

PUDDLETOWN SURGERY

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**Minutes of Patient Participation Group Meeting
held at 6.30pm on Wednesday 19th March 2025
at Puddletown Surgery**

In attendance: Dr Jonathan Bond, Clare Stickland (Practice Manager), Richard Burden (Chairman), Anthony Felstead (Vice Chairman), Glad Antell, Victoria Maslin, Ron Smith, Georgie Webb, John Ridout, Lionel (John) Mayo, Jim Gammans (Community Engagement Officer), Kate Trevett (Care Coordinator/Social Prescriber), Angie Benford (Secretary)

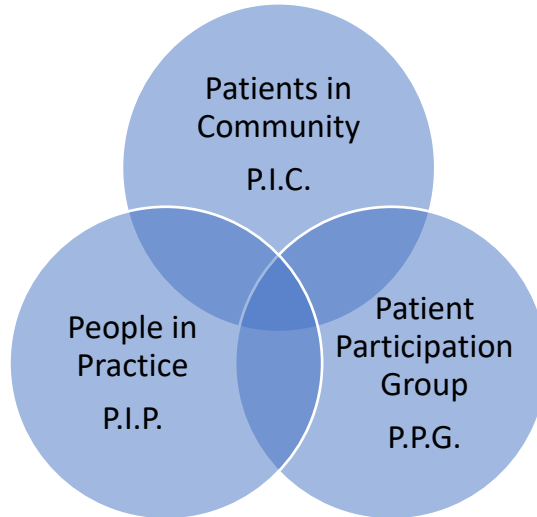
Apologies: Teresa Baker, Dawn Arthur, Jane Pryce

		ACTION
1.	RB welcomed everyone to the meeting.	
2.	Apologies as above.	
3.	The Minutes from the last meeting were accepted.	
4.	Matters arising from the last meeting i. WiFi in the waiting room: full WiFi cover is still not available to all, seemingly for those using iPhones as Android phones seem to be able to pick up the signal. JG will feed this back to the IT Department. ii. Neighbour Car Scheme: GA noted that she has been in touch with the Coordinator, Terri, who thanked the Practice for their support from the sale of books in the waiting room. She noted that there are not enough drivers who are willing to undertake some of the longer distances. GA noted that insurance for the drivers is a big issue and they are looking into having group insurance. It was noted that there is also a Hospital Car Service available and one patient is known to have booked both services on at least 4 occasions, resulting in both vehicles turning up! GA will contact Terri to see how this can be avoided in future. The Scheme is now also looking for a Co-ordinator (so that Terri can retire) and a Treasurer – CS will put this into the Newsletter as well as on Facebook in the hope that more volunteers will come forward. iii. Waiting Room Blood Pressure machine was officially “launched” on 28 th February with the President of the Rotary Club in attendance to cut the ribbon, supported by two members from the Lions Club. There has been a steady stream of patients using the machine, although some people just don’t want to know their results! A few of the PPG members have been into the Practice to encourage people to use the BP machine and this has been welcomed by CS. More people are still	JG GA ALL CS

	<p>needed to continue this support for a number of weeks to come please. Let AB know if you have any availability. KT noted that finding people with high blood pressure without symptoms is a big focus for the year ahead.</p> <p>iv. Experts by Experience: KT noted that yesterday she was part of a team who met to discuss how to encourage patients with diabetes to become part of the Experts by Experience initiative. As the BP machine is now in situ, the PCN thought it would be a good idea to use the machine as part of a “jumping off” exercise for patients with cardiovascular disease first, using the experience as a guinea pig! Patients will be invited to attend sessions in due course – and AB agreed to give her input as required. AF noted that there are 3 main questions which need to be asked of patients attending the sessions: Why did you come today? Did you get what you wanted out of it? What could we do better?</p> <p>JG noted a similar initiative had taken place in Weymouth for patients with pre-diabetes and hypertension. The PCN identified appropriate patients who were “booked” onto clinics. A Dietician attended with a blank flipchart and asked what patients wanted to know – it was all about the patients’ questions, not about lecturing them on the clinical aspects of their condition. AF agreed that whilst there needs to be a clinician or someone with an area of expertise to lead such sessions, it very much needs the patients’ point of view – from which smaller support networks are likely to grow (as has his own, named the 4 Prostateers!). KT noted that there is a new Dietician and Lead Diabetes Nurse starting in May – she is collecting names for future reference!</p> <p>LJM commented that manufacturers should be made to disclose the actual sugar content on packaging, something which is crucial for patients with diabetes. He also made the point “who knows white bread converts to sugar in the body?” RB suggested this is something that could be taken to a higher level by our MP. JJB noted that everyone needs diabetes education.</p>	<p>ALL</p> <p>AB</p> <p>RB</p>
<p>5.</p>	<p>PPG Core Group Meetings Feedback</p> <p>RB gave an update on issues covered in the last Core Group meeting as follows:</p> <p>i. Improved digital literacy is the current Practice focus.</p> <p>ii. “Direction of the PPG” was discussed at length in today’s meeting with each Member sharing their reasons for joining and being part of this PPG, with AB reading out some which had been forwarded to her in Members’ absence.</p> <p>We need to know if the PPG is “doing the right thing” and understanding the reasons for it being in existence. The resounding message was that everyone wanted to contribute positively to the ongoing success of the Practice by being involved in a 2-way dialogue with the Practice team, and to be able to give something back for all the support it provides.</p> <p>Those who shared their reasons for joining this PPG offer a wide range of experience, skills and knowledge, some being more able to volunteer at events than others but all willing to do what they can.</p>	

AF created a Venn diagram on a flipchart, similar to that below, to summarise the long discussion that was had to demonstrate

- i. How we're trying to engage with the P.I.C
- ii. The P.I.P is trying to help the P.I.C
- iii. The PPG is trying to enable all of the above but how do we enable it?



JG felt the use of the flipchart summarized the relationships very well and tries to “sell” our model to other PPGs. He is impressed by how proactive the Group is and was very complimentary about how it is developing. The fact that a GP Partner and the Practice Manager attend every meeting is exceptional and confirms that the Practice is “listening” to what patients are saying. RB noted that prior to Christmas there had been an element of burnout in some of the Members as there was so much going on - and caution needs to be exercised so that the PPG is not seen as trying to run the Practice, ie imposing its views. RS noted that for every project undertaken there needs to be a Lead PPG Member so that the same individuals aren't always responsible for taking them forward.

GW had taken the decision to step down as a formal Committee Member as she felt unable to contribute to the volunteering activities anymore. However, she will continue to receive the Minutes to keep in touch with what is going on. Our grateful thanks go to Georgie for her support over the years and we wish her well in the future.

ALL

GW

6. Practice Manager's Update:

Phone system upgrade: Our phone system will be undergoing an upgrade in the next few weeks but we hope that patients will not notice any change. It should be more efficient for the team using the phones at the surgery.

This has been necessary to meet NHS England's accredited supplier list which is a database of pre-approved suppliers that meet the organisation's specific criteria for quality, reliability, and compliance.

Patient questionnaire text campaign: Patients may receive a text over the next few weeks from NHS No Reply with a questionnaire as a link. We are trying to ensure that the data we hold for all our patients is accurate and up-to-date. Other surgeries who have run similar campaigns have identified more patients who are unpaid carers

ALL

as well as those who have served in the Armed Forces which means we can offer better support and quicker access to some health services.

We will also have paper questionnaires at Reception for patients to complete when they come into the surgery and it would be really helpful if PPG Members could hand them out when they are encouraging the use of the BP machine. **Post meeting note: the campaign is beginning on 7th April so please can we have some volunteers – AB will sort a rota if you can give her your availability.**

ALL

Cervical screening programme funding application: In February 2025, the NHS England SW Vaccination & Screening Team wrote to GP practices in the South West inviting them to bid for funding to run a cervical screening uptake improvement project targeting health inequalities in their local population. Cervical screening rates at Puddletown Surgery indicate that a significant portion of eligible patients are not engaging with the programme. Non-responders make up 13% of the cohort, with 36% of them never having attended a screening. This highlights the need for targeted interventions to address barriers such as fear, misinformation, lack of awareness, and practical accessibility issues.

To tackle these challenges we proposed that, the project will implement several key strategies:

Personalised Contact: Direct engagement with non-responders through phone calls, allowing trained staff to discuss individual concerns and book appointments.

GP-Signed Invitations: A personal letter from a named GP will encourage participation and emphasise the importance of screening.

Educational Sessions & Workshops: Led by clinicians, these sessions will provide factual information, debunk myths, and offer a safe space for discussion to encourage uptake.

Pre-Appointment Information: Clear, health-literate materials will be sent out before national invitations to ease anxiety and address common concerns.

Targeted Awareness Campaigns: Posters, leaflets, and digital outreach will be used to increase knowledge of the importance of screening, with a focus on engaging hard-to-reach groups.

Providing Supportive Screening Environments: Recognising that some patients require additional support, efforts will be made to accommodate sensory needs, language barriers, and cultural considerations.

I am pleased to share that we were awarded funding of £5000.

Staff news: Our new members of the nurse team, Sophie and Lucy have both settled in well.

Friends and Family Test

In **December**, 17 patients left us feedback with 100% of patients likely to recommend us.

In **December** you said: • I could not have asked for anything better, from booking online, to receipt of medication and everything in between. Don't tell everyone, let's not get this excellent surgery swamped. • Amazing service, the nurse was absolutely

amazing. • Coffee machine • Joined the surgery today and got to see Dr Bond about a chest infection. Lovely practice building, bright, airy and clean without the usual notices dotted about randomly. All the staff I interacted with were really great and Dr Bond was very helpful and professional. I hope I don't need to come in much but when I do it feels like you will offer a first-class service, much appreciated in this day and age. • Nothing as always consultation efficient, allowed to have my say, treatment always excellent. Staff and Doctor always friendly while being efficient which puts you at ease • I have no suggestion so happy with our surgery very lucky

The Surgery's Response • Unfortunately, we are unable to provide a hot drinks machine due to Health and Safety. If you need a drink while you are waiting, please ask the receptionist for a glass of water. • Thank you for your comments, they are always valuable and help us to continue to improve our service

In **January**, 20 patients left feedback with 95% likely to recommend us.

In **January** you said: • We have just moved from Charminster and had to change our surgery. We attended this morning and have nothing but praise for doctor and staff. Very pleasant atmosphere and very welcoming. • Working perfectly, don't change anything • It would be useful if there was an automated text to inform you when your prescription is ready to collect. • Wonderful place • Booked appointments are restricted to after school hours, making it difficult for those with school age children. The only option is open surgery. The availability of bookable appointments during school hours (even one or two days) would be helpful. • Excellent practice. Easy to get appointment or E consultation. Helpful staff. Good Wi-Fi for waiting room would be nice but obviously not essential. Thank you, the hard work is appreciated. • So nice to see a doctor and be listened to. Thank you • Comprehensive and courteous. • This is a fantastic practice. In my opinion the service you provide cannot be bettered. • I didn't know how long I should expect to wait, in morning surgery. An estimate would be helpful. But having a drop in surgery is still great!

The Surgery's Response • Thank you for your comments, they are always valuable and help us to continue to improve our service. • Unfortunately, our clinical system does not allow us the facility to send an automated txt message when your prescription is ready. If we had to do this manually it would have a significant impact on the length of time it would take to process your prescription request. • Our GP registrar has bookable appointments during school hours • The Wi-Fi in the waiting room is not something we have any control over as it is provided by NHS Dorset. We have been informed that it is now working again. • It is difficult to predict how long the wait time will be during open morning surgery however, you are welcome to ask the receptionist how many people there are in front of you.

In **February**, 14 patients left feedback, with 100% likely to recommend us.

In **February** you said: • The service is brilliant. • It was perfect. • More doc appointments • Keep doing what you're doing • It was great • Thorough and friendly consultation

The Surgery's Response • We offer face to face and telephone booked appointments throughout the day with our GPs 5 days a week as well as open morning surgery, where at least two doctors are available to see patients on the same day. We also offer extended access appointments one evening each week and on a Saturday morning. Feedback from our patients generally suggests that we do offer good access to our GPs, with a good mix of different types of appointments

	available. • Thank you for your comments, they are always valuable and help us to continue to improve our service.	
7.	<p>Update from Kate Trevett, Care Coordinator/Social Prescriber</p> <p>KT noted that the Practice is shortly to be recognised as being “Armed Forces Families-friendly”, following some training to be undertaken by Dr Bond.</p> <p>KT shared some good news, that Age UK have been funded to restart a Befriending service locally but that more volunteers are needed. It will begin with individuals receiving six sessions of support as previously described.</p> <p>More good news is that from 9th July the PCN, with Age UK, will be able to offer free, paid-for care, for a period of 2 hours for cared-for individuals, enabling carers to have some well-deserved time to themselves. The scheme will be funded for a period of nine months. More details to follow.</p>	ALL
8.	<p>Update from Jim Gammans, Community Engagement Officer</p> <p>JG shared that the Dorset Museum are looking to expand how they work in the local community, wanting to make use of their community rooms. The Museum is also happy to attend various events, bringing some of their artefacts with them and are also willing to offer “behind the scenes tours” for various groups to visit, eg the PPG. Anyone with specific enquiries should contact the Museum direct for further information.</p> <p>A discussion took place around the proposed abolition of NHS England, recently announced by the Government. JG noted that the savings of 50% by September (!) are not aimed at people on the front line, eg GPs and Hospitals, but is more to do with management and administration. JG expects that there will be significant changes in future but no further details at this stage.</p>	ALL
9.	<p>Any Other Business</p> <p>i. KT is working on a project with Dorchester Arts for patients with dementia at the Corn Exchange.</p> <p>ii. RS raised the question of what the Practice needs help with most in terms of a next project for the PPG, perhaps in terms of another piece of equipment to benefit patients. Post meeting note: the Partners feel it would be more appropriate for fundraising to take place (if it’s needed) every other year rather than patients being asked to part with money at the vaccination clinics every year, which may put them off attending.</p>	KT
10.	<p>Date of next meetings:</p> <p>Wednesday 18th June 2025, 6.30 pm Wednesday 17th September 2025, 6.30 pm Wednesday 17th December 2025, 6.30 pm</p>	ALL