



**ATTLEBOROUGH SURGERIES**

**PPG NEWSLETTER NO. 3 DECEMBER 2025**

## MESSAGE FROM THE PPG CHAIR

Working with Attleborough Surgeries, we are pleased to publish our third *PPG Newsletter* following our April and August 2025 issues, which can still be viewed on the Surgeries' website if required.\*

This issue contains two important articles describing the day-to-day work of the GPs and the role of the Advanced Care Practitioners within the Practice, and we trust you will find both articles to be interesting and informative.

We also look at the growing problem of missed appointments and discuss the Practice's action plan in response to the patient survey carried out earlier this year.

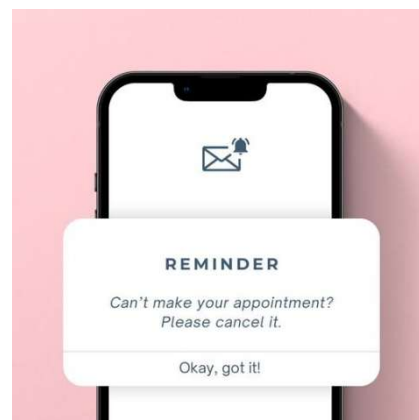
The full contents are as follows:

- A Day in the Life of a GP
- An update on Missed Appointments
- The role of an Advanced Care Practitioner in a GP Practice
- Patient Survey – an Action Plan
- Local Support Groups

Best Wishes,

David Branson,

Chair



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To find out more about the PPG, its key aims, its terms of reference, and how to become a member, simply visit the **Patient Participation Group (PPG)** section of the Surgeries' website.\*

You can also contact the PPG at [nw1cb.d82034.ppg@nhs.net](mailto:nw1cb.d82034.ppg@nhs.net)

### Christmas and New Year

Please note that the surgeries will be closed on the following dates:

- 25 December – Christmas Day
- 26 December – Boxing Day
- 1 January – New Year's Day

If you need non-emergency help on those days, go to [111.nhs.uk](https://111.nhs.uk) or call 111.

In a medical or mental health emergency, call 999.

The Norwich Walk-In Centre is located at Rouen House, NR1 1RB. Tel: 01603 677500. This service is available from 07.00am – 7.00pm, seven days a week, and will be open as usual during the festive season.

\* <https://practice365.co.uk/d82034/practice-information/join-our-patient-participation-group-ppg/>

# A DAY IN THE LIFE OF A GP AT ATTLEBOROUGH SURGERY

## Introduction

The Practice often receives feedback regarding its GPs expressing concern that they are not working hard for patients, and that it often proves difficult to arrange an appointment to see a GP.

In this article, we will attempt to give some background on current GP staffing, followed by a look at a typical working day for a GP.

## Background

The Practice currently has 11 GPs, including Dr Mariana Devesa and Dr Karthik Iderapalli, who have both recently joined following Dr Jen Cole's relocation to be closer to her family. There are also two to three GP Registrars<sup>1</sup> in the Surgery at any one time, who see up to 18 patients per day on their days of working, and also support home visits.

As eight GPs work on part-time contracts<sup>2</sup>, the number actually present in the Surgery varies each day, but is higher on Mondays and Fridays than on other days. The Practice also employs seven Advanced Care Practitioners, five of whom are able to issue prescriptions, so should be considered to be part of the overall senior clinical care complement of practitioners within the Practice.

## A typical working day

A normal day for one of the Attleborough GPs is a start before 8am, often working beyond 6.30pm, and frequently working additional time outside of main office hours to complete clinical admin. Alongside seeing patients, the GPs need to review and authorise often over 300 prescriptions per day, review 100 laboratory test results and decide on action for those which fall outside of normal ranges. They also review and manage actions arising from letters sent from hospitals and other health and social care providers.

The GPs will also complete home visits, communicate with the coroner and district nurses, liaise with families caring for loved ones with palliative care needs, arrange acute hospital admissions, and support the extensive team of clinical staff within the Practice.

This is not a full list of their activities, but gives an idea of the many responsibilities they have each day in addition to seeing patients and reviewing and responding to over 25 health request forms, many of which can be for people with complex and multiple long-term conditions, suffering life-threatening illness and those with serious mental health concerns.

The Same-Day Clinic Team, including a duty GP, can deal with upwards of 150 urgent requests per day, requiring exceptional skill in decision-making to manage the health concerns, risk and priorities for patients. The Practice also has responsibility for over 240 care home patients, as it is one of the highest-populated care home Practices in Norfolk.

## Conclusion

The Practice's GPs are a precious resource, being the most qualified and experienced of the overall clinical team. It is hoped that through a better understanding of the wide, complex and extensive workload and responsibilities that GPs deal with each day, patients can appreciate just how hard the doctors are working, and their unequivocal commitment to those within their care.

## Notes

1: A GP Registrar is a fully qualified doctor who is in the final stages of their specialist training to become a GP. They work under supervision in the Surgery and are able to diagnose and treat patients, prescribe medication, and perform a wide range of duties, similar to a fully qualified GP.

2: Very few GPs now choose to work full-time, due to both burnout and a desire to have a reasonable work-life balance. During the Practice's most recent recruitment round, all the GPs interviewed were only interested in part-time working. No contracted hours for GPs are worked from home.

## MISSED APPOINTMENTS – JAN–OCT 2025

As shown below, the number of face-to-face appointments that went unused due to missed appointments in January to October this year continues to be of concern. **1713** appointments in total were missed, resulting in **465** hours of lost time.



Month	Number of Appointments Missed	Time Lost (hours)
Jan	199	53
Feb	156	44
Mar	149	38
Apr	150	42
May	158	45
Jun	174	50
Jul	190	55
Aug	136	35
Sep	220	64
Oct	181**	39**
Nov		
Dec		
<b>TOTAL</b>	<b>1713</b>	<b>465</b>

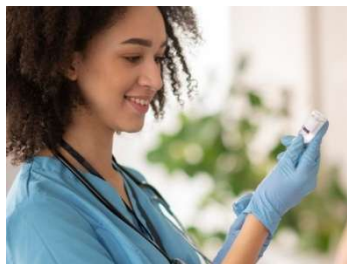


\*\* In addition to the October numbers shown above, 96 confirmed appointments for the flu clinic held that month were also missed, and not cancelled. These were shorter duration appointments but still resulted in a further 3.2 hours of time lost.

We appreciate that, due to high demand and fully booked schedules, patients may sometimes be declined an appointment. It's therefore incredibly disappointing when those with an appointment miss their booked time without letting the surgery know. This prevents another patient from being seen.

**Please remember:** If you can't attend, do cancel your appointment, so that it can be offered to someone else in need! Thank you for your understanding and cooperation.

# THE ROLE OF AN ADVANCED CARE PRACTITIONER IN A GP PRACTICE



We were delighted to welcome Cameron, the Lead Advanced Care Practitioner (ACP), to one of our recent PPG meetings and wanted to share more widely the information we were given about the role of the ACP and Nurse Practitioners (NPs) working in a GP Practice.

## Role of an ACP/NP

Attleborough Surgeries are fortunate in being able to employ four ACPs (who have paramedic backgrounds) and three Nurse Practitioners (who have nurse backgrounds) as part of their senior clinical complement. Both ACPs and NPs are required to study for a master's degree in Advanced Professional Practice, which includes a module relating to the prescribing of medications. Three of our team have fully completed their qualifications, with the remaining practitioners being at various stages in their studies, with two of them due to complete within the next 12 months.

These clinicians predominantly support same-day conditions and acute minor illness, as opposed to long-term health issues. They also cover some routine work, but this is mainly related to patients requiring home visits or who are housebound. Our ACPs/NPs do prescribe medications but this is mainly focused on medicines to treat infections, acute issues and minor illness.

## Qualifications and Training:

- required to already hold a degree in their chosen clinical profession
- have a minimum of three years' post-graduate experience prior to commencing in post, and have been accepted to study at master's degree level
- will undertake regular clinical professional development both formally sourced as well as through informal delivery within the GP Practice environment

## Limitations:

The 'scope of practice' for ACPs/NPs (the set of activities in which they are deemed competent and permitted to perform based on their education, skills, and experience) generally excludes the management of complex long-term conditions, and their expertise lies in the assessment, diagnosis and treatment of acute issues and minor illness. Attleborough Surgeries are fortunate in employing two NPs that have a special interest, with extended qualifications, in both women's health and diabetes.

- ACPs/NPs work to their scope of practice, the majority of which is centred on the management of same-day presentations.
- Prescribing by an ACP/NP is limited to those who have successfully completed the prescribing module within the master's qualification, with the scope of prescribing being limited to each individual's personal list of approved medicines (known as a 'formulary arrangement'), which is reviewed and updated regularly.

ACPs/NPs work as part of the same-day clinical team and therefore always have access to a GP to support them with any queries they may have regarding patient management and prescribing.

*We hope you find this information as helpful and informative as we did in better understanding the role of the ACP/NP team at Attleborough Surgeries.*

# PATIENT SURVEY – AN ACTION PLAN

## Background

As reported in *PPG Newsletter* No.2, SMS text messages were sent out in February this year inviting 2,000 patients to complete an online patient survey. The results appeared in that issue, and we were delighted that of the 14 areas examined, 71% received a very positive response regarding patients' experience with the Practice.

However, we undertook to review the four areas that scored the lowest rate of satisfaction and to then work with the Practice to develop an action plan to address those areas, focusing on opportunities for improvement and methods for helping inform patients of other steps that they can choose to take in order to support and manage their own health.

Our findings were as follows:

## Telephone answering

Rating	Causes	Actions taken
<b>62%</b> of respondents rated this as Poor–Fair.	This was exacerbated by prolonged periods of staff sickness and high demand.	<ul style="list-style-type: none"><li>• Callback service introduced to save time waiting in a queue.</li><li>• From 12 November, calls in the period 8.00am–2.00pm are being answered by CalleeAST, an outsourced call centre which manages non-emergency call handling for the East of England Ambulance Service. They offer a much larger number of call handlers, all of whom have access to the surgeries' IT systems. After 2.00pm, calls will be answered by the surgeries.</li><li>• The above improvements should result in calls being answered much more quickly.</li></ul>

## Appointment wait – acutely unwell

Rating	Causes	Actions taken
<b>67%</b> of respondents rated this as Poor–Fair.	This was exacerbated by high levels of demand.	<ul style="list-style-type: none"><li>• All appointment and treatment requests – including those made by phone – are logged using the online request form. These are then individually assessed (triaged) by a GP or Advanced Care Practitioner who looks carefully at the symptoms reported in order to establish which requests require urgent attention/immediate treatment.</li><li>• In clinically urgent cases, same-day appointments may be given, or if resources don't allow, the patient may be referred to the walk-in centre, 111, 999 or A&amp;E.</li><li>• For less urgent cases, patients may be referred to the local pharmacy (the Pharmacy First initiative).</li><li>• Additional GPs and a Nurse Practitioner have been recruited, resulting in an extra four days per week of senior clinical care.</li><li>• Six additional face-to-face appointments were made available as part of the GP day from the beginning of November.</li></ul>

## Appointment wait – routine health matter

Rating	Causes	Actions taken
<b>69%</b> of respondents rated this as Poor–Fair.	This was exacerbated by high levels of demand.	<ul style="list-style-type: none"> <li>All appointment and treatment requests – including those made by phone – are logged using the online request form. These are then individually assessed (triaged) by a GP or Advanced Care Practitioner to establish which requests require urgent attention/treatment.</li> <li>Appointments are then allocated in priority order, but given the limited resources available, non-urgent cases may have a 4–6 week wait. For minor issues, patients may find it quicker to visit the local pharmacy (the Pharmacy First initiative) or the walk-in centre.</li> <li>From September, additional GP resource has been allocated focusing on assessing and quickly clearing more routine requests for Fit Notes, prescriptions and admin. queries etc. which make up 30–40% of the online request forms. This has reduced the impact on appointment booking.</li> <li>Greater use of nurses and Advanced Care Practitioners/ Nurse Practitioners to see patients when a GP is not required has helped to reduce appointment delays.</li> </ul>

## Continuity of care

Rating	Causes	Actions taken
<b>54%</b> of respondents rated this as Poor–Fair.	Due to limited resources, requests to see a specific GP can result in long delays, especially as many GPs are on part-time contracts.	<ul style="list-style-type: none"> <li>After requests are individually assessed (triaged) by a GP or Advanced Care Practitioner, where appropriate an appointment will be booked for the patient to see or speak to their regular GP, if available. However, to avoid delays, it may be necessary to see another GP or another member of the clinical care team.</li> <li>For follow-up appointments, it may be a requirement to see the same GP as before, but again, delays may occur.</li> <li>For routine appointments, it is not necessary to see the same GP.</li> </ul>

The Practice is aware that access is an extremely important issue for its patients, and the findings of the survey mirror the concerns and frustrations felt by patients across many other parts of the UK.

There are two additional steps that patients can take to help reduce the pressure on appointment booking:

1: Please be very clear in describing your symptoms when completing the online form. This will help in assessing who you should be seen by and how quickly.

2: If you are unable to keep your appointment, please cancel it so that another patient can be seen. The Missed Appointments figures reported in this *PPG Newsletter* show the high numbers which are continuing to occur, which add to the long waits to be seen.

## LOCAL SUPPORT GROUPS



Name	Location	Details/Contact
St Marys Church	Church Street	<p><u>Drop-in and Share Table:</u></p> <p>People bring donated food in and this is free to take for anyone who is finding it hard to manage. The Town Council also provides an annual grant to help purchase food for the share table.</p> <p>Thursdays 11.00am–12.00 noon, and Saturdays 10.00am–11.30am.</p> <p><u>Lunch Club:</u></p> <p>Held monthly on 1st, 3rd and 5th Friday at 12.00 noon, and costs £6. Booking for lunch is essential – please phone 01953 454977.</p> <p>Website: <a href="http://www.attleboroughchurch.org.uk/community-groups.html">www.attleboroughchurch.org.uk/community-groups.html</a></p>
The Chambers Community Café	Town Hall, Queen's Square	<p>Share a cuppa or a bite to eat, socialise and meet new people.</p> <p>Sundays, 12.00 noon–2.00pm, and Thursdays, 11.00am–2.00pm. Signposting to various services providing help, support and advice, if required, is supplied on Thursdays. (Both days are sponsored by local businesses.)</p> <p>Facebook: <a href="https://www.facebook.com/groups/125291828181676/user/100068623161292/">www.facebook.com/groups/125291828181676/user/100068623161292/</a></p>
The Kindness Cabin (social shop)	Car Park, Queen's Square	<p>Nominal joining fee – then food can be purchased at subsidised prices.</p> <p>Members are entitled to free fruit and veg, bread and bakery items, and sanitary products, all as part of the Food Waste Scheme.</p> <p>Tuesdays 6.00pm–8.00pm, Thursdays and Sundays 10.00am–12.00 noon.</p> <p>Contact: Elaine Easthope or Clair Fisher at <a href="mailto:alittlemorekindness@hotmail.com">alittlemorekindness@hotmail.com</a></p> <p>Facebook: <a href="https://www.facebook.com/groups/586982843522161/">www.facebook.com/groups/586982843522161/</a></p>
The Kindness Café	Connaught Hall	<p>Free lunch.</p> <p>Run by volunteers using donated food (including supplies from the Kindness Cabin).</p> <p>Thursdays, 12.30pm–3.00pm.</p>
The Lighthouse (Attleborough foodbank)	131 Hargham Road	<p>Foodbank sessions are held on Tuesday mornings, 10.00am–11.00am, with a specialist Citizen's Advice worker on hand to answer queries.</p> <p>Website: <a href="http://www.thelighthouseattleborough.co.uk/groups/foodbank">www.thelighthouseattleborough.co.uk/groups/foodbank</a></p>

## FUTURE SURGERY EVENTS

DEC	JAN	FEB
Action Against Domestic Violence – Eliminating violence against women	Dry January – Challenging you to go alcohol-free for 31 days	Heart Month – Learn about cholesterol and adjust your lifestyle for a healthy heart