

**Pelham Medical Group
PATIENT PARTICIPATION GROUP (PPG)**

Minutes for PPG held on Wednesday 18th February 2026 at 5:30pm

See separate attendance sheet.

Practice attendance

Richard Ellis - Business Manager (RE)

Dr I Prentice – GP Partner (IP)

Lisa McGrath – PCN Manager (LM)

RE welcomed everyone to the meeting and shared a presentation.

Staff Updates

- Dr Elder has retired after 37 years in practice.
- Dr Osato left the practice in December.
- Dr Olayinka started in September, working Tuesdays and Fridays (replacing Dr Elders hours).
- The practice is currently recruiting for a new GP. We do have locum GPs working at the practice to help support capacity.
- We are hoping to recruit a new health care assistant (temporary position) starting at the practice from March/April to help cover maternity leave.
- Our First Contact Practitioner role is no longer available. (This was focused on assessing patients with Musculoskeletal conditions - MSK). Instead of replacing the position we will be reinvesting the funds into a GP role.

RE shared the current staff model to make it visibly clearer how the practice is maned on each day of the week and where the gaps are. The practice is hoping for the newly recruited GP to work Monday, Tuesday and Wednesday to help with demand.

Within the PCN we also have 3 members of staff going on maternity leave this year. Our PCN manager and a care co-ordinator (administrator). These roles will be covered across the practices. Our health and wellbeing coach will finish in June, this role will not be covered for 9 months, however support has been put in place for patients to still receive advice and support from our GPs, HCAs and onward referrals with our administration team.

Service Updates

MICROSUCTION

This service is currently under review. The current contract runs until 31st March. The review is being carried out in conjunction with the NHS Commissioning Board and the local hospital

trust. The outcome will confirm how and where the service will be delivered. It is also expected that, following the review, it will be confirmed what is to be funded and what is not.

COUNSELLING SERVICE (IN-HOUSE)

Our PCN has offered a low-level mental health service via directly employed counsellors to our patients. This has helped reduce demand on local mental health service and give patients quicker access to support. However, due to restructuring and funding constraints in the NHS, funding for this service has been removed. This service is now being wrapped up and will close on 31st March. All patients will now be referred to the local mental health provider.

PHLEBOTOMY

It has now been confirmed that funding for this service will continue and therefore as practices we can continue to offer this service to our patients.

WOUND CARE

We have been identified as an outlier (vs other practices in the region) based on the volume of dressings and wound care provided to our patients. The volume we provide is higher than the average. We are reviewing with the NHS commissioners, and a site visit will take place so the commissioners can understand better what it is that we offer and whether there are any changes to be implemented.

Website Review

Healthwatch Northeast Lincolnshire recently conducted an audit of all GP websites in our area using NHS England's 'GP website benchmark and improvement tool.' This audit looks at 50 elements in total on the practice's website and whether these are achieved 'well,' 'adequately,' or 'inadequately.'

Pelham Medical Group's website scored 2nd out of 18 practices locally.

- 'well' for 39 elements
- 'adequate' for 10 elements
- only 1 element was scored as 'inadequate.' This was for element 49 - 'Find your NHS number.'

Telephone Queue & Online Access

Telephone queue data was reviewed. This clearly showed the highest demand on a Monday and fairly consistent maximum queue size across the other days of the week. RE noted that increasing the use of online access will help removed some of the demand off the phones.

It was noted by the group that some patients will still prefer to phone which was acknowledged. At present about 10% of all enquiries come through online. It is felt that

there is still scope for this to increase. Even a doubling to 20% would make a positive impact on call volumes which was agreed by the group.

RE displayed a brief overview of the number of online consultations the practice is currently receiving compared to previous years. On average this has remained consistent alongside the previous year, and we are continuing to promote the service with patients.

The benefits of patients using the online access option to contact the practice does help reduce the 8am morning telephone rush and the waiting time on the telephone.

Online access is available through a link on our practice website.

<https://www.pelhammedicalgroup.nhs.uk/>

Requests can be submitted daily, even on weekends. This service is for non-urgent issues only and will be picked up by the practice during the practice's usual opening hours.

We have some new promotional material from the NHS to share on our practice website, social media and TV screens in the waiting area. An example of the material was reviewed and feedback from the group was positive.

AOB

Patient asked what the patient list size currently is? Approximately 10,130 patients are currently registered with the practice – it is increasing slightly. The practice is currently accepting new patients living within the local area.

AI assisted triage

There was a brief recap of the discussion that took place at the last meeting. The practice has been reviewing different AI lead triage systems which could help with access to the practice. 5 members of staff visited a practice in Lincoln who already use the system to see how it is used and identify the potential benefits.

Potential benefits & drawbacks:

Practice Benefits

- Safety: Better documentation. Less moving of patients manually from list to list.
- Implementation: Little adaptation of existing internal process.
- Demand: Spread - less 8am rush.
- Sustainable: More robust than the current system.

Patient Benefits

- Call wait: Potential to improve phone access.
- Integration: Can link in with the NHS app.
- Communication: Offers interpretation.

Potential drawbacks:

- Cost – need to find savings elsewhere.

- Need patients engaging with online consultations (to reduce phone wait & 8am rush).
- Online accounts to be created (to maximise benefits).

The systems are confidential and bound by the same data protection as the practices are. They must meet and maintain the same clinical standard and data governance and complete annual checks.

It is an inclusive system, to be used by all, if a patient prefers not to use the system online, they can still contact the practice, and the reception would complete the process for them. This triage system can potentially be used any at any time of day or night. Requests sent outside of practice opening hours won't be picked up until the practice reopens the following day.

We are continuing to consider and review these systems and will update patients at the next meeting.

Close

RE thanked all for attending.

The next PPG meeting will be held in the Summer.

Details of the meeting will be sent round and advertised on all our platforms.