr Rhiannon Will:**

**Dr Steeden** confirmed that Dr Will (GP and Partner) had left Stanhope Mews West Practice (SMW) on Friday, September 12<sup>th</sup>. It is the intention of the practice for her to be replaced but this will not happen before Christmas.

- **Government's 10 Year Health Plan:**

**Dr Steeden** spoke about the Government's ten-year plan involving the development of neighbourhood health centres for London. The plan will be developed in partnership between London's five Integrated Care Boards, NHS England London Region, and the wider London Health and Care Partnership (London Councils, Greater London Authority, UK Health Security Agency, and the office for Health Improvement and Disparities in London), with support from London wide Local Medical Committees.<sup>1</sup>

These neighbourhood health centres will offer a neighbourhood health service provided by integrated care teams. These new teams will be set up in local communities and will consist of a broader team of people, doctors including psychiatrists and geriatricians, nurses, social workers, pharmacists, health visitors, palliative care staff and paramedics.

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<sup>1</sup> NHS England, A Neighbourhood Health Service for London, May 2025

**Dr Steeden** informed us that the GP Federation has been successful in putting in a bid for the implementation of one of the neighbourhood health centres. The new contract should come into force at the beginning of October. He explained that there was a natural drive to locate to single hubs but that this would not be practical in Kensington and Chelsea. He reassured us that GP practices will keep their patient lists and that patients will still see their own GP. He explained that Stanhope Mews West (SMW) is an implementer of this new system, and that the access plan allows SMW Surgery to see patients in the evenings and at weekends. The plan will be shared eventually and will have more preventative steps built in such as 'My Care My Way' and a 'child and young people hub' which are already in place through the Violet Melchett Centre.

In the Government's ten-year health plan there is lot about the role of technology and utilising it to keep people well. The plan describes 3 radical shifts in patient care:

- Hospital to community
- Analogue to digital
- Sickness to prevention

**CU** mentioned My Health LDN which is a website that helps people with cardiovascular disease, or those who are at risk from developing it, to live their lives to the full. It aims to do this by providing access to the latest information for living well, so everyone can live a happier and longer life. There is a possibility that payment may be made for outcomes instead of activities and process, which may incentivise others to work in this way.

**Dr Steeden** reported that a lot imaging is now available in the community, such as mobile CXR units, CT scanners and MRI scanners.

## **5. Updates from the practice manager**

Enhancing patient empowerment and engagement

- Patient access survey
- Patient charter
- NHS App registration

Before focusing on the three topics above we were given a general update.

**Appointments:** In response to a query about booking appointments with different health care professionals on the website, **J de P** said that the monthly audit on appointment access shows only 5-10% of patient appointments are suitable for the patient to see a clinical pharmacist or a nurse, instead of a GP. These appointments must be booked separately through reception. Recording patient appointments and who wants to see a particular GP is not possible as the software is unable to do this yet.

**SMW telephone answerphone message:** this has been changed.

**First contact physio:** this will start on October 14<sup>th</sup> on Tuesday mornings only and patients will have to be 'signposted' to this service. Concerns were raised as to how the patients would be made aware of the service. We were told this would be by the website and via the information given on the surgery telephone answering service.

- **Patient access survey**

**Dr Steeden** told us that the previous ?NW London Patient Experience Survey had a 19% response rate. He said the National General Practice Patient Survey results came out a month ago and that Kensington and Chelsea did very well, as did Stanhope Mews West.

The new Patient Access Survey has been distributed among a few PPG members. Concerns were expressed about the use of text boxes, and the fact that it starts with questions regarding access and then moves to those regarding experience. There were also concerns as to whom the staff are that are referred to in one of the questions, how it is going to be distributed and where it is going to be analysed.

**Dr Steeden** said that the PCN and the GP Federation must work within certain criteria.

**J de P** said that the questionnaire is going out on Friday, September 19<sup>th</sup>, and more concerns were raised as to whether it had been piloted and who was going to analyse it.

**Friends and Family Test:** **J de P** asked if this was becoming annoying and there was a general agreement that it was.

**Questionnaires:** **JW** said that he had had a good experience in reception and was asked if he would complete a questionnaire but unfortunately couldn't understand any of it.

- **Patient charter**

**J de P** requested that discussion of the Patient charter is postponed for the time being as he has only been in post for two months. However, he touched on a few issues:

- i. Governance: SMW practice is ensuring that complaints are responded to on time.
- ii. Dr Will's leaving: her job is being divided up between the remaining medical staff.
- iii. Staff morale: he said that staff morale has taken a bit of a knock recently.
- iv. Strategising: big things are not currently being strategised, but he is getting everything in place.
- v. Staff meetings: Friday morning meetings are still taking place concurrently with Teams meetings.

**Doctors' rota:** **CU** understands that at any one time, no more than 3 staff should be working from home which should comprise 2 admin staff and one clinician.

**Face to face (F2F) appointments:** **J de P** explained that the practice had to supply 85 F2F appointments per 1000 appointments per week. He said that it was always possible to see a

GP during the day for urgent appointments. Three or four clinicians are running the urgent clinics every day.

- **NHS App registration**

650 patients have responded to the request to register with the NHS APP but we have to wait until the end of August to see if this number is significant. **Dr Steeden** explained that the App enables patients to see their notes, their appointments and to order prescriptions.

**CU** compared the NHS App with 'systmOnline', which is the preferred tool with a lot of patients.

The NHS App tells you what medication you can order but 'systmOnline' also tells you the earliest date that you are able to reorder medication.

The NHS App does not give PSA and tumour marker results.

The NHS App uses an online portal called Patient Knows Best where patients can access their health information (providing they agree to their terms and conditions). However, this portal gives a delay of exactly one month regarding results.

Fortunately, neither system prevents the patient from calling their practice to obtain results.

**JW** suggested that results could be given by phoning the patient. He had had an unsatisfactory experience with the texting system when he was asked to call the practice for some results, only to be told by the doctor that the results were normal.

**Dr Steeden** said that there should be feedback regarding the preferences as to how patients receive their results. He acknowledged that we all prefer 'systmOnline'.

**CR** expressed concerns that she receives messages asking, 'is this you who has accepted your results?'

**CU** explained that this system is controlled by the settings in the surgery and that he had told Karen Rydings about it, but to no avail.

**J de P** said that he would look into it.

**Dr Steeden** explained that Covid vaccinations are not available at SMW. The reason for this is that these vaccinations are fragile and have to be kept in carefully controlled conditions and only administered in certified centres by staff trained in the field of Covid vaccination.

## **6. Surgery patio renovations and plantings**

**CJ and VB** visited the garden patio last week. A contractor was consulted to give an estimate for the cost of cleaning and repairing the area. Funding for this project was considered and will be discussed again at the next meeting. It was suggested that we advertise for patients who would be willing to help in the garden with planting and watering.

**J de P** told us that the surgery is due for renovation in 2026.

## **7. Patient handbook – should paper copies be available?**

No paper copies of the handbook are left now. **J de P** suggested that reprinting is not necessary as they can be distributed electronically. In any event, the handbook needs to be updated regarding the change in practice staff.

**CJ** said that the new poster linking the handbook and website images needs to be moved to a place in reception where it is more visible.

**JW** requested that the 'staff photo board' is updated by the next meeting.

He also suggested that the staff should wear name badges. However, apparently there is a lot of resistance from the staff; feedback was requested.

## **8. Any other business**

**Disabled bay in Stanhope Mews West:** **JW** suggested that there should be a parking bay in Stanhope Mews West for disabled drivers and offered to discuss this with the head of parking, whom he knows, at Kensington and Chelsea council. Unfortunately, K+C have stopped issuing parking permits for GPs.

**MSK:** **CU** reported receiving a text at 4am with an appointment from MSK. MSK is now known as Cora. No contact phone number was given in the text. He complained to reception but felt the problem had not been handled well by reception staff. **J de P** explained there was a glitch in their system which allowed this early text to be sent.

**Text messages in general:** **VB** requested that when text messages are sent to patients, abbreviations or acronyms should not be used for patients' conditions.

## **9. Date of next meeting: 02 December 2025, 5.30 – 7.00pm**

**CJ** will host this meeting at her house.