

The House Patient Partnership (PPG) - Including HEALTH CHAMPIONS

NOTES OF AGM HELD ON 9th June 2025 AT 6.30PM

Greystone House Surgery

Present:

Dr Amanda Springett (Dr S) – Greystone House
Dr Anu Rajarajan (Dr R) – Moat House
Jacquie Clayson - Operations Manager (JC)
Rachel Lynch – Practice Manager (GSH)
Caroline Towers – Practice Manager (CVMP)
Frank Curtis – Chairman (FC)
Les Rundle – (LAR)
Amy Gabriel
Dr John Wilson
Bina Wilson
Chris Hardy
Rosemary Arnott
Jo & Tony Smith
Lorraine Mountain
Linda Morris
Norman Queenan
Kate Hayes
Bernard Treanor
Plus – many patients from both Greystone(GSH) & Moat House (MH)
Surgeries

Apologies:

Mark Smith (R&B Councillor)
John Woolston
Sally Moore
Sue Rob (Patient Services Manager MH)

FC welcomed everybody to the meeting and explained that this was the AGM.

Finance Report.

LAR explained financial year income and expenditure (none!) and advised that the current bank balance stands at £465.75. The accounts were accepted by a show of hands and approved by accountant Bernard Treanor

Practice News

Rachel Lynch, Practice Manager at GSH provided an update as follows:-

Rachel introduced that this was a joint PPG patient meeting of GSH, MH and CVMP PPGs under The House Partnership (THP).

The separate PPGs should consider whether they prefer joint PPG patient meetings alternating location between the practices. The overall view was that we should now have joint meetings

(although David Mountain, MH patient voiced some concern after the meeting that MH patients have not been sufficiently consulted on this aspect)

THP are considering what to spend say £200-250 of PPG funds on for improvements of patient experience at the surgery.

Practice Updates - MH – Patient Services Manager Sue Rob sends her apologies, and has advised that training sessions are undertaken at MH surgery on the NHS app every **Wednesday 12-2pm at Moat House** to help patients re-join who may have lost access when patient records merged as not everyone seems to have re-joined as yet.

Practice Updates GSH - Rachel continued as follows:-

- **Drs Norhan Gaballa and Prashanth Sakthibalan**, maternity locums who completed their training at Greystone House have both officially started working as salaried GPs at GH as of **1st June**. They will start building their own patient lists now. **Dr Poppy Noot-Davies** (who trained at Moat House) is also starting at Greystone House as a salaried GP from **7th July**
- **Dr Jian Chen** and **Dr Amna Ghafoor** are now back from maternity leave after one year's leave.
- **Dr Benjamin Kearl** is leaving the practice on **4th July** to focus more time on his other roles outside of the surgery. His patients will be contacted in due course regarding their GP allocation.
- **Dr Magdalena Kwasiuk** has announced her pregnancy. The team are so pleased for her. The surgery team are not booking any suspected infectious patients or patients with rashes as a measure to protect Dr Kwasiuk.
- We are still planning a possible EMIS clinical patient records and admin system merge with Caterham Valley medical practice (CVMP) in April 2026. However there are many processes and considerations to go through before this.

Caroline Towers, Practice Manager at Caterham provided an update as follows for her site.

- Drs Richard Wright and Kate Teasdale have reduced their working days from four per week to three per week as and a salaried GP has being recruited to cover the lost days and it is hoped they will start soon.
- Changes in the reception team too as one long serving member of staff retired and has been replaced by a new member of the team.
- A new HCA has joined the team and will be trained up to support the nurses.
- The lift, which has been out of action for six months, is now thankfully back up and running after a complete overhaul.
- Patients may have noticed a longer wait for appointments as demand has not reduced as it used to in the spring as it did in years gone by. Demand seems heavy all year now and the partnership are looking at ways to manage this.
- New check in system has been installed to reduce the wait at reception. Patients will now be called in for their appointments on a patient info screen as well.

Health Champions – Addendum – Was not discussed during the meeting due to time – update provided below

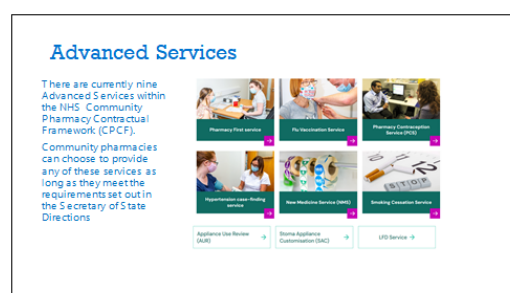
- Weekly Wellbeing Walks continue to be well attended at Greystone House
- Two new group members to GSH– Conchi and Niyati (Nee) assisting with the weekly walks
- There are plans for additional First Aid courses this Autumn – St John’s Ambulance, Redhill kindly provide these for free for our patients and ask for a small donation to cover the cost of delivering the courses
- Every Wednesday - 10:30-11:30 digital buddy NHS app sessions at Greystone House and 12-2pm at Moat House to help patients re-join the app who lost access when merged and have not re-joined yet. Our current patient app uptake is **49.7%** and we need to get this to at least 59% in line with the national average (+3000 patients still to be ‘onboarded’), Surrey Heartlands average is 66%. These averages are high as many patients signed up to the app during the pandemic and our Moat House users have been ‘lost’ since when the merger happened, so less patients have re-joined the app.

Presentation

A good presentation was made by Julia Powell, Chief Executive Officer of Community Pharmacy Surrey & Sussex. Julia explained how the ‘Pharmacy First’ initiative works. Under this development, patients experiencing certain health conditions may attend at a pharmacy for a diagnosis and receive prescribed medication if appropriate. All pharmacies within Surrey are participating in this scheme and Julia answered many questions from the meeting as regards various pharmacy processes, availability/shortages of prescribed medications and escalation/liaison with GP practices. LAR thanked Julia for a great presentation which was well received by everybody. (Note – I followed this process on the following day calling in at Day Lewis pharmacy in Reigate to obtain a diagnosis from pharmacist Karen who then consulted with GH surgery who phoned me in 30 minutes with a confirming diagnosis – Shingles!). The Community Pharmacy Surrey & Sussex website is as shown below.

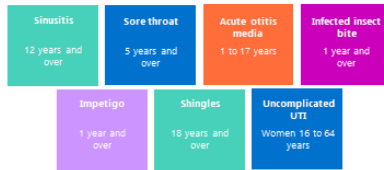
<https://surreysussex.communitypharmacy.org.uk/>

The slides can be viewed below



Clinical pathway consultations

- Involves pharmacists providing advice and NHS-funded treatment, where clinically appropriate for seven common conditions:



Brighton and Hove
Patient Campaign

Providing high quality health and care services

- For the 7 common conditions, pharmacists will follow a robust clinical pathway which includes self care and safety-netting advice and, only if appropriate, supply a restricted set of prescription only medicines without the need to visit a GP.
- These clinical pathways have been developed with input from various experts including practising GPs, pharmacists, and antimicrobial resistance specialists as well as representatives from national organisations such as the National Institute for Health and Care Excellence (NICE) and UK Health Security Agency.
- Pharmacies have private consultation rooms that can be used for consultations with patients, and pharmacists can see patients for clinical services without always needing an appointment.
- Every pharmacist trains for 5 years in the use of medicines and managing minor illnesses, so they are well equipped to provide health and wellbeing advice to help people stay well. They are also experienced in spotting warning signs, otherwise known as red flag symptoms, which may warrant a referral to another healthcare provider.
- After a consultation with the pharmacist, the pharmacy will send a notification to the patient's GP on the same day or on the following working day.



Sussex
Parent Campaign

Pharmacy First Pharmacist Feedback

It's great to be able to treat people on the NHS with common conditions such as shingles, acute otitis media and uncomplicated UTIs without having to refer them to another healthcare professional. People can contact the pharmacy direct and arrange a time to come in and be seen by the pharmacist in our private consultation room.

Pharmacy First has been amazing at the pharmacy. Patient feedback has been very positive they appreciate the same day care and being seen by a pharmacist at a time that suits them. The role of community pharmacists is evolving, public confidence is building, and it is great that we can use our clinical skill set to help more of our patients within our local community. I am looking forward to the future, building on Pharmacy First and introducing other clinical services.

Pharmacy First for patients

- If you self-present at the pharmacy, check you fall within the age range for that particular condition.
- You may be referred back to the GP/onwards to another healthcare professional, this may be because the signs and symptoms you are presenting with do not fit the treatment criteria within the Pharmacy First service.
- The Pharmacist will need to undertake a full consultation and will need to ask you several questions (as a GP would).
- The outcome of the consultation may not necessarily be provision of medication, this is because this may not be the best course of action.
- Our pharmacy teams are very busy helping people, please be patient and our teams will do their best to assist you.

Pharmacy First Patient Feedback

My GP Surgery referred me, and I was seen straightaway and received treatment without needing to see the GP. Very easy.

Amazing service, so helpful.

The pharmacist was really thorough and I was impressed by the time she took and the advice and treatment I was given.

More people should know about this helpful service.

Excellent service. Saved me from going and waiting at the walk-in centre on the Saturday.

I couldn't get a GP appointment for my little boy, the pharmacy could see us straightaway though and gave him medicine for his ear infection. It was brilliant.

The pharmacy staff were lovely. Knowing I can visit the pharmacy directly is great.

NHS 111 referred me when I left my medicine at home, so quick and easy. I was worried I would be without my insulin.

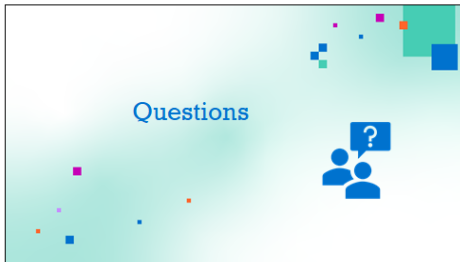
Locally Commissioned Services (LCS)

Locally commissioned services are local services commissioned mostly by local authorities. Integrated Care Systems (ICSs) may also commission local services from community pharmacy to meet the needs of their patients.

These will be dependent on the area.

Some examples across Surrey include

- NHS Healthchecks
- Emergency Hormonal Contraception (EHC)
- Condom Distribution (CDS)
- Supervised consumption
- Needle exchange
- Palliative care
- Antiviral



There were various discussions between members with the key point as follows:-

Again, there were questions from attenders as to what is planned in connection with the Community Diagnostic Centre (CDC) currently under construction in the Belfry shopping centre in Redhill. Dr S explained that there has not been much communication to local GP practices about this development. Linda Morris provided a link to the BBC website that provides more information as follows:-

<https://www.bbc.com/news/articles/cp85rlx8xj2o>

AGM Business

As normal practise, both Frank Curtis (Chair Person) and Les Rundle (Secretary/Treasurer) resigned from office and held themselves open for re-election. Both were re-elected on a show of hands from members.

Date of Next Meeting

Monday 8th September 2025 - 6:30 pm at Moat House Surgery.