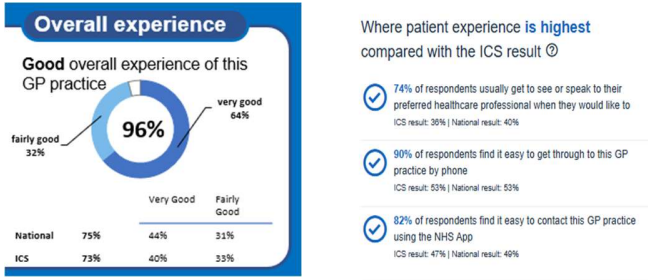


306 Medical Centre

Minutes of PPG Meeting held on Thu 11 Sept 2025

Present: Staff: Mo Dawood (MD-PM), Jai Boucher (JB)
Patients: Alan Robertson (AR), Tina Thorpe (TT), (KL), Kwame Ocloo (KO), Clive Cockram (CC), Sandra Floy (SF), Phillip Lipsidge (PL), Kathleen Lipsidge (KL), David Barlow (DB), Roger Beckett (RB) Khurshid Qureshi (KQ),
Online MS Teams: Jacqueline Pick (JP),
Apologies: Vajira Wignarajah (VW), Richard Cooke (RC)

	Agenda Item	Timings																
1	Meet & Greet	12.15 - 12.30																
2	Welcome & Introductions A warm welcome to everyone, particularly our new member, Mrs Jacqueline Pick who joined the meeting via Team link	12.30 – 12.35																
3	Minutes of the last meeting and any matters arising The minutes of the last meeting were deferred, and it was agreed that these would be reviewed again for corrections with PPG member volunteers (PL) before uploading. These were circulated by email and printed but there was some confusion about the date. These were indeed correctly dated minutes, corrected for typographic errors and agreed to be reviewed. Matters arising <ul style="list-style-type: none"> It was agreed that the group would write to Helen Hayes MP and Ellie Reeves MP copying the SEL ICB as agreed at the last meeting. Action pending whilst TT had not had the time to review the draft. 	12.35 - 12.45																
4	Practice Slot - GP Patient National Survey Results Survey results were reviewed and noted that performance was above average on most indicators. The practice would strive to maintain these. The results ranked the practice amongst the best performing practices in Southwark and likely at the top rank. Report available on the website: https://306medicalcentre.nhs.uk/wp-content/uploads/2025/07/GP-Patient-National-Survey-July-2025.pdf  <p>The infographic displays the overall patient experience of the GP practice, which is 96%. This is broken down into 'fairly good' at 32% and 'very good' at 64%. It also compares the practice's performance against the ICS (Integrated Care System) and National averages for three specific metrics:</p> <table border="1" style="margin-left: 20px;"> <thead> <tr> <th>Metric</th> <th>Practice</th> <th>National</th> <th>ICS</th> </tr> </thead> <tbody> <tr> <td>74% of respondents usually get to see or speak to their preferred healthcare professional when they would like to</td> <td>74%</td> <td>39%</td> <td>40%</td> </tr> <tr> <td>90% of respondents find it easy to get through to this GP practice by phone</td> <td>90%</td> <td>53%</td> <td>53%</td> </tr> <tr> <td>82% of respondents find it easy to contact this GP practice using the NHS App</td> <td>82%</td> <td>47%</td> <td>49%</td> </tr> </tbody> </table>	Metric	Practice	National	ICS	74% of respondents usually get to see or speak to their preferred healthcare professional when they would like to	74%	39%	40%	90% of respondents find it easy to get through to this GP practice by phone	90%	53%	53%	82% of respondents find it easy to contact this GP practice using the NHS App	82%	47%	49%	12.45 – 12.50
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PPG members discussed the statistical implications of the sample size and helpfulness of the practice reception team.

The practice was commended for doing so well. However, KO cautioned that we should not rest on our laurels and maintain the efforts. MD explained that we have performed well consistently over the years. The consistently good survey outcomes over the years

	reflect our efforts and patient focused ethos at the practice.	
5	<p>Open Session – PPG Members Slot & Updates</p> <p>a) Online Triage: From 01/10/25, the practice is required to provide online triage access to patients during core hours as discussed at the last meeting. MD assured the PPG that this would not change our current access arrangements. He assured members that we would always be mindful that not everyone will have a good grasp of technology, and the practice would support their access needs.</p> <p>MD explained that online triage for the practice seems just another way for patients to contact the practice, and the practice would continue to provide a choice of access options to suit our patients.</p> <p>MD cautioned that the practice may have to reluctantly consider changes if the practice is later performance managed on the number of triage requests received. With the current access options it was expected the triage requests would be on the low side as our patients, can also email, use online web forms or call reception to access services. Most surgeries only provide one access option to patients to book appointments, and many do not provide email access at all.</p> <p>PPG members were concerned that the practice’s hand may be forced by regulation to go total online triage like other practices. MD assured the PPG that practice would resist any change that adversely impacts on patient access in line with our patient focussed ethos.</p> <p>b) Privatisation was raised and MD discussed the NHS constitution – right to choose and Accredited Quality Provider (AQP) status. These service providers then bill the local authority, and patients exercise their right to be referred to accredited services which then bill the local NHS Integrated Care Board (SE London ICB).</p> <p>c) MD discussed ongoing issues with Synnovis e.g. duplicate blood test results, result ranges etc and its impact on the practice. MD updated the PPG about the proposed urine syringe bottle, where it was expected that the patient or clinicians would have to use a syringe to draw up urine. MD explained the challenges and infection control risks where any urine drips or is spilt during the process. Also, patients struggling to use the devise due to dexterity/mobility/frailty issues. He explained the challenges for the practice as we do not have Health Care Assistants (HCA) who in larger practices are allocated daily slots for this purpose</p>	12.50 – 13.00
6	AOB - Nil discussed	13.00 – 13.15
	<p>Date of next meeting agreed: 11 Dec 2025 at 12.30pm</p> <p>The meeting was brought to a close at 1.36pm</p>	
Tentative 2026 Meeting dates for the diary: 12 Mar, 11 Jun, 10 Sep, 10 Dec		