
PPG Meeting Notes 12 November 2025 - 12.00 to 13.00 Abbottswood Medical Centre

Attendees:

Glenn (chair), Cat, Vicki, Helen

1. Introduction, Apologies and Acceptance of last meeting notes

- Apologies noted from Bernice, Sue, Ken.
- Meeting notes accepted from 10th September 2025

2. Practice Statistics & General Update on Medical Centre Operation

2025										
Type of Appointment	January	February	March	April	May	June	July	August	September	October
Number of Inbound Calls	7,708	6,953	8,262	8,478	7,351	6,885	6,851	6,361	8,364	8,041
Number of triage requests received	3,084	2,889	3,202	2,992	2,881	2,990	3,265	2,883	3,445	3,780
GP face to face	1053	1040	1077	1019	926	1018	906	829	1058	1276
GP telephone	671	646	612	539	486	580	585	473	576	582
Home Visits	76	79	66	99	68	74	80	64	75	82
Nurse Appointments	1509	1392	1417	1392	1434	1336	1659	1324	1431	1478
Pharmacist Appointments	730	761	912	794	906	780	940	717	1141	1173
ANP & Paramedic Appointments	529	395	433	497	494	448	552	497	408	516
Missed Appointments	129	116	142	153	129	131	167	120	148	238
RSV Vaccine	39	39	43	21	12	10	31	26	17	22
Covid Vaccine	16	0	2	1509	0	0	0	0	0	1024
Flu Vaccine	54	7	5	0	0	0	0	0	2270	2174

3. Group discussion on Statistics and Update

- October showed a significant contact increase versus September, attributed to winter pressures and all-day triage availability.
- Triage now runs until 6:30pm; approx. 20% increase in triage volumes since extended hours.
- COVID and flu vaccination bookings increased overall call traffic.
- New patient registrations stable; net turnover around 78 patients last month, with deductions balancing registrations.
- No indication that new registrations are driving workload increases. Workload rise linked to seasonal pressures and triage policy rather than new patient growth.
- Both phone and online triage contacts rose; Inbound calls rose by ~2000 Aug to Sep, whereas online triage rose by 600, prompting a discussion on encouraging patients to use triage more effectively.
- Plan for a patient education module detailing what to include in triage submissions (key info clinicians need; how the system works).
- IT to explore software integrations, linking, and promotional materials; two-pronged approach: how-to guidance and promotion.
- Consider sharing patient experiences on social media and other outlets to build confidence. Aim to capture and disseminate positive outcomes (same-day doctor contact success stories).

- **Conclusion:** Proceed with education module development and patient experience promotion; focus on hesitant users.

4. CQC Update

- CQC, as regulator, provided an intensive investigation into the running of the practice.
- On the day, the PPG Chair was interviewed as well as the GPs and other Medical Centre staff.
- Extensive follow-up evidence submitted post-inspection to address points raised on the day.
- Summary feedback noted strong staff support and collaborative culture.
- Possible report around end of November to early December (6–7 weeks after visit).
- **Conclusion:** Await outcome.

5. PPG Patient Survey Subgroup Update

- Proposal to finalise survey questions at next meeting in January; send survey in the New Year.
- Consider incorporating CQC outcomes into survey messaging and promotion.
- **Conclusion:** Finalise survey in January; develop targeted recruitment.

6. Worcestershire Healthwatch Event 11 November feedback

- Glenn gave feedback from the Healthwatch Worcestershire (HW) Event attended by himself and Sue the previous day.
- The event's threefold objectives were:
 - to provide an annual report of what HW achieved in 2024/25
 - to have a Q&A with Hayley Flavell, Chief Nursing Officer - Worcestershire Acute Hospitals NHS Trust and Anna Sterckx, Head of Patient Carer and Public Engagement Worcestershire Acute Hospitals.
 - To present the HW business plan for 2025/26
- HW chairman indicated government intends to disband Healthwatch in spring next year; however given it is a statutory requirement for patient-feedback, function will continue in another form.
- Themes identified from HW annual report may be useful for the PPG to work with next year.
- Hayley Flavell, talked about patient flow as a key challenge in her role and appropriate pathways. GPs can ring SPA (single point access) for pathways options. Also Practical measures: alternative entry pathways (e.g., stroke pathway, GP in ED) to divert from A&E; efforts to reduce corridor treatment.
- Anna Sterckx Head of Patient Carer and Public Engagement Worcs Acute Hospital- survey The Big Conversation encourage patients to take part. She talked about work done for children/ adults with autism in A&E- very positive. Think she would be a good contact for the PPG.
- Anna spoke about focus on understanding barriers to accessing services and improving specialist communications. She mentioned "patient public forum" (PPF).

- Group sees potential to apply approaches to their own accessibility project (letters, formats, deeper engagement).
- Proposal to produce an end-of-year report to patients outlining achievements, themes, and plans.
- Consider forming a patient group/newsletter to strengthen engagement and transparency.
- **Conclusion:** Strong interest in collaborating with Anna; potential joint session with Pershore Medical Centre with Anna speaking to the two practices. Also group to take forward the idea of producing a PPG end of year report and next year plan. Glenn to follow up on both.

7. Any other business

- Clinics update – flu and COVID vaccination sessions
 - Attendance: recent Saturday nearly 800; first week nearly 1,000.
 - Collaboration praised; practical support enabled completion of other tasks during CQC period.
 - Frailty information capture added to clinic workflow (coding via F12 template; target 60% for ≥65s; next year target 80%).
 - Operational learning: staff to do morning or afternoon shifts (not full-day) to manage fatigue; template structure improvements needed.
 - Patient feedback positive; process getting “slicker” year-on-year.
 - **Conclusion:** Clinics successful; frailty data capture largely effective; process refinements identified.

8. Next meeting date in January

- **Conclusion:** Next meeting set for 21 January.

Close