



Stockbridge & Broughton Surgery PPG

Minutes of meeting held on Thursday 24th April 2025 6:30pm Stockbridge Town Hall

Present

Andrew Brock (Chair) [AB], Ann Spooner (Practice Manager) [AS], Dr Will Dougal (GP Partner) [WD], Sheila Fitzpatrick, Alison Deverill [AD], Beryl Pratley [BP] and Audrey Watts

Apologies: Peter Storey, Isabelle Assali-Reeve

Standing Items

- a. Minutes of the meeting held on 15th January 2025 were agreed.
- b. Actions from previous meeting had been completed save amendments as follows:
 - Appointment Management - "GP Appointment information for Patients" document to be available on the website (possibly via a 'Learn more...' link) and now provided to new patients. **Action: AS**
 - ToR received to be signed and PDF copy to be returned to surgery and filed **Action: AB**
 - Previous year's PPG minutes to be made available on the website **Action: AS**

1. Surgery Update

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

- a. Existing contract rolled over to 2026; current funding has been largely absorbed in to increased National Insurance cost which the Practice unlike the rest of the NHS is not immune to. However, the Practice confirmed that there were no plans for any redundancies.
- b. Following NHS renegotiation, the anticoagulant Edoxaban is to be replaced with Apixaban after consultation with patients to save ~£6mn in Hampshire alone
- c. Covid Spring campaign nears completion with 780 vaccinations to date
- d. HIOW ICB have arranged 4 days of GP surgery training when the surgery will be closed - next session if 8th May
- e. 2 new 3rd year medical students will be joining the [practice for 6 weeks from the end of April
- f. Phlebotomy Service is under stress due to sickness and covered in house as best as possible. Blood testing still available at Winchester and Andover as normal.
- g. Practice in the Process of "Safe Surgery" accreditation

2. Online Booking Issues (Covid)

Practice not aware of any issue related to online booking of appointments and can only assume the apparent non-availability of appointments was due to multiple users looking to book at the same time and then perhaps not completing as it is a near real time booking

system. As always, it is recommended that Patients contact the surgery in case of issues of this nature so that they can be examined properly.

3. Military covenant impact on the Practice

The Practice is accredited as a Veteran Friendly Practice. There is a slight administration burden as new patient records have a code added to reflect either military veteran or member of a military family (if of course they elect to be included). With the consent of the patient, the Practice tries to ensure that they obtain military healthcare records to ensure they can offer the best care to the patient.

4. Broughton Parish Council land ownership and footpath to Surgery

Broughton Parish Council have finally had the Down Close car park and surrounding land transferred over to them. They have notified the Practice of the same and have expressed their support for a footpath that directly links this car park to the surgery. This will overcome the severe limitations of the existing surgery car park with patients having much easier and more level access from the Down Close carpark thus avoiding the more hazardous public footpath route. **Action: AS**

Because of changes in the membership and chair of Broughton PC, BP suggested it would be helpful to have an updated statement about the Practice's wishes regarding the small parcel of land adjoining the Broughton surgery. **Action: AS**

5. HIOW PPG/National Association of Patient Participation Groups

The PPG have reviewed the National Association of Patient Participation Groups which has just had a sizeable increase in subscription costs and confirmed that they will not be signing up. Other PPGs are attempting to set up their own Group over Facebook but that has not been well supported mainly due to the ongoing security concerns with the Facebook platform. However, HIOW PCT does operate a HIOW PPG virtual meeting for which we are members, the objectives of which are to keep PPGs aware of activities, campaigns and other matters with the overall view of supporting the delivery of better outcomes for patients through meaningful and impactful partnership and collaboration. The Chair participates (or offers up to the PPG in his absence) – and content etc shared amongst PPG members and available on the PPG DropBox.

6. Change NHS Survey update

As BP filed the PPG response to the Change NHS Survey, it means the update come to her, but other members of the PPG have also separately responded and therefore also getting updates as the survey responses are whittled down to manageable pieces, though concern remains as to how change will occur whilst the NHS is neither consistently national or holistic given the roles of so many other bodies and quangos in managing the nation's health and the associated bureaucracy. The demise of NHS England, the administrative body responsible for running the National Health Service, was however seen as one useful outcome at least.

WD advised that there was a tangible shift with Primary Care getting more focus on delivering locally in the community and that there was good political will to support this. ("Left Shift"),

7. AOB

- a. **PPG Value** AD raised the excellent question to the Practice as to what they find useful about their association with the PPG. What they take away, what they've found most helpful. The response was that the Practice did indeed find the association with the PPG did add value especially with regard to:
- i. Different perspectives from their own to build better holistic solutions
 - ii. Improved awareness and feedback
 - iii. Patient concerns

And this was valued as WD confirmed that as a Practice they wanted to be the best in Hampshire working with the PPG for objective outcomes, taking on board patient's views whilst working with limited resources, however, "Don't let perfect get in the way of good" in our pursuit of excellence.

- b. **Use of AI** was raised. WD advised that there were no current solutions effective enough to manage aspects such as Triage (e.g. overviewing e-consult) or indeed assessing application for patient's licences. Any healthcare AI product which is decision making must be licensed as a medical device. However, Nico Rosser is keeping a watching brief given the interest in this area.

However, AI is used within HLOW for rapid screening as it is seen as both quicker and more reliable. In addition, Advice & Guidance facility is also used by GPs to hospitals direct (fast track) for certain conditions (e.g. dermatology) but the response rate is not consistent across all functions. Some get back the same day with a response – other areas can take up to 6 weeks.

8. Date and Time of Next Meeting

Wednesday 30th July (Location TBC)

Acronyms Used

AI: Artificial Intelligence
HLOW: Hampshire Isle of Wight
ICB: Integrated Care Board
MOD: Ministry of Defence
PCT: Primary Care Team
ToR: Terms of Reference