

## MINUTES OF A PATIENT REPRESENTATIVE TEAM MEETING HELD ON 25 JUNE 2025

Present: Margaret Barton (MEB), Megan Birch (MB), Bob Cooper (BC), Janet Copeland (JC), Tina Coulson (TC), Sheila Drury (SD), Marion Hellmuth (MH), Pat Osbourne (PO), Sheila Shepherd (SS)

## **Action**

1 & 2	Welcome and Apologies.	
	BC welcomed all to the meeting.	
	Apologies had been received from Jan Leftley, who sadly will be resigning from the PPT after many years of being a much value member.	
	SD advised that a potential new member is unable to join us at the present time.	
3.	Guest Speaker	
	Lauren Hillyard, a member of the practice Physician Associate (PA) team was welcomed to the meeting and gave an outline of her duties and the role of a PA.	
	Physician Associates are medically trained and registered with, and regulated by, the General Medical Council. They are not doctors and assist in, rather than control, the management of patients. They are supervised by a practice GP and discuss all patients seen at the end of each day.	
	PAs have acute and emergency training in chronic conditions and manage the triage list, ensuring patients are seen by the most appropriate clinical staff. They interpret medical reports and arrange appropriate action as required. They can request blood and all imaging tests except ionising ones. They can request medication but this is always signed off by a GP.	
	They carry out home visits on their own, in contact with a GP if necessary.	
	PAs complement, not replace, the role of the GP, freeing the doctors to manage more complicated cases.	
	A document "Who are Physician Associates (PAs)?" was circulated at the meeting	
	Lauren and the practice in general would like to raise awareness of their role and BC suggested putting this prominently on the website.	MB
	The PRT thanked Lauren for her time and clear explanation of the PA role and she left the meeting.	

4.	Minutes of the last Meeting & Matters Arising	
	The Minutes of the last meeting were agreed. Actions arising from them not covered by agenda items:	
	(3(9c)) PO has kindly volunteered to approach Boots and Kamsons pharmacies to see if they have any leaflets available for us to use in our waiting rooms.	PO
	(9a) SD asked whether the AI note taker system currently being trialled at the practice is from an authorised software provider. MB confirmed that the system is approved as a Class 1 medical device by the Medicines & Health products Regulatory Agency (MHRA).	
5.	Name Badges	
	Following discussion, it was agreed not to have name badges for the PRT.	
	Please see Item 6 below	
6.	What can a Patient Participation Group do? Terms of Reference	
	BC had previously emailed the PRT a document entitled What can a Patient Participation Group do? Hard copies were also circulated at this meeting.	
	On review, it was apparent that the PHMG PPG do not engage as much as other practices' groups do. SD felt that since covid the role of the PPG has somewhat diminished and that the practice has a resource available that perhaps could be utilised more.	
	BC suggested we could help at flu/covid vaccination clinics (in which case, name badges may be appropriate).	
	MG advised that other surgeries PPGs offer health walks and coffee mornings with guest speakers aimed at particular groups.	
	This will be an agenda item at the next PRT meeting.	вс
7.	Virtual Patient Participation Team (VPPT)	
	There are 104 patients who are members of the VPPT.	
	A survey had been sent out recently regarding the new telephone system, only 7 replies received. It may, of course, be that members had not phoned in since the new system was installed.	
8.	Staff	
	There are still 2 medical secretaries on maternity leave, one due back soon.	
	One of our Physician Associates, Nathan, is relocating to Devon and will be leaving the practice at the end of July. A new salaried GP will be recruited instead of a PA.	
	Dr Deakin's last day is 27 <sup>th</sup> June. Dr George Rajasekar will replace him as a Partner.	

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	<ul> <li>Dr Priya Ganeshkumar, one of our Partners, is retiring. Interviews will take place shortly to recruit a new Partner GP to cover the sessions Dr Ganeshkumar did.</li> <li>Another practice nurse is being recruited to provide additional hours.</li> </ul>	
9.	Updates from Megan	
	MB showed information slides which gave data available from the new telephone system which went live on 3 <sup>rd</sup> June. This is a vast improvement on the old system and allows for much greater monitoring.	
	The Management summary for May 2025 was circulated, along with details of patients per FTE GP.	
10.	Changes to the GP Contract 2025/26	
	TC/MB are hoping to conduct a full review of the appointments system before the GP contract changes come into force in October. However, with all the GP changes happening at the practice, this is proving difficult. NHS England has not provided any information on how the mandate for full online access throughout the day will work.	
	As and when this new online element goes live, it is hoped members of the PRT will demonstrate it.	
	SS asked whether an AI Traffic Light system has been considered. MB said that these are very expensive and with some limitations, e.g. no free text options. MB will continue to keep abreast of new systems.	
10a.	Communication with Doctors	
	TC confirmed that the doctors are now using the Patient Reply option on text messages.	
11.	Compliments and Complaints	
	The number of complaints received has been reduced since the last PRT meeting, possibly due to the new phone system. Most are regarding capacity issues . The BMA Safe Working Guidance advises that a GP should have no more than 25 patient contacts per day, this includes in person, telephone, text and home visits. At present, we are unable to meet these guidelines but can't deviate much from them. A major objective must be to prevent GP burn out. The demand now is too great for the practice to safely cope with all appointment requests.	
12.	Any other business	
	a) Network PPG – BC advised:	
	<ul> <li>There are 150 surgeries across West &amp; East Sussex, &amp; Brighton that make up the network.</li> <li>The next PPG Network meeting is on the 24th of July from 2-4 pm. He has</li> </ul>	
	sent a copy of the email that he received from Dawn Bamforth to PRT members for information.  • The website is <a href="https://www.sussex.ics.nhs.uk">www.sussex.ics.nhs.uk</a> . Follow the links. The "Join the	
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		meeting now" information is on the email.		
	b)	Does the PRT ever meet with other practices groups? No, but Tina attends various West Sussex Practice Managers meetings and conferences.		
		MB explained that the emphasis now is on neighbourhood working and PHMG has always had good relationships with other GP practices in our area.		
		PO had seen online that you can check how your surgery is doing against others and PHMG compares very favourably. MB will share the league tables from the next national survey when available.	MB	
	c)	SD advised of a new community diagnostic centre that is due to open this summer. The centre is being funded by NHS England and will be based in the Belfry Shopping Centre in Redhill. It is expected to carry out 40,000 tests in its first year, reducing the wait times for patients in Surrey and Sussex. Once operational, the centre will offer a 12-hour, seven-day-a-week service providing tests such as CT scans, X-rays, ECGs, ultrasounds and blood and respiratory checks. GPs will be able to refer patients directly. The new centre will be in addition to the existing services offered at Crawley Hospital.		
	d)	Tina advised that from September a GP Partner will attend the PRT meetings on a rota basis.	TC	
13.	Da	te of next meeting		
	Discussion took place as to whether some of the PRT meetings should be held in the evening in an effort to attract more members. It was decided that the summer meetings, i.e. June and September, will trial meetings to be held at 18.00 – 20.00. Winter meetings, December and March, will still be held at 12.00 – 14.00.			
	ра	te of next meeting: Monday 22 <sup>nd</sup> September 2025 18.00 – 20.00		