

**Minutes of the Meeting of Herstmonceux Patient Participation Group (PPG) at Herstmonceux Integrative Health Centre (HIHC), 12.30pm on 23rd January 2025**

**Meeting 1 of 2025**

**Attendees:**

|  |  |
| --- | --- |
| **Patient Representatives** | **HIHC Representatives** |
| Lesley Droney, Chair  Jo Angear  Kitty Bond  Alaric Bond  Lynn Bowman  Paul Frost  Jonathon Glass  Lynda Primrose  Anne-Marie Ricketts  Sarah Rose  Mary McBurney (prospective new members | Violeta Ainslie, Quality & Governance Manager, IC24  Mel Ingham, Practice Manager  Casey Slaughter, Pharmacy Technician |

**Chair**: Lesley Droney

**Notetaker**: Lynda Primrose

1. **Apologies –** were received from Dr Galloway, Regan Delf, Kevin Warner
2. **Welcome to prospective new PPG Member –** Mary McBurney. Introductions were made.
3. **Violeta Ainslie , IC24’s Quality & Governance Manager**

Violeta had been invited to the meeting to update members on CQC Inspections and explained the process as follows:

* She was responsible for ensuring services within IC24 met current standards as required in the Health and Social Care Act, in readiness for an inspection.
* When a CQC inspection team arrived to carry out an inspection, it would comprise general inspectors and a specialist inspector depending on the venue (i.e. a GP for a GP Surgery, a Pharmacist for a Pharmacy, etc).
* GP Surgeries are usually given some notice as they are asked to provide the CQC with certain information beforehand; however, if there is an area of serious concern then a team could arrive with no warning.
* A draft report is sent to the surgery, giving a rating of Outstanding, Good, Requires Improvement, or Inadequate. Surgeries can challenge factual accuracy in the report.
* The CQC then produce a final report, which is published on the surgery’s website and made available to the public.
* The surgery is expected to produce an action plan within 2 or 3 months. The CQC then confirm they are happy with the action plan and, at a later date, check with the surgery to see if the plan has been implemented.
* However, since Covid the CQC have not yet caught up with their inspections and follow-ups.
* At the last inspection HIHC was given a rating of Requires Improvement and this was posted on the surgery website. No follow-up visit by CQC had been made.

Violeta reported that, although they have no idea when an inspection might take place, she will be carrying out a mock inspection at the surgery on 4th February and will compare results with previous reports. She will be accompanied by Rebecca Holcroft, the Regional Quality Director for IC24, as well as one of Violeta’s governance staff. Dr Galloway will be present. The two Co-Chairs were also invited to attend on that day.

**Action: Co-Chairs**

It was agreed that Violeta would produce a list of criteria for the whole PPG at a later date. **Action: Violeta**

In response to a question from the PPG asking if there could be a problem if the Clinical Lead was not based at the site, Violeta responded that this was permissible if they were based not too far away, but they would be expected to spend some time at the surgery and would obviously be expected to attend on the day of the inspection.

1. **Minutes of the last meeting on 7th November 2025**– These were agreed to be accurate.
2. **Matters arising**
3. **Newsletter** – Lesley and Lynda met with Mel in early December and it was agreed a draft PPG article would be sent to Mel as soon as possible. A first draft produced by Lesley and Lynda was tabled at the meeting and members were asked to submit their candid views/suggestions to them as soon as possible. **Action: PPG members**

Lynn Bowman and Paul Frost queried the fact that the article appeared to say there were only 4 items listed as the PPG’s Terms of Reference. It was explained that, for continuity, these were the key items which had been used in the new PPG Flyer. It was agreed to add a link to the full list and to put this issue on the next agenda.

1. **ACCURX On-Line Consultations –** Mel reported that this had proved very successful; however, it had become a victim of its own success, particularly as there was very high demand at the moment due to the amount of viruses that were circulating. Therefore, access had had to be reduced to ensure Dr Galloway and Dr Ansted had time to respond to requests. Availability had been Monday to Friday 8am – 5pm; the facility was now available 8am – 11am, Monday to Thursdays. Lynda reported this wasn’t very clear if a patient did not notice the warning banner/or logged in via the NHS App - it just said “not available”. Mel agreed to add the availability times and days to this message. **Action: Mel**

However, the good news was that they had now been given the go-ahead to recruit another GP to replace Dr Andersen and the session times for this new GP would be 6 per week, four more than Dr Anderson’s 2 sessions per week**.** The advert would state the surgery was looking for a GP with particular interest in female health**.** The current GP provision was:

2 salaried GPs : Dr Mohan Ragupathy for 4 days a week, Dr Andrew Sikorski for 1 day a week

1 locum/GP on a Friday (Dr Kumar alternating with Dr Ragupathy)

1 locum on a Monday (Dr Kumar, covering Dr Andersen’s hours)

2 remote GPs (Dr Galloway and Dr Anstead, for telephone appointments and On-Line Consultations).

Nigel – Advanced Clinical Practitioner

Debbie – Advanced Nurse Practitioner

Also, they were looking at a new telephone system which would allow patients to be put through to particular people such as the surgery’s Pharmacist, Mental Health Practitioner etc**.** This would take some pressure off the receptionists during busy times.

1. **Data Protection (GDPR)–** further discussion took place on how patients could be asked if they would be happy to receive texts or emails from the PPG. For example, to notify them of the date of the AGM**. Action: Mel to send out a one-off text to all patients asking for consent to receive messages from the PPG (via the surgery).**

Lesley reported that NHS Sussex had produced a GDPR document for PPGs but there is considerable debate about whether this is appropriate. One consent issue was whether PPG members should share their email addresses/telephone numbers. It was agreed our current consent form for this was adequate as it requires a lower level of consent than for clinical issues. Further discussion will be taking place at future PPG network meetings.

1. **HIHC Budget Pressures –** Mel reported that she was unable to provide figures at the moment as the HIHC worked to a financial year ending 31st March and IC24 to a financial year ending 30th June. However, it looked like the NHS was not going to provide additional funding to cover the rise in NI payments and the minimum wage, nor increases in doctor and nursing salaries. The surgery’s funding came from the Integrative Care Board (ICB). She would keep the PPG updated on this. **Action: Mel**
2. **PPG Annual General Meeting**

Members were updated as follows:

* The small hall had been booked for 6pm – 8pm on Wednesday 2nd April. A deposit had been paid. The maximum number for the small hall is 60.
* Tea and biscuits would be available from 6 – 6.30pm when the AGM would commence.
* Regan would welcome patients and give an overview of the PPG
* Violeta offered to give an overview of IC24
* Dr Galloway had said she would be available to update patients on HIHC
* Mel reported that Elaine Wakeman or a member of her team were able to attend to update on the NHS App.
* Questions and answers
* Each session would need to be given a timeframe
* Assistance from Dom was required to check the hall for access to the internet

1. **Staff and Practice Update / Friends & Family Survey**
2. **Staff Update -** Mel reported as follows:

* Unfortunately, the Mental Health Practitioner employed by the Local Federation, had left. However, she will be replaced. Poppy, the Mental Health Support Coordinator was still in post.
* A new Nurse had been appointed: Kate Foster.
* Ivy Bruce-Merrie had been appointed Clinical Governance Officer for Primary Care and would cover the three IC24 surgeries, working for Violeta.
* Lizzie was still working two days a week as Interim Nursing Director; her two management days for this covered HIHC and the two Brighton IC24 surgeries. PPG members expressed concern that Lizzie now had only two days a week for her specialised nursing role, with particular concern for her expertise with diabetic patients. Mel reported that this would be reviewed at the end of the interim arrangements at the end of February.

1. **Friends and Family Survey (texts sent to patients after appointments)**:

Mel reported that the results of the December survey were excellent. The main concerns were:

1) the GPs, and sometimes the patients, did not know why they were there, and

2) time-keeping.

She would send the latest figures to Lynda for inclusion in the minutes, along with a chart for the year to share with members. **Action: Mel**

**Post-meeting note: Please find below the results of the January survey.**

Very Good 77% (135 responses)

Good 17% (31 responses)

Neither good nor poor 2% (4 responses)

Poor 1% (2 responses)

Very poor 1.5% (3 responses)

1. **Feedback from East Sussex & High Weald PPG meetings** – in addition to GDPR as reported in minute 5c above, Lesley reported on a few other interesting things as follows:

* at Groombridge & Hartfield surgeries, all patients over the age of 16 are automatically members of the PPG, but not on the committee.
* NAPP – National Association of Patient Participation Groups – apparently this is a useful resource but not worth joining for £80 a year.

1. **Any Other Business**
2. Casey Slaughter, Pharmacy Technician, reported on a new NHS wide initiative called “Electronic Repeat Dispensing” <https://www.england.nhs.uk/long-read/electronic-repeat-dispensing-erd/>

which allows the prescriber to authorise and issue a batch of repeat prescriptions for up to 12 months with just one digital signature.  This would reduce the vast number of hours spent by GPs signing off repeat prescriptions and the processing time within the practice. Patients will have to consent to this. Text messages will be sent to patients saying they are eligible and providing information.

**b) Mary McBurney** stated that she would like to join the PPG. Members welcomed her to the group.

1. **Date of next meeting:** Thursday 13th March 2025, 1 – 2.30pm. Regan to Chair

Next Agenda :  Jai Jatta, IC24’s Sustainability Lead, has been invited to the meeting.

PPG Terms of Reference/Priorities.