Horndean Surgery

Patent Participation Group Committee Meeting

Minutes of Meeting held at Horndean Surgery 10.02.2025

Members Present: TB (chair), AM (deputy chair), JF (secretary), AS, BL, PK, SL,

Practice Partners Present: Dr CM, JS, TH

Apologies: Dr ZH, JT

Item:		Action:
1	The previous meeting minutes were agreed with no amendments requested.	
	Update on actions from the previous meeting: Dr ZH to arrange for the Surgery "Wish-List" for patient appointment booking to be forwarded:	
	PK has received the information and has created a complementary information sheet for display on the reception desk screen.	
	Set-up PPG email accounts:	
	NHS email accounts have been set-up for patients to be able to contact TB as the Chair and JF as the admin support, these now need to be circulated to the patient group.	
	Creation of PPG area in the waiting room:	
	The Practice members confirmed they are very supportive but are not sure where the best location would be, we may only be able to have half a noticeboard. PK to meet with W to identify and agree to the location of the area and to make sure that the mandatory and statutory information remains prominent to patients.	
	No AOB items recorded.	
2	Update from the Practice:	
	PCN – PPG Meeting: JS mentioned the PCN are planning a meeting with PPG members in March and asked if any members would be interested in attending, SL expressed interest in attending so JS will let JF know of the date when published so that she and SL can attend to represent our group.	

Heidi - Transcribing Tool

Dr CM introduced the transcribing tool which is now being used at the Surgery. "Heidi" is developed by clinicians for clinicians and is approved by the NHS and is GDPR compliant. The software transcribes the conversation between the patient and the clinician and produces an intelligent transcript which is then copied into the patient notes on EMIS. The clinician can edit the notes if required and this timesaving tool enables the Dr to spend more time with the patient and less time on writing up notes. Dr CM said this is already being used in many GP Practices, Hospitals and other health care settings. The patient must consent to "Heidi" being used during their consultation and the transcript is not held within the software but deleted after being copied into EMIS. Dr CM asked for any ideas as to how the Surgery could obtain consent from the wider patient group to allow this to be used as standard. TB suggested notifying the Virtual PPG that the Surgery is trialling Heidi making best use of the new technology available, especially as this will reduce the admin workload for clinical staff. AS asked if this could be used in dental practices as well, Dr CM confirmed the technology can be utilised in any health care setting.

JS updated the group with 2 staff changes, Dr Matthew Northwood a military GP Registrar will be joining for a 6-month period in a few weeks' time.

Dr Saleh Alkhodary (Sal) will be leaving the Practice at the end of February and will be hugely missed.

JS confirmed that all reception staff are now wearing name badges, one staff member is excluded from badge wearing due to personal health reasons.

3 Actions from the PPG Sub-group meeting:

How to make the most of your GP appointment: Suggestion box location:

The committee members agreed that the box looks great and thanked PK for her creative skills. It was also agreed by all that the flyers PK has created complement the box perfectly. There were various suggestions as to where the suggestion box is best placed to encourage patients to feel comfortable to submit suggestions, PK to work with W to find a location which works best and monitor for any suggestions received. JS will also provide input as to where best to place the suggestion box to encourage usage as placing it on the reception desk was not ideal as the Practice prefer to discourage patients from congregating in this area.

Waiting room screen functionality:

The group asked the Practice if they could have a better understanding of how the screen works in the waiting room so we can better utilise this resource for health awareness campaigns.

TH explained that there are no restrictions on the volume and combination of content and confirmed it can include video's with/without voiceover or subtitles. TH further explained that they prefer to keep to a 20-minute repeating cycle to try to give those in the waiting room the opportunity to view everything in the loop. TH also explained that he tries to include content relevant to any National NHS health awareness days or NHS campaigns on the screen - which is currently awaiting repair.

EOL Care:

AM asked for clarification from the Practice as to how they would like to proceed with running an EOL campaign during Dying Matters Week in May. Dr CM, who is the Palliative Lead for the Surgery said she is very keen to highlight the support and resources available at the Living Well Centre at the Rowans Hospice especially if we can help with removing the fear and stigma patients often feel when use of the Centre is suggested as they almost always wish they had attended sooner once they have experienced their first visit. She thanked AM for her supporting document and asked for the campaign to support patients to have those difficult conversations and think about their wishes for their End of Life in a positive and supportive way. AM will lead on this campaign.

4 Service Provision Issue:

RL asked if when a patient is asked to make a follow up appointment, if the Doctor reads the patient notes in advance so that they are aware of the reason for the appointment, he feels it is a service issue if the patient is asked why they are there. Dr CM explained that all appointments must follow the patients' agenda and not the doctors, and that although the patients' notes are read prior to the patient appointment the doctor cannot assume that this is the what the patient will wish to discuss as a more pressing condition may have arisen which for the patient, may take priority. RL also asked how the doctor can avoid patients forgetting to ask a question if they have multiple things to discuss, rather than this only being remembered after the patient has left. Dr CM suggested that the patients should be

	encouraged to make a list as suggested in the Making the Most of Your Appointment poster, she also suggested it is better to keep the appointments to discuss an ongoing medical condition with the same doctor for continuity of care. She also reminded the group that the NHS App holds the notes on GP consultations, and this can be read by the patient. RL stated that he feels the level of service given by Horndean Surgery is excellent and this was only being raised as a suggested service improvement.	
5	TB asked if the group felt an AGM was appropriate, it was agreed this may be better as a written document sent to the PPG Virtual Group with a link to the PPG Committee minutes, suggested timescale was May. SL asked if incorrect patient information could be removed from the NHS App, JS said this would need to be discussed directly with herself as this forms part of the patient medical record. The Committee Meeting dates for 2025/26 were confirmed as: 12th May 2025 8th September 2025 10th November 2025 9th February 2026	
7	Date & Time of Next PPG Meeting: Monday 12 th May 2025 @ Horndean Surgery, 17:50 for prompt 18:00 start.	