

Glenlyn Medical Centre

Patient Participation Group Meeting Summary 1 December 2025

Attendance

Richard Bevan	Chair
Eileen Gough	Secretary
Manjiri Chitnis	
Maria Edwards	(observer)
Graeme Edwards	(observer)
Andrew Gee	(observer)
Joseph Todd	Glenlyn Managing Director
Heather Chatwin	Glenlyn Business Manager

Apologies

Marion Todd

Introduction & Welcome

RB welcomed Maria, Graeme and Andrew to the meeting as potential new members.

The Patient Participation Group (PPG) convenes approximately every six weeks, with more frequent meetings as necessary. The aim of the group is to support the practice management team, focusing on constructive feedback and improvements rather than simply discussing issues or offering praise. The group exists to foster better communication, clarify the reasoning behind practice decisions, and address concerns raised by both patients and staff. The intention is to resolve issues proactively and ensure the practice operates as effectively as possible within the broader context of NHS challenges.

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The group emphasises communication and the importance of explaining decisions to avoid unnecessary negativity and misunderstandings. Members are encouraged to share concerns and feedback, which informs the group's discussions and actions.

Minutes of the last meeting

Minutes from the previous meeting had been circulated and posted on the Practice website.

Practice update

Practice Developments and Staffing

There have been significant changes in staffing within the practice over the last year or so, particularly among GPs. Following departures in January 2024, six new GPs were recruited, enhancing the team's skills and capabilities. Modern GP work patterns tend to be portfolio-based, with many GPs working four-day weeks split between surgeries and clinics. This flexible approach benefits both practitioners and patients, although it poses challenges in scheduling and maintaining coverage throughout the week. The practice strives to balance clinical sessions, aiming for approximately 40 sessions per week spread across the team.

Winter Preparation and Additional Resources

The practice has maintained stability over the past six weeks in preparation for winter, rearranging resources and securing additional funding through the NHS Winter Access Fund. This funding, although often announced late, enables the practice to increase appointment availability, especially during Christmas and the New Year. Two main types of appointments are offered: same-day bookable slots and routine appointments. The practice uses a triage system to manage high volumes of daily inquiries, ensuring that urgent and routine needs are met efficiently.

Operational Changes and Appointment Systems

Recent NHS requirements have mandated that practice forms remain open from 8:00 to 18:30, with responses due the same day or by the following day depending on when the inquiry is received. The practice trialed a shift-based system for staff but ultimately settled on a model ensuring GP availability throughout working hours. While the new system is less flexible than previous arrangements, it complies with NHS guidelines and has so far received no complaints. The change means that leftover, less urgent work is carried over, and staff are reminded to manage ongoing tasks accordingly. Administrators monitor incoming forms throughout the day to ensure appropriate patient management and prevent anyone from being overlooked.

Patient Experience and Feedback

From the patient's perspective, the revised system provides clear expectations regarding response times. Queries submitted in the morning are typically addressed the

same day, while afternoon submissions are handled either that day or by the following lunchtime. The practice values transparent communication and recognises the need to improve how these changes are conveyed to patients. Feedback is gathered through Google reviews, with staff actively responding to both positive and negative comments to maintain the practice's public image. Additionally, the practice encourages patients to leave reviews via QR codes placed throughout the building, as NHS-specific review platforms have been discontinued.

Facilities, Services, and Expansion

The practice has invested in new consulting rooms, increasing capacity and enabling additional clinics such as diabetic eye screening for the entire Elmbridge area.

Specialist cardiology services are also available, with three cardiologists and associated nurses offering rapid assessment and testing for local patients. The practice aims to expand these services further, supporting hospitals struggling with capacity and funding, and providing local alternatives for patients.

Technology and IT Restrictions

Plans to implement AI-powered telephone systems and ambient recording technologies are underway, pending final approval from NHS IT authorities. These tools are expected to yield significant cost savings, which will be reinvested into patient care and facility improvements. However, the practice is limited in its choice of clinical systems and must adhere to centralised IT security protocols, which can slow down the adoption of new technologies.

Performance Measurement and Internal Monitoring

Performance is assessed using various metrics, including the number of appointments, blood tests, vaccinations, and patient queries managed daily. Internally, the practice monitors turnaround times and the management of long-term conditions, ensuring annual reviews and medication checks are completed for eligible patients. External NHS benchmarking focuses primarily on appointment numbers and telephone data, but the practice also conducts its own surveys to evaluate patient satisfaction and ease of access to services.

Funding and Financial Considerations

Practice funding is based on a per-patient allocation, adjusted according to local deprivation indices. This can result in reduced budgets for areas considered affluent, despite higher operational costs. The funding formula does not always accurately reflect the prevalence of chronic conditions or the complexity of patient needs, leading to ongoing discussions about fairer allocation methods.

Continuity of Care and Specialist Teams

The practice works to maintain continuity of care, particularly for patients with long-term conditions, by assigning them to dedicated teams and clinicians. Regular reviews and proactive outreach are organised to minimise unnecessary visits and improve outcomes. Specialist staff, including a paramedic and a social prescribing link worker, support vulnerable groups such as the elderly, homeless, and those with learning disabilities or severe mental illness, ensuring comprehensive annual checks and coordinated care.

Patient-Centric Approach and Evolving Healthcare

Healthcare delivery is increasingly patient-centric, with an emphasis on empowering individuals to take responsibility for their health while providing coordinated support through multidisciplinary teams. The practice collaborates with local community services, occupational therapists, and matrix teams to help patients remain in their own homes whenever possible, reflecting a shift away from institutional care towards more personalised, community-based support.

Next meeting

19th January 2026 at Glenlyn.