**PRG MEETING – Wednesday 30th July 2025**

Present

Bernadette Conway Practice Manager

Eleanor Horobin Patient Representative

Sandra Pickin Patient Representative

Rianne Norton Communications and Patient Contact Manager (minutes)

Apologies

None received.

Minutes

The minutes from the previous meeting were discussed and agreed.

10 Year Plan

The ICBs are being cut by 50%. They will no longer be the budget commissioners for general practice but will remain the strategic commissioners. We are moving more towards care in the community – known as neighbourhoods. We don’t have a clear idea as yet to what these neighbourhoods are, but they are likely to be managed either by GP Practices or Hospital Trusts – more likely Trusts. Bernie explained that it will be the biggest upheaval in general practice for many years. The BMA (British Medical Association) is now starting to raise concerns as GPs have not been consulted. Within our practice we are making big improvements in the management of chronic diseases – although there is still room for more progress. Bernie also discuss the use of AI within the practice which is bringing about changes in how consultations and referrals are documented.

Practice Index

This is ongoing and it is time consuming setting everything up but it is improving processes and procedures within the practice.

Online Consultations

On 29.07.2025 Bernie, Alison (Reception Team Leader) and Paula (Rota Manager) spent some time with Dr Choudhary looking at how online consultations (PATCHS) works within the practice. If the plan for full online consultations goes live this October then we need to start preparing. We need to look at filtering/triaging the consultations and making sure that they are allocated to the correct person/team. The current provided system automatically RAG (Red Amber Green) rates but is not working as it should. Requests for clinical advice had been sent to reception and admin tasks sent to GPs to action. The system did pick up on some of Red rating consultations but not all of these needed urgent attention.

Call-Back System

This is going well and patients like it. A member of the group advised that they had used the system and provided positive feedback.

Staffing

We will hopefully be interviewing next week for a new ANP (Advanced Nurse Practitioner). We have had three applicants – one of whom came to look around the surgery. She was very suitable for the position.

Pharmacies

We recently had a meeting with the boss at Cohens who are themselves experiencing problems in being unable to obtain medication. They keep very low stock levels and then when they get a prescription they will have to order the medication in from the warehouse. Funding has also changed for pharmacies and sometimes they are having to pay out more for a particular medication than they can claim back. They have therefore had to change their working practices. There are similar issues across many pharmacies. We receive an indicative prescribing budget within the practice, but we still have to carefully manage what we prescribe in relation to cost . The ICBs decide how much practices receive for the services we provide and currently primary care in total receives approximately 7.9% of the overall budget. With the other 92.1% allocated to governance organisations and secondary care.

Meetings

Staff within the practice are required to attend meetings – both internally and externally with different trusts/organisations. Our regular monthly meetings include:

* Palliative care
* Safeguarding
* Clinical Governance
* MDT
* Clinical Support

There will then be additional meetings as required by the ICB.

Accounts

Bernie explained that we recently submitted our accounts, and the practice is operating adequately. We have separated the primary care and secondary care accounts, and we are in the black and managing well.

Comments & Compliments

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| May 2025 | Hemsworth | Patient would like to thank the practice for the care he has received here. |
| May 2025 | Telephone call | Patient wishes to pass on her thanks to Steve and his chaperone (Bridget) for their care and professionalism during her recent appointment – it was much appreciated. |
| May 2025 | Telephone call | Patient called to pass on her thanks to Dr Ahmed referring her for a mammogram. She says they have found something in her right breast but it has been caught early. |
| May 2025 | Hemsworth | Patient would like to pass on thanks to Dr Johnston and reception staff for their kindness. |
| May 2025 | Greenview | Patient came to reception to express her thanks to Kerrie Harkin for helping her on Monday and sorting an appointment with a GP that same day. Well Done Kerrie! |
| May 2025 | Greenview | Pt came to reception to say what a lovely man Dr Herrero is and great GP to have. |
| May 2025 | Hemsworth | Patient would like to say what a wonderful and very kind man Steve is – he would also like to thank reception staff for always been helpful. |
| May 2025 | Email | I would like to express my thanks and appreciation to all those concerned with my colonoscopy on 20.05.25. From my pre-assessment at Pinderfields, to the staff at The Grange who made my appointment, and to check in and reassure me after I had received and read the information sent to me; to the staff who I met on the day of the procedure; and to those who actually carried out and assisted with the procedure; and the recovery and discharge process; I was treated by all with total involvement and with care and concern for my reassurance, comfort and dignity, in a friendly, yet fully professional manner. It was as if the whole process was being carried out by a group of my closest friends, in whom I had total confidence. With the exception of the consumption of the bowel-cleansing preparation, the whole colonoscopy process was far less unpleasant-feeling than I had anticipated, (I had gas and air, but no sedative) and, apart from some residual bloating, as I return to my normal diet, I have had no problems subsequently. Once again, many thanks to all concerned, and I am very grateful that no actual or potential problems were found. |
| May 2025 | Telephone | Patient phoned the practice to change his address which means a change of surgery. He and his wife would like to thank the surgery for everything we do and would like to say the reception team are great always and have been for many years. They really appreciate us. |
| May 2025 | Telephone | Patient says we are the best and he’s a retired GP so he knows – thank you to everyone. |
| June 2025 | Endoscopy | Patient has just phoned and wanted to pass on a massive thank-you on to everyone for the care and appreciation that they have given her here – especially a big thanks to Becky for helping her get the prep out to her in time for her appointment. |
| June 2025 | Endoscopy | Patient wants to pass on his thanks to staff working 25.06.2025 for their care. He had really high blood pressure due to being so worried about the procedure, but he wanted to say how great the nurses were and that the procedure turned out to be not as bad as he had anticipated. Well done team! |

Appointments

A member of the group asked about only having ten minutes for an appointment, especially if you have many difficult medical concerns/illnesses and are being prescribed a lot of different medication. Bernie explained that it is because of the pressure felt by GPs working in general practice today and she appreciates that ten minutes is often not enough. She explained that we have been questioned around the number of appointments available (as have most practices) and so we looked into this as we are always busy. We found that while GPs have time allocated for home visits, these were not being listed as appointments, neither were the home visits carried out by our Home Visiting Nurse, along with the regular weekly appointments at the care home and the online consultations. All of this meant we have not accurately been showing the number of appointments we manage each week. The ICB will just look at our appointment rotas, but we have now started to show these slots as appointments even though it is the same work that we have always been doing. We don’t want the number of appointments we offer to decrease – we want to try and increase them – and if we change all appointments to 15 minutes then this would decrease the number of appointments by 30%. Patient experience does also depend on the clinician and if they are already running behind with a clinic. Clinicians may ask a patient to choose the problem that they feel is most serious or causing them the most concern. If we are care navigating correctly and efficiently then GPs should only be left, seeing the most complex patients and very often these types of patients do need more than ten minutes.

AOB

Bernie explained that she would like to look at opening the old pharmacy as a type of well-being hub and this receive positive feedback from the group. She explained that that due to funding, as well as other historic reasons, there is not enough support readily available for patients, especially those with mental health problems, and this is why when a GP has an appointment with a patient with severe mental health issues it can’t be dealt with in a ten-minute appointment.

She added that there are more resources available now in the local libraries which is great as well as the services provided by the Red Roof Centre in Kinsley.

Bernie explained that she would love for the practice to become more involved within the local community but it is having the time and resources available to help action this.

Bernie also explained that we were rated as the highest in our group of practices in the PCN for our Veteran services, and we are very proud of this achievement.

**Date of next meeting**

**Date: Wednesday 8th September 2025**

**Time: 10am**

**Venue: The Grange Medical Centre**