King's Medical Practice

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PPG Meeting

15 June 2026 at **2pm**

Attendance

Dr Joe Firmin (GP), Michael Land (Operations Manager), Chloe Wassell (Admin & Reception Manager) Nicola Synnott (Management Team Assistant), BJ, RH, CW, MF, JM. JH, DG, BW

Apologies: MJ, JJ, PD, PM

Minutes

1. Review of previous minutes

   Michael reviewed the minutes from the previous meeting. The following points were discussed:

   - Car park

     JH asked who to report parking issues to (eg vehicles parked in disabled bays without blue badges). Michael advised to report any issues to our reception, and we will then inform the landlord. **Action**: Michael to ask the landlord if we can share their email address with PPG members to allow them to report parking issues directly to them.
     MF asked if there will be disabled parking bays on the slope leading into the car park? Michael explained we are currently not aware how the slope will be utilised for parking.
     BJ mentioned the garden area at the front of the building looking is untidy, Michael confirmed it is also the responsibility of the landlord to maintain this area.

- Blood appointments

  Michael informed the group we are trying to streamline the amount of blood tests requested by clinicians, to reduce the waiting time for blood appointments. We currently have approximately 350 appointments per week for bloods. MF mentioned no one was called into the phlebotomist for the walk-in clinic this morning for over 25 minutes, Michael explained the blood clinic was being run by another nurse this morning, as the phlebotomist now undertakes other duties, rather than just bloods.

- Weight loss injections

  Michael explained the criteria for prescribing weight loss injections will change from 26th June 2026. Patients are still required to meet strict criteria and must have at least 4 medical conditions, however, the BMI target has been reduced to being over 35. We currently have 19 eligible patients.

- Adding the cost of missed appointments to text messages

  Michael advised this idea is being presented to the Partners to consider the balance of highlighting the cost of missed appointments to the tax payer vs antagonising patients. The total number of missed appointments and the overall cost to the tax payer is shared on the monthly data we put on our website, social media pages and in our waiting room.

- Lung health checks

  NHS lung health checks have started and have been successful in identifying patients with undiagnosed cancer. There has been a good uptake of patients attending the health checks. BJ mentioned children should be invited to the checks, Michael explained they are only available to smokers or ex-smokers aged 55-74, however, new simpler breathing tests for children are being introduced in the Wakefield area. JH asked if the Practice could report concerns regarding air pollution in the local area. Dr Firmin explained this is a public health issue rather

than a GP Surgery issue. Michael and Dr Firmin both added we would also need to wait for evidence from the lung health checks before raising any concerns.

JH asked if patients could voice their concerns, Michael confirmed they could.

BJ asked if the Practice get invited to planning meetings for new build housing estates, Michael confirmed we do not get invited and added the last time we were invited to a meeting we were not allowed to contribute to the discussions or ask any questions.

- Management drop-in sessions

  JH applauded the management team for holding the drop-in sessions but said he noticed that patients were not approaching the team during the session. Michael thanked JH & BJ for attending the session and explained we have taken on feedback regarding holding the sessions at different times. Michael asked the group for their thoughts on holding an evening session to hopefully attract patients who are at work through the day, the group agreed this is a good idea.

- Ladies' night

  MF asked how the Ladies night had gone. Chloe advised the evening had been a success with high numbers of attendance and lots of positive feedback, therefore the event will continue annually.

  We are planning a Men's night in November to tie in with Men's Health Month.

2. Medications team on reception

Chloe asked for the groups thoughts on reducing the hours we have the medications team on reception. Where possible we currently have a medications team member on the reception desk between 10am-4pm Monday to Friday. We have had positive feedback from patients; however, it is impacting the volume of work the team are able to complete. Chloe asked for the groups opinion on reducing to 4 hours per day Tuesday to Friday. CW explained she didn't think removing it completely on a Monday was a good

idea and suggested we could offer the service for 2 hours on Mondays and 4 hours per day Tuesday to Friday. The group agreed this was a good idea and a suggestion was made that the 4 hours Tuesday to Friday could be split into 2 separate 2 hour slots.

3. Phone system

   Michael advised that the issue with the queue position not being updated has now been resolved. Patients can also request a call back as soon as they join the queue.

4. Waiting room call board

   Michael informed the group we are investigating different ways to utilise the call boards in the waiting room to display useful information for patients.

5. Veteran health checks

   Michael explained that from 1st July military veterans will be entitled to annual health checks for their mental and physical health and social support. The Practice will hold monthly MDT (multi-disciplinary team) meetings which will be run by Helen Wright (Advanced Nurse Practitioner Partner), Kim Franks (Care Coordinator) & a member of the nursing team.
   MF asked what the criteria is to qualify as a veteran, Michael confirmed it is anyone over the age of 18 who has served in the Armed Forces for 24 hours or more.
   Michael added, we also record the spouses/partners and children of veterans, however, they are not currently eligible for health checks.

6. SystmConnect/PATCHS

   Michael advised that the ICB (Integrated Care Board) will no longer fund the PATCHS (online messaging) system from 1st April 2027. In view of this, we will start using SystmConnect instead which works alongside the NHS App and is much easier for patients. A method of recording patients who don't have a smartphone is undergoing implementation, so in the future, such patients won't get text messages about booking online services or clicking links.

CW added she does not find the NHS App user friendly, Chloe explained we are holding a drop-in session with members of the NHS Digital Team on 3rd July at 9.30am-12pm which CW may find useful.

7. AOB

- Staff specialities

  JH referred to the list of staff specialities given out at the previous PPG meeting and highlighted that we don't have any clinicians that specialise in men's health. Dr Firmin explained that in comparison to women's health, men's health is a relatively small topic which clinicians can deal with all aspects of. It is not an area that a clinician would undertake additional study to practice in. **Action**: Nicola S to update the list to include all clinicians (not just ones who specialise in a specific area) including whether they are male or female.

- Appointment length

  JM asked if our GP appointment length is 15 minutes? Michael confirmed this is correct.
  JM also asked if patients should be informed of test results. Michael explained if the test has been requested by one of our clinicians, we should inform the patient of the result. However, if the test has been requested by a hospital, they should inform the patient of the result.

- Text messages with links

  JM mentioned the links that are sent with text messages only work for a short time. Michael confirmed the link will only work for 7 days and unfortunately cannot be extended.

- Health screening

  CW asked if there is a list of available health screenings on our website and the eligibility criteria for each one. Michael confirmed we don't have this information available on the website, but we can add it.
  Action: Nicola S to add health screening information to the website

- Pessaries

  CW mentioned it is difficult to book appointments for ring pessaries. Dr Firmin acknowledged this and explained we only have 2 GPs who deal with pessaries, however, there are services we can refer patients to.

- Children's activities in the waiting room

  CW asked why we don't have anything in the waiting room to occupy children, such as reading books and toys. Michael explained this is due to IPC (Infection Prevention and Control) rules.

- Heidi AI scribing tool

  MF mentioned he recently had an appointment where the GP had asked permission for the consultation to be recorded and asked if this is something that all of our clinicians do. Dr Firmin explained that some clinicians use an AI tool called Heidi which transcribes the consultation so the clinician can focus more on the patient. The clinician will then review the transcript before adding it to the patients record. Dr Firmin added that the clinicians who use it will ask the patients permission at the start of the consultation.

- Allocated GP

  JH advised the group he had read an article which stated that patients over the age of 75 should have an allocated GP. Michael explained that when a patient is registered at a surgery, they are automatically allocated to a GP as part of the registration process. This does not mean that the specific GP must see that patient at all of their consultations. If a GP recognises that a patient has a need for continuity of care due to a specific illness/condition, they will discuss this with the individual patient and a note will be added to their record.

- Dr Burns and Dr Treifi

  MF asked if Dr Burns had left the Practice. Michael confirmed that Dr Burns no longer works at King's. We have attempted to recruit a replacement doctor, however, we have been unsuccessful in finding a suitable applicant. Michael added that Dr Treifi is currently on maternity leave, we are using a locum GP, Dr Sheikh, who will be working Tuesdays, Thursdays and Fridays where possible.
  JH asked how many GPs we are allowed to employ, Michael explained there is no limit to the amount we can employ, however, we have to find the budget.