The Family Practice Western College Patient Participation Group

Minutes of the meeting held on Zoom: 8/9/2025

Present:

Jill White (JW) (Chair)	
Ann Nicholls (AN)	
Sarah Udo-Affia (SU-A)	
Penny Dobson (PD) (Minutes)	
Ian Goodenough (IG)	
Dr James Baker (JB) (GP)	
Kathy Turner (KT) (Practice Manager)	

1. Apologies:

Nick Benson	
John Plumb	

2. Minutes of last Meeting (06/09/2025)

These were approved.

3. New System: Improving Access to Appointments (JB) (See notes at end)

JB outlined the main points in the attached paper. This new system, affecting routine (non-urgent) appointments, enables patients to more effectively submit requests online and receive a reply within 1 working day. This new system will start on October 1st 2025; it will be closely monitored to see how effective it is – and to highlight and address any issues that may arise. Other services at TFP (eg urgent/same-day requests by phone, blood tests or treatment room appointments), remain the same.

The purpose of this meeting was to answer questions from PPG members about the new system.

JB said that until now, the online booking system (via TFP website) had operated on a part-time basis and would close when capacity was reached; now it will operate from 8am – 6.30pm Monday – Friday, when there will be a dedicated team to respond to on-line requests (see paper).

SU-A asked whether the message on the TFP phone number will change? JB said that it will very slightly to reflect the new system, but they anticipate that there will be fewer people needing to use the phone as a result of the new system.

AN asked: will a patient still be able to see their own doctor (on e-consult)?

After the e-request has been triaged – and, if it needs clinical input, the patient will be sent a text back with a link to either book a telephone/visit appointment with named GPs (enabling the patient to choose approximately up to 2 weeks in advance), or a link to book a blood test etc. This link will be effective for 7 days.

IG asked: how is the new system going to be communicated to patients?

JB said that patients will be informed by text within the next couple of weeks; there will also be posters in the Practice waiting area, plus (as above) a new message on the telephone.

JW asked what the implications might be for strengthening a clinical care system that relies on written patient evidence, rather than the spoken word, with all its nuances?

JB agreed that there are limitations to the written word – and this system risks losing some important human interaction; however, this system will allow Practices to meet the increasing demand for its services and with resources being correspondently stretched.

PD asked whether the anticipated increase in uptake for e-consult will put pressure, both time and money-wise on TFP?

JB said that this will be monitored; it may be that better organisation of routine appointments will release time for the reception team and potentially the clinical team. The Pembroke Road Practice has been operating this new system for over 18months – and to apparent good effect.

It was agreed that the PPG will put this issue on the agenda at future meetings. JW suggested that in the meantime she could act as a "go between" if PPG members have any issues or concerns on this system – to feedback to TFP.

JB was thanked for his time and clear explanations.

NB See notes at end.

4. Staffing and DNAs

KT reported that the TFP's nursing associate will be going on maternity leave next month. and one phlebotomist will be leaving this month. The other phlebotomist is filling some of the hours but not all. Recruitment is proving a little challenging (it often happens that you offer a job, they accept and then you don't hear from them again which is time wasting and frustrating!). TFP has recruited someone for the short term, who can work during university holidays, so will provide some resilience then, but is not permanent. TFP is interviewing again this week and hope for more success.

TFP has had one resignation in the reception team, who has been replaced with an experienced receptionist from central Bristol (saving the pressure of training again).

Report Name: DNAs (Nurse) - Flu excluded June 2025 - Aug 2025

Patient Population: All Appointments

Patient Age

0-17	12
18-39	102
40-64	64
65 and older	<u>52</u>
	230

Report Name: DNAs (GP) - Flu excluded June 2025 - Aug 2025

Patient Age	
0-17	17
18-39	49
40-64	28
65 and over	2 <u>4</u>
	110

There has been an increase in Nurse DNAs and a decrease in GP DNAs

5. Matters Arising from Minutes 9/6/2025

Item 3 PD reported that she has made contact with Julie McFadden, PCN Manager, via KT, and has been invited to the Poorly Puppets session with parents on October 14th, to talk about potty training and the resources of ERIC, The Children's Bowel & Bladder Charity, which she set up in 1987.

Item 4 KT reported that there is a whole section on Social Prescribing on the Practice website: https://www.healthwest.co.uk/social-prescribingibing

Item 7 KT has investigated, but the Grade 2* Listed Building status restricts the Practice from putting a handrail along the path in front of the building.

6. AOB None

Proposed date of next meeting:

1/12/2025

PD 09/09/2025

The Family Practice Improving How You Access Appointments

From **1st October 2025**, The Family Practice will be changing the way routine appointments are requested. These changes follow new mandatory NHS England contractual changes and are designed to make access fairer, faster, and more convenient for all patients.

Why are we changing?

- **Fairness:** Appointments will be allocated based on clinical need, not on who phones first.
- **Convenience:** No more waiting in long phone queues for routine matters.
- **Efficiency:** Requests are reviewed by the right team member, meaning you are directed to the best person to help you.
- **Urgency protected:** Phone lines remain open for urgent, same-day needs.
- Mandatory: In the new NHS contract, "from the 1st of October 2025 GP practice
 must ensure that their website provides continuous access to online
 consultation forms during its core hours between 8am to 6:30pm.

How will I request an appointment?

- Routine appointments (non-urgent):
 Submit a request online using the Accurx system (link available on our website).
- Urgent/same-day requests:
 Continue to phone the practice (ie. no change).
- Blood tests or treatment room appointments:
 Continue to phone the practice (ie. no change).
- If you cannot use the internet:
 Call reception a member of staff will complete the online form with you.

What happens after I submit a request?

1. Reception team reviews it

 They may direct you to self-care, pharmacy, or another service if more suitable. o If it needs a GP, your request goes to the GP triage team.

2. GP triage

- The GP will decide the best next step (aim within 1 working day):
 - Send advice by text or phone
 - Offer a text booking link for an appointment
 - Book you directly into a duty or semi-urgent slot if needed

3. Booking your appointment

- o If you receive a booking link by text, you can choose a time that suits you.
- o New appointments are released every day at 10am.
- o If you cannot book online, reception will contact you to help you.

What stays the same?

- Same-day urgent appointments are still by phone.
- You can still call reception if you struggle with online forms.
- Care will continue to be provided by the most appropriate clinician (GP, pharmacist, physio, nurse, etc.).

How will we monitor this?

- We will review the new system every week during the first 6 weeks.
- Patient feedback (via Friends & Family Test, surveys, and PPG) will help us refine the system.
- We will make adjustments if problems are identified.

Key Message

This change is about **fairer access**, **less time waiting on the phone**, **and making sure the right patients see the right clinician at the right time**.

Thank you for supporting us in improving how we deliver care.

The Family Practice