

Minutes of the Patient Participation Group Meeting
Held on Thursday 30th April 2026
At Lincoln House – Highfield site

Meeting Summary

Focus on practice updates, patient engagement strategies, and operational improvements. Key topics included: the transition of chairing duties; website updates; pharmacy first initiative; NHS app utilisation; DNA (Do Not Attend) management; patient feedback mechanisms and PPG developments and support networks. The meeting also covered contract changes, PCN updates, and plans for patient education resources.

Attendees

Rachel Boulter (PPG member)
Careys Faichney (PPG member)
Brian Malyon (PPG member)
Juliana Reinaldos (Business Manager)
Dr. Bawani Sivagurunathan (GP Partner)
Jaki Smart (PPG member)
John Stacey (PPG member)
Tracy Wooten (Digital Transformation Lead, Delta PCN)

Minutes of Meeting

1. Surgery Update:

Chair transition between Brian and Jaki completed. Website updates planned to include staff photographs and pharmacy first information.
Dr. Sivagurunathan was welcomed to her first meeting.

2. Pharmacy First Initiative:

Content previously written by Chris Cook required approval before publication on PPG page.
National push for pharmacy services noted.

3. NHS App Utilisation:

It was noted from a poster in the surgery, that a voluntary organisation TechNT (Tech and Tea) holds sessions for technology usage including Apps. To be contacted to explore potential to assist patients with use of the NHS App.

4. Surgery Statistics and DNA Management:

This is an ongoing issue. The current system includes DNAs in total bookings i.e. face to face and telephone consultations, despite telephone DNA data not being collected. PPG members questioned this although it appears to accord with national guidance. Discussion was ongoing in relation to booking time of appointment; whether routine, and subsequent impact on DNA rates. Drilling down to compare DNAs of Medical and Nursing appointments was worthwhile in trying to identify any discrepancies and possible solutions. For example, routine and advanced bookings tended to have higher DNA rates. The text reminder system had been reviewed - currently sending reminders one week and one day before appointments. Proposal to trial three days and one day appointments for three months to assess impact on DNA rates. In response to a question raised about potential penalties for patients who repeatedly DNA, it was stressed that before any patients were removed from the practice, warning letters would be issued and most importantly their individual circumstances would be reviewed and considered by the

clinical team. Regarding 'consent by proxy' to access records, this had to be done for each health organisation. Use of NHS App allows this to be set up for GP Practices.

5. PPG Mailbox Email Response:

Email response reworded and template approved. Emphasis placed on medical query limitations and periodic mailbox checks.

6. Patient Feedback:

Friends and Family survey name causing confusion. The link from the patient survey request takes patients to a page on the practice web site headed "Friends and Family". It has been reported that some patients log out thinking that they have been directed to the wrong site. site. Responses average 300 per month. Google reviews now primary feedback mechanism following CQC changes. It was asked whether patients get to state their preferred site when requesting a non-urgent appointment. Chatter on social media suggests this was a problem for some patients. To be followed up.

7. Complaints Report

January-March complaints reviewed - 12 (January), 8 (February), 9 (March). 8 upheld, 10 partially upheld, 11 not upheld. Themes to be identified.

8. Website Activity:

Very low traffic on PPG website. Plan to increase content frequency with monthly posts including health information and surgery updates.

9. Abdominal Aortic Aneurism Screening:

The above National screening programme was presented and discussed. Of the 99.2% men in Hertfordshire invited, there was an 82.3% uptake but only a 44.8% follow-up rate to see a hospital nurse for abnormal scans. In deprived areas this dropped to 27%. This was of concern. The PPG wished to know if there was any data for Lincoln House and what action was being taken. It was agreed that a brief notice raising awareness of AAA screening should be posted on the PPG website. Clarification was sought about the communication between the hospital and Practice if an abnormal result. It seemed that unless the hospital had actioned further treatment or follow up, an abnormal result would not be posted to the Practice. This was deemed a missed opportunity.

10. GP Contract Changes:

Housekeeping exercise required for appointment mapping. Same-day appointments for urgent cases maintained. Safety limits on clinician workload emphasised.

11. PCN Updates:

A Respiratory hub had been established across Delta PCN practices, i.e. Lincoln House; Bennetts End; Haverfield Surgery in Kings Langley and Archway Surgery in Bovingdon. A future hub was planned at Lincoln House. PCN updates to be provided to PPG.

12. PPG Self-Assessment Tool:

The SWH PPG Network had requested that PPGs review and complete both this and the PPG Development Tool Kit (See below). Brian presented a completed self-assessment, depicting a total score of 82 out of 150. The assessment identified both strengths and areas to be considered for improvement. The latter included more regular PPG meetings and patient contact methods. Whilst previous recruitment campaigns had shown some success; retention was also a

problem. It was agreed to restart text messaging for target recruitment of underrepresented groups. Discussion would continue in more detail at the next informal meeting.

Patient Education topics were already agreed with Dr. Parbat at the last meeting starting with a video on Hypertension. Dr. Sivagurunathan agreed to follow this up.

It was thought that promotion of the new Health Pod for routine assessment measurements, would be enhanced if it was written/endorsed by a patient. Other PPG monthly highlights could be posted on the PPG website. One on AAA assessment had already been agreed.

Representation on the ICB was discussed. As Juliana was a member of the ICB it was suggested that she could give a brief report on topics of patient interest to PPG members. It was also reported that any future CQC visit would require direct contact with the PPG. Further detail on this would follow including external reviews of patients via Google.

!3. PPG Development Tool:

This was briefly discussed as Practice Staff had to leave the meeting early. Jaki to complete and present this for discussion at an informal meeting of the PPG members and at the next formal meeting in July. A review of both tools could then be posted to The SWH PPG Network in June.

14. Advice and Guidance Services:

A presentation on recent updates to this service had been given at a PPG Network meeting. It included a forthcoming development of a Single Point of Access (SPoA) for all specialties. The benefits to patients were discussed, although patients surveyed had largely been unaware of the current service. Patient Groups were keen that where possible the patient should be involved in a three-way discussion between Specialist and GP. It was recognised that there was concern amongst the medical profession in primary care that this might over time erode skills. This will be put on the agenda of the next meeting so that the PPG could gauge the views of the Practice and add to the discussion. NB also to include the impact of the new West Herts Portal.

15. AOB

Juliana outlined changes the Practice were considering to reduce the availability of the E-Consult Portal over the weekend. The rationale was based on current usage and the number of patients who were entered on the system, but who no longer required intervention by the Practice on the Monday morning. More information to follow.

16. Proposed Date and time of Next Meetings:

Thursday 23rd July at 1300-1430 (Highfield)

Thursday 22nd October at 1300-1430 (Venue to be confirmed)

Actions Agreed

- Juliana: Update website with staff photographs and pharmacy first information
- Juliana/Jaki: Contact TechNT regarding NHS app support
- Juliana: Trial modified text reminder system (three days and one day before appointments) for three months
- Rachel: Implement approved email response template
- Juliana: Chase eConsult account manager regarding preferred site functionality
- Stephanie: Break down complaints into theme

- Juliana: Provide PCN updates for PPG meeting
- Brian: Complete assessment tool review
- Jaki: Complete maturity model assessment review
- Juliana/Jaki: Restart PPG recruitment via text messaging
- Dr Parbat/Dr Sivagurunathan: Create hypertension education video
- Juliana: Promote health Pod for routine measurements

Key Decisions

Decision made to trial modified appointment reminder system with three days and one day before appointments rather than current one week and one day system. Plan to review effectiveness after three months.

Next Steps

Review of text reminder trial in three months. Implementation of PCN updates to PPG communications. Development of patient education resources including hypertension video. Restart of PPG recruitment activities.

Post-Meeting Reflections

Discussion highlighted the need for clearer communication channels between primary and secondary care services. Emphasis placed on patient education and engagement as key components of practice development. Recognition of the evolving landscape of primary care requiring adaptation to new systems and patient expectations



