Stockbridge & Broughton Surgery PPG

Minutes of meeting held on Thursday 16 October 2025 at 6.30pm Stockbridge Surgery

Present
Andrew Brock (Chair) (AB), Ann Spooner (Practice Manager) (AS), Dr Natalie Avery (GP Partner) (NA), Dr Will Dougal (GP Partner), Isabelle Assali-Reeve, Sheila Fitzpatrick (SF), Alison Deverill, Beryl Pratley (BP) and Peter Storey (PS)

Apologies: Audrey Watts, Rebecca Granger, Tracy Greenfield

Introduction
We were not able to welcome our two newest members of the PPG but were able to welcome Dr Natalie Avery one of the other Practice partners for the first time. The meeting commenced promptly with all exchanging brief introductions and overview for the meeting. SF mentioned that there is another potential new PPG member from King's Somborne which AB will follow-up. **Action AB**

Standing Items

a. Minutes of the meeting held on 30 July 2025 were agreed by those present at that meeting.
b. Action points had been completed save for
    i The communication to hospitals and consultants regarding precoding letters to allow faster administration and filing in the Practice. This is because this had been tried previously without success and more over as NA pointed out the Practice was still receiving letters addressed to doctors that had long left the practice and retired.
    ii Redecoration of Stockbridge Surgery (and its associated artwork) date to be provided in due course **Action: AS**
    iii The automated call answering system which we tested had also been further reviewed and an automated check and cancel appointment feature added, though none of the PPG had yet had an opportunity to test.

1. **Surgery Update**
A briefing document was supplied by AS (attached) which provides further information to the points detailed below:
    a. The new foot path at Broughton has been a great success and the Practice is looking to install solar lights to facilitate it's use when the clocks go back at the end of the month **Action: AS**
    b. Practice is well advanced in its Covid and Flu vaccinations campaign with more than 1800 vaccinations to date. There has been concern raised by patients regarding the Covid vaccination only available on the NHS to patients aged 75 and over (other than immunocompromised). SF advised that private Covid vaccination is available through participating pharmacies as well as Boots, the former being up to £20 cheaper

c. Government requires each Practice to have a GP Charter with patients being able to contact their practice online during opening hours. The Practice already exceeds this requirement with eConsult accessible from Mondays at 8am to Fridays at 6.30pm.
d. Stockbridge Surgery is trialling and assessing open all day capability.
e. One of the GP Trainees is to try and achieve practice accreditation for "Active Practice". Any ideas very welcome**. Action: ALL**

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

AB reported on the latest from the Group which is on the roll-out of "Digital Care Coordinators". This service is supposed to improve the uptake of the NHS App by Patients and Practices. However, the information provided is incomplete and it is not clear how this is funded or provisioned. AB has already gone back to query how this will work in practice and also given that in Hampshire and IOW (let alone hospitals outside of the area) the origin of the actual data is across disparate systems. North Hampshire Hospitals Trust alone for example uses differing systems – but only one currently interfaces with the NHS App as a patient you may need to use one or more other NHS systems to get the full picture.

3. Practice SLA with 3rd party patient communications requiring Practice activity

At times, medical data can sometimes appear on the NHS App accessible by the patient before medical staff have had the opportunity to talk it through with the patient - which can of course be upsetting for the patient.

Otherwise, the Practice relies on receiving 3rd party patient information in a timely manner from Hospitals and Consultants which is then manually coded Red (urgent Doctor referral/action required) Amber (relevant Patient information) or data that just needs to be archived (interesting but not pertinent to a Patient's ongoing care). This is a manual exercise by trained Practice employees and is regularly audited to ensure that it works effectively – but there are challenges such as:

- Delays by up to a month in some instances before information is actually sent out to the Practice
- Poor quality information
- Format of incoming messages (most now by email)
- The need for letters to be coded so that they can be retrieved later
- Wrong Patient GP Doctor
- Sheer volume of mail (typically 200+ per day) which can create unintended internal delay

The Practice always tries to ensure that those coded Red are reviewed on the day by a GP with patient follow-up as necessary. AI may well help in this space (the Practice are actively looking at this) but until it has the reliability of human administration, this clearly cannot prevail.

As this topic is linked to 2 (above) the PPG will relay this back to the HIOW PPG (especially as they are pushing Digital Care Coordinators) **Action: AB**

4. Pharmacy Reviews

There was some concern raised that prescriptions may be changed to reduce costs by using other drugs with the same AI. Whilst this is generally true, changes will only occur if it is purely the AI and there are no other implications that may impact the patient. Where dosing (as an example) is an issue with a cheaper drug's applicator, but the drug is to all intents and purposes otherwise identical, then for sure the GP will revert to the more expensive drug to ensure that the Patient is able to receive the correct dose unencumbered.

5. **NHS App data gaps**

   Because of (3) above, there is no way to know for sure if there is a data gap on file for any patient. The only way to be certain is for patients to take responsibility for their data and chase with the Hospital/Consultant and then finally with Practice if the data has been sent. Certain data may also not go on the App – if patients are concerned that this is the case, they may be able to request more visibility from the Practice.

6. **Quick Comms with the Practice**

   When not wishing to have an actual appointment but medical approval is needed (e.g. routine blood test), this can be achieved by using the eConsult Administrative Help (under Routine Requests).

7. **Statins Latest**

   Both Partners confirmed that there was no new thinking on Statins and that some of the online reviews suggesting issues with Statins were unproven with large studies. Nevertheless, patients on statins were kept under review and where problems arose alternative treatments were made available.

8. **PPG and other Practice Partners**

   Dr Nalie Avery joined us this evening which was very welcome and also allowed the PPG to experience other views and of course for the Partners to work with the PPG.

9. **"Election" of PPG secretary**

   This position remained vacant, and PS agreed to step in for this meeting. It is hoped with a number of new PPG members that we can share this out more effectively going forward.

10. **AOB**

    - The on-going use of text messages was discussed concluding that this means of communication with patients was welcomed but inviting an acknowledging response could add significantly to the doctors' workload and was unlikely to be welcomed.
    - Partners have put the planned extension to the front side of the Stockbridge building on hold, mainly due to lack of funding, but also because it didn't really add much more additional space for the Dispensary activity that they have at the moment.
    - This was BP's last meeting as a member of the Group. AB thanked Beryl for her sterling contribution over many years, and all present wished her well for the future.

11. **Date, Venue and Time of Next Meeting**

    14 January 2026 at 6.30pm location to be confirmed.

Acronyms Used

HIOW: Hampshire Isle of Wight
AI : Artificial Intelligence (Item 3)
AI: Active Ingredient (Item 4)
SLA: Service Level Agreement

Surgery Update for Patient Participation Group Meeting
16 October 2025

Path at Broughton
The path linking the public car park and the surgery car park at Broughton has been completed. It has been very useful when we having been doing our large covid & flu clinics. We are looking to get some solar lighting to improve safety in the dark evenings.

Covid & Flu
We have currently given over 1350 flu vaccinations and 501 covid vaccinations. We have another large clinic at Broughton tomorrow (approx. 500 patients) and then further appointments at both sites in November. There were quite a few patients who were disappointed that we could only offer covid vaccination to patients aged 75 and over.

Staffing
We have welcomed a new nurse to the practice, Anna Fairney. She will be working Tuesday, Friday and Saturday mornings following her induction.

You and Your GP Practice Charter
From 1 October 2025 the Government have asked every GP surgery to put a link to the Practice Charter on their website. The Charter sets out what patients can expect from the practice. There has been a strong focus on patients being able to contact their practice online during opening hours. We have had eConsult accessible from Mondays at 8am to Fridays at 6.30pm so we are going above and beyond what is required.

Over the coming weeks we are going to be keeping Stockbridge Surgery open all day e.g. not closing during the lunchtime. We will be changing our opening hours on the website once we have assessed whether the staffing levels are sufficient.

GP Active Practice
Juliet May, one of our GP Trainees is going to do a project to try and get the practice accredited as an Active Practice. In order to be accredited we need to demonstrate we have taken steps in the practice to:

- Reduce sedentary behaviour in staff;
- Reduce sedentary behaviour in patient;
- Increase physical activity in staff;
- Increase physical activity in patients;
- Partner with a local physical activity provider

Any ideas very welcome.