

Partners:-

Dr VG Tailor BSc MBChB MRCP DRCOG

Dr A Chesterman MBBS FRACGP

Dr A Mirza BSc, BMBS, MRCP

Mrs V Wells BA (Hons)

Associates:-

Dr H Chu MBBS MRCP DRCOG

Dr K Pojak BSc MBBS MRCP

Dr B Alahakoon MBBS MRCP

Dr A Sykes BMedSci BMBS MRCP

Dr J Hanlon BMedSci BMBS DTM&H DRCOG MRCP

Dr Luciné Karanfilian BSc MBBS MRCP

Patient Participation Group Minutes

Monday 22nd June 2026

6.00 pm

Attended by:

Brian – PPG Chairman

BB – Patient

CO - Patient

NB – Patient

SG – Patient

YN – Patient

Dr Vijay Tailor – GP Partner

Dr Antony Chesterman – GP Partner

Victoria Wells – Practice Manager Non-Clinical Partner

Apologies:

None received.

1. Welcome and introduction

Brian welcomed members of the PPG and updated everyone on his actions since we last met.

2. Matters Arising and Minutes of previous meeting

Cycle hoops

Following discussions at previous PPG meetings, Brian identified the new Council contact and followed up on the request for cycle hoops outside the Surgery. As a result, cycle hoops were installed in March. They have been well used by both patients and members of the public.

Recycling medical packaging

Following the last PPG meeting, a member of Reception staff took the lead on a project to help patients recycle medical packaging more effectively. She contacted local pharmacies to identify which healthcare-related packaging materials they are able to accept for recycling and compiled this information for patients.

The guidance is now available on the surgery website, making it easier for patients to find suitable recycling options and support efforts to reduce the environmental impact of healthcare waste. This initiative forms part of the practice's ongoing commitment to sustainability and reducing its carbon footprint.

<https://www.hillcrestsurgery.nhs.uk/practice-policies-patient-information/our-impact-on-the-environment/how-patients-can-get-involved/reducing-the-carbon-footprint/>

AI in General Practice

The practice continues to use Heidi as a clinical transcription tool, helping clinicians reduce the time spent on administrative tasks and allowing them to focus more of their time on patient care.

At the last PPG meeting we had discussed the wider use of Artificial Intelligence (AI) in General Practice in particular for call handling. Some local practices have trialled an AI-powered reception service, known as Emma. Feedback from these pilots indicated that the technology was not yet able to provide a standard of service that met patients' needs and expectations and so Hillcrest Surgery is not looking to explore this further until the technology has significantly improved and even then it would sit alongside the option to speak to a human Reception.

3. Changes within the Surgery

In January, one of our Clinical Pharmacists commenced maternity leave. To maintain continuity of service, some of her responsibilities are being covered through an extension of the maternity cover arrangements already in place for a member of our Nursing Team who will shortly be returning from maternity leave.

We are also pleased to welcome Dr Karanfilian, who has recently joined the practice team.

There has been some turnover within the Reception Team over recent months; however, all Reception posts are now filled, and our newest Receptionist joined the practice a few weeks ago.

Members of the Patient Participation Group commented positively on their recent experiences with our Reception Team, highlighting the friendly, helpful and professional service they had received. The team currently consists of nine Reception staff, providing a balance of experienced long-standing employees alongside newer and part-time colleagues.

This combination brings both continuity and flexibility in supporting our patients.

4. New approach to chronic disease management

A new proactive care programme, known as Cardio-Renal-Metabolic (CRM) Review, has been introduced for patients living with certain long-term conditions. These include: chronic kidney disease, diabetes, high risk of diabetes, chronic heart disease, hypertension, atrial fibrillation, peripheral vascular disease and fatty liver.

Under this approach, patients with one or more of these conditions are invited for a structured annual review. The first appointment includes:

- Blood and urine tests
- Physical health checks, including waist measurement
- Discussion of lifestyle factors
- Assessment of mental wellbeing

Patients are then offered a 30-minute follow-up appointment with either a GP or Clinical Pharmacist to review their results, discuss their overall health and agree any next steps.

A further follow-up appointment may be arranged where required, with the most appropriate

clinician determined by the patient's individual needs.

Approximately 1,700 patients will benefit from this service.

The programme has a strong preventative focus, particularly for younger patients, with an emphasis on reducing future health risks. The aim is to support and motivate patients to make sustainable lifestyle changes that can improve their long-term health outcomes. Clinical staff have undertaken additional specialist training to support this holistic approach.

This enhanced service complements the ongoing care provided to patients who already have established cardio-renal-metabolic conditions.

Patient feedback has been very positive. In particular, patients have valued the dedicated 30-minute review appointment and the opportunity to discuss their health in a more holistic way. Previously, patients often required several shorter appointments addressing individual conditions separately.

Asthma and COPD annual reviews continue unchanged.

5. New online consultation provider and patient access

The contract for the current online consultation platform (eConsult) is coming to an end, and a new provider, Patchs, has been appointed. The transition is expected to take place in late summer/early autumn.

Patient feedback on the current system has been carefully considered, particularly concerns that the existing forms can be lengthy and time-consuming to complete. The new platform is expected to offer a simpler and more streamlined experience for patients.

A significant benefit for Hillcrest Surgery is the platform's ability to accept submissions in multiple languages and automatically translate them into English. This will help us support patients who may face language barriers and enable Reception staff to assist patients in completing online consultations when they contact or attend the surgery, allowing information to be triaged more efficiently.

We will continue to encourage patients to use online consultations where appropriate, although we recognise that many patients still prefer to contact the surgery by telephone.

Telephone waiting times were also discussed. Those present felt that, while the current triage process can sometimes result in longer calls, patients generally receive a clear outcome by the end of the interaction, and the system is working well overall.

The surgery has also increased its use of online booking links, particularly for Cardio-Renal-Metabolic (CRM) review appointments. Response rates are currently around 40%, reducing the need for staff to make appointments via telephone calls and saving valuable administrative time. The system also gives patients greater flexibility, allowing them to view available appointments and choose a date and time that suits them best.

6. Surgery premises and surrounds

Some patients have raised concerns about anti-social behaviour in the Mount area. Hillcrest Surgery is actively involved in partnership working with the Police, Ealing Council, Acton BID, Acton Market and other local organisations to help address these issues and improve the local environment.

The surgery hosts monthly meetings including the above organisations to share information, discuss ongoing concerns and coordinate actions aimed at improving safety and reducing anti-social behaviour in the area.

In addition, the GP Partners regularly clear significant amounts of litter from outside the surgery each morning to help keep the entrance clean, safe and accessible for patients and visitors.

7. AOB

Discussion about shortages of some medications caused by supplies being impacted by global events.

8. Next Meeting

Agreed next meeting later in the year, ideally early December, would be held mid-afternoon.

It was mooted whether a patient education event might be a good way to get more patients engaged with the PPG, & could be useful in its own right.

Brian thanked everyone for attending & closed the meeting at 7.45 pm.