



## PPG Meeting Minutes - Tuesday 2nd December

Attendees: Matt Davies (Business Partner, Upton Village Surgery), Rebecca Dalby (Operations Manager, Upton Village Surgery), Yvonne Gibson (PPG Chair), Graham Tongue (PPG Vice Chair), Eliza Austin-Lea (PPG Member)

Apologies: Ginny Jones and Christine Hibbert (PPG Members)

Minutes by: Rebecca Dalby

### **1. Welcome and Apologies**

Yvonne welcomed all attendees and took a moment to thank Heather, who has recently stepped down from her long-standing role as PPG secretary, for all her hard work, contributions and commitment to the PPG over the years.

### **2. Minutes approved from previous meeting 10/06/25 and 02/09/25.**

Minutes from previous meeting (s) on 10/06/2025 and 02/09/2025.

Outstanding actions from these minutes:

- Implementation of SMS message to patients to give choice on which hospital they'd like to be referred to. Rebecca advised this hasn't been implemented yet but is on the radar for being started in early 2026.
- Enquiring about previous Youth PPG – Rebecca advised that previous attempts to form a Youth PPG were not successful despite all practices advertising the group and emailing local schools. Eliza kindly offered to reach out to local schools to arrange an in person visit to see if this improves interest.

### **3. Election of roles**

All members present agreed that PPG chair and Vice Chair will remain as Yvonne and Graham. There was no interest from members present for the vacant role of PPG secretary. It was agreed to role this over to be discussed at the next meeting due to 2 members not being present.

### **4. Practice Manager Update**

Matt announced that as of 3<sup>rd</sup> November 2025 he has joined the practice partnership. The practice now has 4 partners. Congratulations were given by all.

Matt advised that 'winter pressures' are currently well controlled. There is additional funding available to practices from December – February 2026, if needed for additional locum cover to help. The most challenging issue the practice currently faces is the introduction of the new online triage system (Digital Front Door - DFD). The practice previously offered online services but only during certain times and with a capped limit. As mandated by NHS England from 1<sup>st</sup> October, practices now have to offer online services, uncapped, from 8am until 6:30pm. Matt advised the practice launched the DFD on 22<sup>nd</sup> September. Uncapped online access brings its challenges as the practice is more

accessible than ever before so appointment requests have risen, particularly for more minor health concerns. This has exponentially increased our demand. Rebecca advised that despite the challenges, the new system has allowed us greater control of managing pre-bookable routine appointments. Previously the practice only offered either on the day or 2 week ahead appointments whereas now we can be more flexible and patients can book an appointment within a week. The new DFD is for routine problems only however the practice is noticing “urgent forms” creeping through. Matt advised that the practice is experiencing teething problems which is as to be expected but overall is glad about how things are going and the uptake from patients using the system.

Ruth Thacker (Practice Nurse) is retiring at the end of January and an advert is due to go out within the next few days to hire for this post. We welcomed a new salaried GP, Dr Jessica Bell, in October who does 4 sessions a week (Tuesday + Wednesdays). Yvonne asked how many female GPs the practice currently has and Matt confirmed that as well as Dr Bell, we also have Dr Ashleigh Milner (salaried GP) and Dr Ella Doke (GP Registrar). The practice currently has two third year students until the end of December. The practice will also receive students in January and February which will be year 3 and year 5 student placements.

#### **5. PACO / Usage of Digital Front Door Update**

Rebecca shared data on the usage of the Digital Front Door (DFD) since its launch. During the first 8 weeks, the practice received 895 clinical triage forms. The practice did not receive this many forms in a whole year with the previous (Patchs) system. Out of the 895 forms received and triaged by a GP, 408 patients were sent a booking link for a routine appointment. On average, the practice receives 20-30 forms per day. The practice has had to reconfigure GP clinics to accommodate a GP triaging the requests that come through uncapped during our opening hours. Yvonne asked how the GPs are finding the change/new system and Rebecca responded to say that the GPs (and all staff at the practice) are thrilled with the benefits the new system offers to patients and how we can offer a much better ‘appointment booking service’ than we previously did. The triage process is certainly more taxing on the GP’s but they all have set time within their clinics each week to do this and are supported by staff.

#### **6. Patient Survey Results**

To assist with PPG projects for next year and practice objectives, the PPG created a survey which was successfully delivered via SMS to 5028 patients. 414 responses were received. It was discussed that although every response and feedback is important, it is also important to remember this is not a true reflection of the entire population as only 414 responses were received.

A few key points discussed from the survey responses were:

- Responses for ‘if patients would like to receive communication via text or email’ were fairly evenly split. Rebecca advised that the practice will be looking to use email as 1st line of communication for routine messages so will be doing a drive early next year to gather email addresses to support this. Currently, SMS messages are being delivered via NHS App if the patient is registered. If the message is not read within the NHS App with a couple of hours, it will then default to sending via text.

- Figures were relatively low on data gathered for “what form of surgery communication have you seen” (3% have seen Facebook, 5% practice newsletter, 4% notice board and 14% practice website). Rebecca stated the practice does make an effort to ensure we are using different forms of communication to try get news out to patients. It was discussed about including a QR code in the “Inside Upton” magazine that gets delivered locally. Rebecca will explore adding this in when the next newsletter is published. It was also agreed the next newsletter would be emailed to all patients who we hold an email for.
- The main themes regarding ‘waiting room improvements required’ included the poor acoustics, higher, cushioned seating as well as chairs with arms, seating layout and privacy. Matt and Rebecca acknowledged this feedback and agreed that the acoustics require improvement and will also explore a new layout for the large waiting area space as well as higher chairs. There are currently chairs with arms available. WIFI was also requested for the waiting area. This is already available under the domain “NHS Guest” which patients can access. This is managed by our IT Department and the practice has no control over internet speeds. It was agreed that the waiting area displays could be more engaging and relevant to certain campaign months. It was agreed that artwork from schools would be a good addition to the waiting area.
- Responses were received about offering services that we do in fact already offer. Discussion was had about what can be done to help ‘get the word out’ about what we offer. The practice makes an effort to ensure communication is spread either in newsletters, on social media and in practice. It was felt that sometimes even though information is out there available to view, you may not read or acknowledge it at the time as services are not utilised until you require a need for it.

Attendees today saw a condensed version of feedback responses but Rebecca will share the full PPG survey results so members can analyse this and review common themes for the practice/members to take a critical look at and action. It seems ‘waiting area improvements’ is certainly one that will be a key area to look at.

## **7. AOB**

The practice is looking to host a menopause health evening in the New Year.

It was asked if the practice offers “ear wax removal”. The practice has not offered this since 2022 as it is not a funded service. Garden Lane previously offered this for longer than 2022 but also stopped. Patients would need to access this privately.

The current waiting time for ADHD services was discussed. Waiting times in Cheshire West are between 1-2 years. Patients are currently referred to private providers (Psychiatry UK), who hold contracts to see NHS patients. Due to the increase in the demand of patients seeking a diagnosis over the last few years, waiting lists are backlogged and the local ICB team are currently seeking solutions to manage waiting lists within Primary Care.

## 8. Next Meeting Date

Unfortunately, usual meeting room (at the Pavilion) is no longer available Tuesday afternoons going forwards. All members present agreed that meetings would be moved to Thursday afternoons. The next meeting date has been scheduled for: **Thursday 5th February – 3pm until 5pm at the Pavilion**

## ACTIONS

Action	Lead for action	Progress
Practice to implement giving patients a choice on hospital they are being referred to for secondary care	<b>Rebecca</b>	<b>Ongoing</b>
Reach out to local schools to arrange in person visit for PPG recruitment	<b>Eliza</b>	<b>Ongoing</b>
Discuss PPG secretary recruitment	<b>All</b>	<b>Next Meeting</b>
Practice Newsletter – QR code progress and feedback from emailing	<b>Rebecca</b>	<b>Next Meeting</b>
Analyse PPG Survey results and collate actions for PPG and Practice	<b>All</b>	<b>Next Meeting</b>