

Glenlyn Medical Centre

Patient Participation Group Meeting Summary 9 September 2025

Attendance

Richard Bevan Chair Eileen Gough Secretary

Anne Thomson Manjiri Chitnis Marion Todd

Joseph Todd Glenlyn Managing Director Heather Chatwin Glenlyn Business Manager

Introduction & Welcome

This was the first meeting of the group since June. Two new members were welcomed, Anne & Manjiri.

The following agenda was proposed and agreed.

- Update from the practice
- Autumn Immunisation Programme
- GP Patient Survey 2025
- AOB
- Date of next meeting

Practice Update

The summer period had been difficult with significant staff sickness issues, adding to the pressure on the team because of planned holidays.

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020 8979 3253 | W: glenlynmedicalcentre.nhs.uk | E: glenlynreception@nhs.net Glenlyn Medical Centre, 115 Molesey Park Road, East Molesey, Surrey, KT8 0JX In April, the Practice set up the TAKE Team – a group of doctors, nurses, and medical staff who review clinical requests as they come in. Their role is to make sure patients are seen by the right person, with the right skills, in the right place, and in order of medical need rather than first come, first served. This means shorter waits and a smoother, safer journey to get the care you need. Now fully operational, the TAKE Team is expected to make the process even more efficient and reduce waiting times further.

Many of the practice's clinicians work part-time, and the aim has been to ensure patients continue to receive continuity and consistency of care. To support this, the practice has restructured how it operates so that each patient is looked after by a dedicated Care Team. Each Care Team includes a mix of clinicians – such as doctors, Advanced Nurse Practitioners (ANPs), Paediatric Nurses, Musculoskeletal First Contact Practitioners (MSK FCPs), Healthcare Assistants, and others – who work closely together and get to know patients and their health needs. This approach means patients are more likely to see familiar faces, receive joined-up care, and be directed to the right professional more quickly. In cases of urgent need, patients will still be seen by the next available and most appropriate clinician to make sure their care is not delayed.

The practice has also introduced Medical Assistants – a new role that combines elements of administration and clinical support. Our Medical Assistants are being specially trained to help with phlebotomy (blood tests), vaccinations, ECGs, taking observations, preparing patients for appointments, and supporting clinicians with day-to-day care. This training means clinicians can focus more time on direct patient care, while patients benefit from a more efficient and joined-up service.

The community cardiology service has been extremely successful, with many patients benefiting from faster access to heart investigations and treatment closer to home. Due to this success, the practice is now exploring the possibility of employing an additional consultant to expand capacity and further reduce waiting times.

Autumn Immunisation Programme

The autumn immunisation programme at Glenlyn Medical Centre has taken on additional complexity this year. Originally, the expectation was for a programme like the annual flu campaign, but the provision of COVID vaccines for local patients has necessitated re-establishing the vaccination centre and acting as intermediaries for two other practices in East Elmbridge.

Participating Practices and Clinic Schedule

Three of the seven East Elmbridge practices - Glenlyn, Capel Field, and The Vine - will vaccinate their own patients, while the others will direct patients to chemists. Glenlyn Medical Centre has scheduled its primary clinics for the 1st and 2nd of October, with locations at Emberbrook (Wednesday) and Glenlyn (Thursday). This sequence helps manage vaccine inventory and accommodates walk-in patients efficiently.

Logistical Challenges

The programme aims to avoid complications from previous years, such as double bookings and difficulties with appointment cancellations when patients choose alternative vaccination sites. Efficiency is now crucial to ensure financial viability, as the flu campaign no longer generates surplus funds for practices.

Eligibility and Vaccination Streams

Eligibility for vaccines this year is intricate, with different criteria for the flu and COVID campaigns:

- All patients over 50 will receive the adjuvanted flu vaccine, designed to stimulate immune response in older adults.
- COVID vaccine eligibility is universal for individuals aged 75 and over, while younger groups have more complex criteria.

Clinics will operate two patient streams: one for flu-only recipients and another for those eligible for both vaccines. Flu vaccinations will be prioritised due to financial considerations, with approximately £40,000 worth of flu vaccine arriving imminently.

Housebound and Care Home Patients

Jackie Brown, the paramedic responsible for housebound and care home patients, will begin the consent process, which can be time-consuming for those lacking capacity.

Paediatric Vaccination

For children, eligibility is determined by age as of 1st September. All two- and threeyear-olds are invited for flu vaccination, typically administered as a nasal spray unless contraindicated. School-age children receive their vaccine offers through school, while those with underlying conditions have the option to be vaccinated at the practice in a more comfortable setting.

Programme Complexity and Financial Considerations

This year's immunisation programme is more complex than previous years due to the addition of COVID vaccinations and the logistical demands of coordinating with other practices. The practice hopes that providing these clinics will relieve the pressure on local chemists and enable effective vaccine delivery to eligible patients.

Financial and Operational Impact

The programme's financial sustainability hinges on successful administration of vaccines to eligible patients. COVID vaccinations are reimbursed at £7.54 per dose for eligible recipients, but this does not fully cover operational costs. The decision to maintain or stand down the vaccine centre will be evaluated after the current programme, weighing patient benefit against financial viability.

Glenlyn Medical Centre remains committed to delivering the immunisation programme to patients, despite significant operational and financial pressures. The coming weeks are crucial to determine the programme's success and future feasibility.

GP Patient Survey

Overview and Methodology

The team discussed the process and findings of the national GP Patient Survey, noting that only a small, randomly selected percentage of registered patients are invited to participate. For Glenlyn Medical Centre, approximately 350 surveys were sent, with around 90 responses received. This low response rate highlights that the feedback represents just a fraction of the patient population. The survey covers a wide range of topics, and results are shared and compared with local and national benchmarks.

Survey Results and Interpretation

Discussion highlighted that Glenlyn's scores for questions about technology—such as the ease of accessing the practice via the website—were particularly low (35%) compared to other local practices (70% for The Vine and 76% for Esher Green), despite all using the same system. The group reflected that for historical reasons Glenlyn's patients may judge the practice more harshly than others, though the Glenlyn website contains more information than other local practices. It was noted that the survey was conducted prior to the launch of the TAKE initiative and that negative publicity around the 2024 practice restructuring and GP redundancies may have skewed the results. There was agreement that decisions should not be based solely on such a small sample size, and that it's important to interpret the data with care. Nonetheless, the team recognised that these figures do influence potential patients and feed into choices about where to register.

Improving Patient Feedback and Experience

The team acknowledged the need to both encourage higher response rates and better understand the reasons behind low scores. Ideas were shared for gathering more regular and targeted feedback, such as using clinics as an opportunity to collect short surveys, or employing various methods (clipboard, email, and text, post) to reach different groups of patients. It was agreed that a multi-channel approach could be effective and that surveying during vaccination clinics could capture input from frequent users.

Benchmarking and Next Steps

Team members compared Glenlyn's results to those of other local practices and national data. For example, 48% of Glenlyn respondents rated the practice as "good" or "very good," compared to 78% for Surrey Heartlands and 75% nationally. Recent context, such as practice redundancies, may have influenced these figures. The team also discussed the "Friends and Family Test" ("Overall, how was your experience of our service?"), which is sent to all patients after appointments and has shown improvements in recent months, for example, in August 2025, 92 % of patients rated their experience as Good or Very Good. There was consensus on the value of

continuing to collect honest and representative patient feedback to inform practice development.

Opportunities for Enhanced Engagement

The discussion concluded with agreement on trialling new ways to garner patient feedback, including shorter surveys during high-footfall periods and adapting communication approaches. The team also noted the importance of sharing the practice's strengths more widely and ensuring feedback is used constructively to improve patient experience.

Virtual Assistant Trial at Glenlyn Medical Centre

Background and Current Arrangements

Currently, an outsourced provider handles the phone service, but the intention is to transition to an in-house AI solution soon. The group observed that only 19% of GP patient survey respondents found it easy to contact the practice by phone, well below the 70% national average; however, this survey was conducted when calls were handled in-house.

Trial and Feedback Process

The system, named "Emma", is designed as a learning platform and will improve with use. The system has already been trialled within the practice; PPG members were provided with details so that they could try the system for themselves. Feedback from the team is to be collated by the end of the week to inform a final decision.

Features and Functionality

- The AI is accessible 24/7, offering consistency and flexibility for patients.
- The system can handle thousands of calls per minute, ensuring no delays regardless of call volume.
- It will screen for emergencies and direct patients to call emergency services if necessary. For less urgent issues, it collects relevant information and refers the patient to the appropriate team for follow-up.
- The system can manage 90% of routine queries, with the option to transfer patients to a human team member when needed.

Implementation Timeline

If the team finds the trial satisfactory, the AI assistant could be live within three months, aiming for a launch before Christmas.

Confidentiality and Data Handling

Emma, the virtual assistant, functions as a member of the practice team, with access to necessary information for patient care. There is no opt-in requirement; patients will be guided through the AI, with human support available as needed.

AOB

Pharmacy Closure

The pharmacy at Glenlyn was not part of the medical centre but an independent business that rented space on site. Like many community pharmacies, it faced challenges in the context of the current national financial settlement, and with low footfall the site was not financially viable. The owners were able to consolidate their operations at their site on Walton Road, where patients now benefit from improved access and service. We are also pleased that some former pharmacy staff members joined the Glenlyn Medical Centre team, helping us strengthen the care and support we provide.

Primary Care Challenges

Primary care providers, including both GPs and pharmacies, are facing significant challenges. Funding has not kept pace with inflation, meaning practices must deliver ever greater efficiency in the way services are run.

Despite these pressures, the practice remains committed to providing safe, timely, and high-quality care for all patients.

Garden area

Patients are warmly welcome to make use of the garden when visiting Glenlyn in Molesey. It is a space to take the air, enjoy the planting, and relax either before or after an appointment. We will also be exploring ways in which our community can support the garden in the future and help make it an even more inviting space for everyone.

Menopause Care

The practice has been awarded two places for a nurse practitioner and an a GP for specialist menopause training, commencing very soon and finishing by the end of March.

Elmbridge Diabetic Eye Screening Service

The Elmbridge Diabetic Eye Screening Service has now moved to Glenlyn following the closure of the Molesey Clinic. There was a very real risk that this service could have been relocated outside the borough, but Glenlyn was pleased to welcome **InHealth** into a purpose-built facility to ensure this vital service remains available within our community.

Next meeting

Agreed for 11am on Monday 6 October