Attleborough Surgeries

Patient Participation Group Minutes 1st October 2025

PPG Chair: DB

Attendance (Initials of Participants Only): GH, L-AH, RF, SH, TR, LS

1. Apologies for Absence

Apologies were received from BS, IA, MH.

2. Approval of the Minutes from the Previous Meeting

The minutes from the meetings from 10th June and 8th July were both reviewed and approved.

3. PPG Newsletter

LS reported that although our Facebook provider can confirm how many times the newsletter appeared on our members feed, but they can not confirm how many accessed the newsletter via the link. Discussed that the group would aim for the next publication of Newsletter 3 to be available for December 2025.

4. Cam Warren, Lead Advanced Care Practioner – Q&A Session

CW attended the meeting and shared with the group details relating to the role of the Advanced Care Practitioner (ACP) and Nurse Practitioners (NPs) and the scope of their clinical work. There are 4 ACPs (paramedic background) and 2 NPs at the Surgery. They all have, or are studying a Masters Level Degree in Advanced Professional Practice, which includes a module relating to the prescribing of medications. ACPs and NPs predominantly support same day conditions and acute minor illness, as opposed to long term health issues. They do cover some routine work, but this is mainly related to patients requiring home visits or who are housebound. Prescribing for ACPs/NPs is restricted and mainly focussed around medicines to treat infections and acute issues and minor illness.

CW and LS discussed the clinical triage protocol used by the Practice, which is the protocol that is applied to decide whether a patient has been assessed as needing acute / soon care, usually with a maximum wait of 2 days, or whether the health matter is a longer term issue that can be managed as part of our routine wait arrangements. LS confirmed that ALL medical requests, regardless of whether the patient contacts the Practice on the phone, in person, or on-line, are reviewed by a GP or Senior ACP. The decision regarding care and waiting time is not decided by the reception team. Requests are reviewed and assigned as red, amber or green according to urgency; with routine waits currently approximately 6 weeks.

5. Missed Appointments

LS had shared the figures prior to the meeting, which are still showing a high level of wasted clinical resource. The Practice has a robust policy that it follows by first inviting the patient to

let us know what support we can offer to help their attendance through to notifying them that they may be removed from the Practice list if they continue to fail to attend appointments without notification. There are some exceptions where we would not take this action, for example, individuals on a safeguarding register or vulnerable adults.

6. Flu and Covid Clinic

LS confirmed that the first of our clinics is taking place at Queens Square on 10/10/25. This will be our first dual clinic, where we will be giving both vaccines. SH raised a concern regarding the invitations sent to patient to book an appointment, as this was restricted for some patients and not others; LS agreed to investigate this concern.

7. Local Support Groups

L-AH confirmed that the current information included in the newsletter was accurate and up to date.

8. General Medical Services Contract Update

LS reported to the group that there are new contract changes that have become effective from today (1/10/25) that include the following 3 changes:

- All on-line forms must stay open for non-urgent routine matters between the hours of 8am – 6.30pm. This is a significant concern to the Practice as without an 'off switch' the Practice is likely to become overwhelmed with demand, which creates patient risk and staff burn-out. This was our experience previously, when the decision was then made to restrict the hours that patients could access on-line forms.
- The Practice must include the new patients charter on its website You and Your General Practice. This can be found on the front page of the website.
- GP Connect must be turned on this enables other 3rd party health and social care
 providers to upload coded and consultation information into the patients clinical record.
 The Practice has introduced a system whereby it will be able to check all entries for
 accuracy before the 3rd party record is saved.

9. Reception Telephone Services

The Practice will be changing its reception telephone services in November, which should positively impact on our staff without affecting patient quality or access. This was discussed as a restricted item due to the sensitivity relating to some employed members of the Practice team. This item has therefore not been fully minuted.

10. New GP Recruitment

LS reported that Dr Jen Cole has sadly left the Practice to relocate to be closer to her family. Dr Mariana Devesa and Dr Karthik Iderapalli have both been appointed and are in post. Dr Cole worked 2.5 days per week and Dr Devesa and Dr Iderapalli will be working 6 days between them; this has therefore increased the GP cover at the Practice.

11. Practice Open Morning

This has been postponed until the new year and LS is hoping to co-ordinate with some voluntary sector interest as well as PPG representation.

12. AOB

PPG Members agreed that the next meeting should be predominantly dedicated to the Patient Survey results and development of an action plan.

13. Date and Time of Next Meeting

The next meeting will take place on 4^{th} November 13.00-14.30 at Station Road Surgery.