SPRING STREET SURGERY
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Patient Participation Group Meeting Minutes

Date and Time: 08/09/2026 13.00-14.15
Venue: Spring Street Surgery- Room 1
Minutes taken by: Megna Persand

Attendees:
PPG Members- Mike Paling, Wijaya Mallikaaratchi, Valerie Glazier
Practice: Dr Shauna Mckeon, Megna Persand, Anamaria Vladoi

1. Introductions and Management Structure
The meeting opened with introductions and welcoming Anamaria.
The current management structure was discussed, including the roles of the management team and the changes that have been made to provide clearer lines of responsibility and additional operational support- shift from Assistant Manager to Operations Manager.

Previous meeting minutes were reviewed:
a) Agenda
It was confirmed that the meeting agenda is now being shared with PPG members in advance. This action has been completed.

b) Phone Usage in the Waiting Room
The group discussed phone usage within the waiting room.
It was noted that this is no longer considered to be a significant issue. Existing signs asking patients to switch off their phones are already displayed in the waiting room and near the front entrance.
No further action was considered necessary at this stage.

c) Notice Board
The suggestion of having a notice board displaying photographs of staff was discussed.
Staff have indicated that they would not particularly like their photographs displayed. It was agreed that this could be raised again at the next clinical meeting to see whether views have changed.
The group also discussed the possibility of using a notice board to provide patients with information about services available at the practice. This was considered a useful alternative.
The Practice has been updated with all recent up to date staff information.

2. Appraisal of the Merger- November 2024 and Stoneleigh site closure on February 2025
The merger of Spring Street Surgery and Stoneleigh Surgery was discussed, including the impact on the practice, staff, workload, systems and patient access.
It was noted that the merger is now embedded within the day-to-day operation of the practice. The increase in practice population resulted in a significant increase in workload and required changes across clinical services, staffing, administration and practice systems.

Issues with carpark has since settled and been resolved naturally. Surgery is lucky to have car park spaces and Bourne Hall Library on the doorstep.

Staffing and Workload
The increased patient population has placed additional pressure on both clinical and administrative capacity.
Workforce levels and roles have subsequently been reviewed and continue to be reviewed against patient demand. Additional staffing has been introduced where required.

Systems and Processes
The merger required the alignment of systems, workflows, templates and administrative processes between the two practices.
The practice continues to review processes to improve consistency and efficiency.
New artificial intelligence (AI) software on the horizon- Anima and Accurx Scribe- positive feedback from team.

Access
Increased demand following the merger has contributed to pressure on telephone and appointment access.
Additional GP and reception capacity is being introduced alongside increased use of digital access.

Communication
The practice has strengthened its internal management structure and communication channels to provide clearer lines of responsibility and greater support for staff.

Patient Experience
Patient experience continues to be monitored through the Friends and Family Test, National GP Patient Survey, complaints and other feedback mechanisms.
Overall patient experience remains positive, although access continues to be an area of focus.

Staff Feedback
Feedback from clinical and administrative staff has highlighted both the challenges of managing a larger practice and the benefits of having a larger and more resilient team.
Staffing, management and workload have therefore remained key areas of focus following the merger.

The practice is now moving from the implementation phase of the merger towards consolidation, with a focus on ensuring that staffing, systems and capacity are appropriate for the larger patient population.

CQC

The PPG was updated on recent communication from the CQC. The practice was contacted by the CQC in May 2026, with their initial enquiries focusing on staffing levels, workload, sickness absence, locum usage and access data.
The practice provided a thorough and detailed response to the CQC's questions and has not yet received any further communication.
The practice has undertaken a significant amount of work over the last few months and is continuing to prepare for a potential CQC inspection, ensuring that processes, documentation and evidence are up to date.

3. Staffing Changes

Clinical Staffing

Partner Update

The PPG was informed that Dr Kolburn Bains has been absent from the practice due to ill health for the past few months and has now made the decision to resign from the partnership.The practice thanked Dr Bains for her contribution and wished her all the very best for the future.

The practice will now begin the process of recruiting a new GP partner to support the ongoing development and stability of the practice.

A PPG member asked whether the practice is required to have three GP partners.
It was explained that there is no requirement for the practice to have three partners. However, the partnership workload and responsibilities are shared between the partners, so the number of partners has an impact on how responsibilities and workload are distributed.

GP Workforce and Capacity

The PPG also discussed the BMA guidance around patient-to-GP ratios. It was noted that the information available on the BMA website is relatively broad and does not provide a definitive ratio that can be applied directly to individual practices.
The practice explained how GP cover is structured at Spring Street Surgery, including how the five GP lists operate and how the overall GP workforce provides cover across the practice. This gives the practice flexibility in managing demand and ensuring patients have access to GP services across the different GP teams.

GP Reimbursement Scheme

The Practice explained that the practice is currently offering 49 GP sessions per week, in addition to 6 sessions provided by GP trainees. This overall GP provision includes sessions from ARRS GPs and GPs recruited through the new GP reimbursement scheme.

The group was updated that 3 more GPs are now providing five GP sessions per week through the GP Reimbursement Scheme. These additional sessions provide approximately

75 additional appointments per week and are helping to increase capacity and improve patient access.

Lead Nurse
Beth has taken on the role of Lead Nurse, working 34 hours per week.
The practice is currently reviewing nursing workload and staffing levels to ensure that nursing capacity is appropriate for the practice population.
The review includes:

- Clinical appointments
- Long-term condition reviews
- Procedures
- Administration
- Other nursing responsibilities

The aim is to ensure an appropriate balance between clinical and non-clinical nursing work.

Non-Clinical Staffing
Operations Manager
The group was informed that Anamaria Vladoi has joined the practice as Operations Manager and PPG representative.
Her role provides additional operational support and oversight across the practice.

Reception Manager
Jo Skinner is now in post as Reception Manager, providing dedicated leadership and management for the reception team.

Reception Staffing
Reception staffing has increased to 7 FTE following a workforce benchmarking exercise. All staff answer phones for the rush and rota for administrative duties implemented later during the morning.

Administration and Workflow
The practice is reviewing administrative workloads and processes to identify opportunities to improve efficiency.
AI-enabled systems, including Anima, are also being introduced to support administrative workflows and help manage workload.

Management Team
The management structure has been strengthened, with:

- Jo – Reception Manager
- Anamaria – Operations Manager
- Meg – Business Manager

This provides additional management oversight and clearer points of contact across the practice.

4. Service Update – Access and Appointment Booking
Telephone Access

Telephone demand continues to be monitored.
The practice experiences higher call volumes than some other practices within the PCN. The current approach to triage is one factor contributing to the way patients initially access services. The practice will continue to review telephone demand and patient feedback.

Online Appointments
The appointment diary has been reviewed in line with workload and patient demand.
A small number of routine appointments are now available for patients to book online as part of a trial. The uptake and impact will be monitored before any further expansion is considered.

NHS App
The practice continues to encourage patients to use the NHS App for appropriate services, including appointment booking and access to digital services.

July's Data:
60.7% of our list size registered - 9040/14870 patients
3427 prescription request ordered via app

Out of the 9040, 74.05% used the App in July 2026, which is a 61.03% increase since April 2026.

5. Telephone Demand and PCN Comparison
The group discussed the practice's telephone demand compared with other practices within the PCN. The PCN is currently operating a total triage model, which has changed how patients initially access services.
Feedback from other Practice Managers within the PCN has raised concerns regarding continuity of care and an increase in patient complaints associated with the total triage model.
The practice will continue to monitor:

- Telephone demand
- Patient feedback
- Appointment availability
- Continuity of care
- Complaints

The aim is to ensure that any changes to the booking system improve access without negatively affecting continuity of care. The current softer approach to triage might be an interim solution.

6. Communication – Staff and Patients
Staff Meetings
More frequent staff meetings are being introduced to provide opportunities for:

- Practice updates
- Staff feedback
- Discussion of operational issues
- Suggestions for improvement

Management and Staff Support
The strengthened management structure provides additional day-to-day support for staff. The introduction of dedicated operational and management roles provides clearer points of contact for staff queries, concerns and operational issues.

7. Patient Communication
Quarterly Patient Newsletter
The practice is developing a quarterly patient newsletter.
The newsletter will provide patients with regular updates regarding:

- Practice services and staffing
- New services and initiatives
- How to access the practice
- Seasonal health information
- Digital services
- Ways patients can manage their healthcare
- Updates arising from patient and PPG feedback

The aim is to provide patients with clear and consistent information and improve communication between the practice and its patient population.

8. Patient Feedback and Performance Data

Friends and Family Test
The group was updated on the latest Friends and Family Test feedback.
Overall patient satisfaction remains very strong, with 91–95% of patients recommending the practice throughout 2025 and 2026, despite the merger.

Positive feedback particularly highlights:

- Quality and compassion of clinical care
- Continuity of care
- Reception support
- Nursing services

The main areas for improvement identified through patient feedback remain:

- Access and waiting times on phones
- Appointment availability

Car park no longer seems to be an issue on FFT. The practice is addressing the above through increased staffing, improved management structures, digital access, online appointments and review of telephone and administrative processes.

10. National GP Patient Survey
The 2026 National GP Patient Survey results were discussed.

Measure	Spring Street	England 2026	Difference
Overall experience – good	87.1%	76.7%	**+10.4pp**
Telephone contact easy	37.1%	56.9%	**-19.8pp**
Website contact easy	73.0%	57.6%	**+15.4pp**

Overall Experience
Spring Street's overall experience score of **87.1%** is more than 10 percentage points above the national average of 76.7%.
This reflects the positive feedback also being received through the Friends and Family Test.
Telephone Access
Telephone access was identified as the main area for improvement. Only 37.1% of Spring Street patients reported that it was easy to contact the practice by telephone, compared with 56.9% nationally. This represents a 19.8 percentage-point gap.

Digital Access
Digital access was identified as an area of strength.
73% of Spring Street patients reported that it was easy to contact the practice through the website, compared with 57.6% nationally. This is 15.4 percentage points above the national figure.
The result supports the practice's ongoing work around Accurx, online appointments and NHS App use. The group also noted the increasing importance of online contact nationally.
In 2026, 30.8% of patients reported that they last contacted their practice online, compared with 22.4% in 2025 and 16.8% in 2024.

10. Actions and Next Steps

Action	Lead	Status
Continue sharing PPG agendas in advance	Practice	Ongoing
Review notice board and consider promoting practice services	Practice	To review at next clinical meeting
NHS App Open Day in October	Practice/PCN	Awaiting comms from PCN
Monitor online appointment trial	Practice	Ongoing
Develop quarterly patient newsletter	Practice	In progress
To raise awareness of GPHP Hub	Practice	Next meeting
To recruit new members	PPG	Ongoing

11. Summary
The PPG was updated on the progress made since the merger and the significant changes to staffing, management, clinical capacity and practice processes.

The practice has now moved towards consolidating the merged organisation, with continued focus on workforce capacity, access, communication and patient experience.
Patient feedback remains very positive, particularly regarding clinical care and overall experience.
Telephone access remains the main area requiring improvement, while digital access through the website is performing significantly better than the national average.
The practice will continue to monitor performance data and patient feedback and use this to inform future service development.

AOB:

Accurx Scribe

The PPG was also updated on the introduction of Accurx Scribe. The clinical team has provided very positive feedback, with clinicians finding that it allows them to focus more fully on the patient during the consultation, rather than having to concentrate on typing notes at the same time.The consultation is transcribed automatically, and clinicians are still able to review, edit and amend the notes before they are finalised and added to the patient records. Positive response from the PPG members.

Carpets and Premises

PPG member raised concerns that the carpet is looking worn and dirty and would benefit from refurbishment. The practice explained that the premises are due for refurbishment, although the lease has not yet been renewed, which means that larger refurbishment works cannot currently be confirmed. The practice aims to ensure the carpets are professionally cleaned twice a year, alongside regular deep cleaning of the premises, to maintain cleanliness and presentation.

Call Queuing and Callbacks

The PPG discussed the call queuing system and the availability of the callback option. Currently, patients are only offered the option to request a callback at the beginning of the call, rather than being able to select this option later while waiting in the queue.
The practice will speak to the telephone system provider to explore whether the callback option can be made available throughout the time a patient is waiting in the queue, which may improve the patient experience and reduce the need for patients to remain on hold.

Holistic Approach to Chronic Condition Management

The practice discussed its holistic approach to chronic condition management, with a focus on proactive recalls and ensuring patients receive the appropriate reviews and support.
The PCN Care Coordinator manages the chronic disease recalls and contacts patients around their birthday month, either before or after, to encourage them to attend for their relevant chronic disease reviews. This approach helps to coordinate reviews and ensure patients are proactively invited rather than relying solely on patients to contact the practice.

Meetings

It was discussed that the PPG will meet twice a year and evenings may be better. The proposed meeting months are May and October, with exact dates to be confirmed nearer the time.