

Stockbridge & Broughton Surgery PPG

Minutes of meeting held on Wednesday 30th July 2025 6:30pm Stockbridge Town Hall

Present

Andrew Brock (Chair) [AB], Ann Spooner (Practice Manager) [AS], Dr Claire Walsh (GP Partner) [CW], Isabelle Assali-Reeve (IAR) Sheila Fitzpatrick [SF], Beryl Pratley [BP] and Audrey Watts

Observers/potential new members: Rebecca Grainger [RG], Ally Boulton

Apologies: Peter Storey, Alison Deverill

Introduction

The meeting commenced promptly with a warm welcome extended to both regular members and new attendees alike and an exchanging of brief introductions and overview for the meeting.

Standing Items

- a. Minutes of the meeting held on 24th April 2025 were agreed.
- b. All actions from previous meeting had been completed.

1. Surgery Update

A briefing document was supplied by AS (attached along with Practice info graphic) which provides further information to the points detailed below:

- a. Patient Feedback demonstrated consistent Patient experience as Good (91% same as last year) and generally high across the board. However, it was noted that ease of contacting the Practice via the website was relatively low (71%) though notably above the national average (51%) and the ICS (48%). That said, the Practice prefers contacts in person and by phone. AS stated that responding to feedback requires patient identification, and opting out of survey messages also stops text reminders, since both systems are connected.
- b. There were queries about the answering system at weekends with calls being cut off, repetitions in calls between options and differing voices. This will be reviewed by the Practice Action: AS And tested by the PPG in particular noting:
 - 1. Time of the call as we have different messages depending on the time of
 - 2. Which number was called e.g. Stockbridge or Broughton.
 - 3. What options, if any, were chosen

Action: PPG

c. **Broughton surgery:** Planned footpath between surgery and village car park on School Lane and its route has been agreed. Broughton PC are contributing towards the cost; work is planned for later in August.

No progress is currently possible on the ownership of the land adjoining the surgery.

The Practice has been asked by Broughton Parish Council to comment on the impact of a possible additional 45 houses being built as a result of the required revision in TVBC's Local Plan. This will be discussed by the GP Partners at their next meeting **Action: AS**

2. Broughton Parish Council land ownership and Car Park footpath to Surgery Covered in Practice report

3. HIOW PPG/National Association of Patient Participation Groups update

AB reported on the last Forum. Main issues concerned consistency of care, and the impact of the NHS 10-year plan. Noted that the "Plan" contains no measurable targets or timelines. Point of interest – use of Artificial Intelligence (AI) in primary care.

CW reported on initial trials of AI in the surgery:

- For letters from doctors. Need to trial and find the best provider. New software appearing all the time. RG has professional interest and noted there will be some pre-approved apps for NHS use.
- Trial of transcript service from consultations. Appears to be potentially a significant time and resource saver, but significant data concerns, and need for awareness training for staff and patients.
- SF enquired about possibility of triaging emails.
 Current need to code letters from hospitals in the surgery a highly skilled job for staff. Query as to why the hospitals/consultants don't code the letters upfront to pre-empt this requirement. Action: AS to encourage letters to be sent out precoded from hospitals/consultants.
- Future use of Al chatbots for initial "consultations", possibly to ease the process of referral to the right person.

4. NHS 10-year Plan and potential impact/opportunities for the Practice

AS had previously pointed out that there was no definition of "neighbourhood". The Plan envisages a baseline community of 50K people (PCN level), but the potential complication is that this is formed of multi-neighbourhoods with larger populations spread out over a large geographical area as is the case with mid-Hampshire Healthcare. It was noted that the current plans for local authority re-organisation as part of Hampshire moving to a unitary council may have further impact on the arrangements as there is no alignment. It is noted that HIOW NHS Trust is also seeking clarification.

Other Issues related to

- "Digital Health" as the future focus, especially related to records, and how data is controlled when not generated by the practice
- AS felt the Practice is well positioned to co-operate with others on change and improvements
- AB noted Section 106 funding is also supposed to be available for Practices as part of this 10-year plans in conjunction with housing plans

The Practice will nevertheless continue to look at various strategies and plans to both deliver on the 10-year Plan and maximise on opportunities as the 10-year plan moves from

what is clearly aspirational to more deliverable once it has more clarity on how it can be delivered in practice. **Action: All (ongoing)**

5. Surgery protocol regarding discharge notes from Hospital

The Practice commented that there is variation in hospital practice, and the time taken to send discharge notes. However, the Practice will always try to assist, and patients may therefore need to ask GP for help and not wait for letters. However, it is important to note that medication on discharge should be provided by the hospital, and the Practice cannot be expected to step in and supply at short notice; the current 5 working day lead time for prescriptions still needs to be applied.

6. Practice Private Charges and Timings

The Practice is not a private doctor service and cannot give priority to privately funded requests, and will only undertake private activity as permitted in their contract, such as travel vaccinations, licence medicals insurance certificates etc. Timescale for action is typically 2-4 weeks, though patients should allow 4 weeks for completion and the scale of charges is on the Practice website.

7. Patient records for non-essential treatment

Some patients decline routine medications like statins after consulting with their GP, yet these are still marked as "refused" so the practice can receive incentive payments. This may affect medical insurance. BP questioned the pursuit of incentive funds, and CW noted it is intended to improve consistency across regions – especially on health campaigns such as statins. That said it was also noted that the Nurse Practitioner has recommended statins whilst the GP (at that time) was not, so some uncertainty remains.

8. PPG Hello from other Practice Partners

The PPG members appreciate the combined contact of Drs Walsh and Dougall at meetings and from Dr Rosser on occasion but felt it would be good for all Partners to get involved with the PPG so that there was better understanding and appreciation all round. **Action: Agreed** The spring meeting will be targeted for a Tuesday evening in the hope that other Partners can attend, as a courtesy. It is noted however that the primary Practice Partner liaison for the PPG remains with Drs Walsh and Dougal.

9. AOB

CW advised that the Practice intends to redecorate the reception area of Stockbridge surgery and thought it would be a nice idea to include as part of the revamp to display of local artist's work. The PPG were very supportive of this initiative and felt that they could easily facilitate this. Further details once a timetable for the renovation is confirmed.

Action: ALL

10. Date and Time of Next Meeting

Thursday 16th October 6:30pm Stockbridge Surgery

Acronyms Used

HIOW: Hampshire Isle of Wight ICS: Integrated Care System

PC: Parish Council

PCN: Primary Care Network

Stockbridge Practice Update to PPG – 30 July 2025

Patient Feedback

We were pleased with the recent Patient Survey results. This survey is sent randomly to patients. The results can be accessed <u>here.</u>

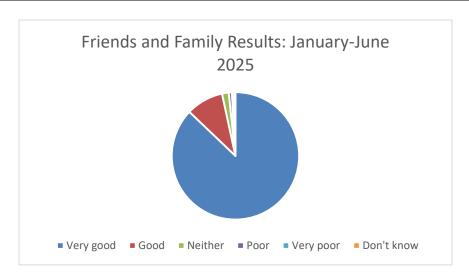
91% of patients who responded said they found their experience of the surgery to be good. This is the same as last year.

We saw increases in patients finding it easy to contact us via our website and the NHS App. Use of online services saw increases in all areas e.g. booking appointments, requesting medication etc.

There were slight decreases in patients finding it easy to contact us by telephone (but still 84% of patients found it easy) and a significant decrease in patients being able to see or speak to their preferred GP always / a lot of the time. As the survey is a random selection of patients who may or may not have contacted us recently it is difficult to understand these year-on-year trends.

We are required to ask patients for 'Friends and Family feedback' following an appointment. We do this by text message. Patients can also complete the survey on paper. Results continue to be positive each month:

	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25
Very good	585	507	509	620	515	489
Good	87	53	51	69	50	41
Neither	10	8	7	15	5	17
Poor	3	5	3	5	6	8
Very poor	6	1	2	3	2	4
Don't know	2	3	0	3	5	2



Broughton Footpath

We have now had approval from the Broughton Parish Council for the footpath and a contribution from them towards the cost. We are siting the path next to the Doctor's parking space so we do not lose any parking spaces as this would have an ongoing detrimental financial impact on the practice.

We are currently discussing dates for the work to go ahead.

Broughton new houses

We have also been asked by a member of the Broughton Parish Council to comment on the impact of a possible additional 45 houses being built. This will be discussed by the GP Partners at their next meeting.

GP PATIENT SURVEY

Results from the 2025 survey

Practice details

Stockbridge Surgery

New Street, Stockbridge, SO20 6HG

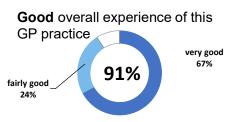
J82016 Practice code

250 surveys sent out

119 surveys sent back

48% completion rate

Overall experience



		Very Good	Fairly Good
National	75%	44%	31%
ICS	73%	41%	31%

Comparisons with National results or those of the ICS (Integrated Care System) are indicative only, and may not be statistically significant.

Data by Ipsos

Stockbridge Surgery

NHS

Accessing the practice















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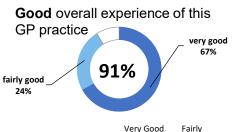
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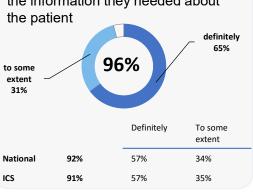
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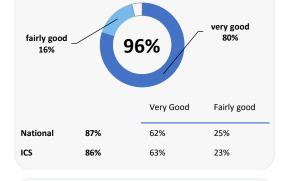


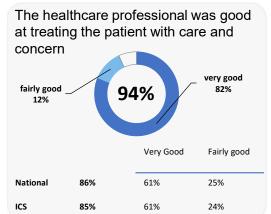
Experience at last appointment

The healthcare professional had all the information they needed about the patient



The healthcare professional was good at listening to the patient





The patient was involved as much as they wanted to be in decisions about their care and treatment

