Notes of PPG meeting Wed 28 Oct 2026

Adelaide Medical Centre

Present: Belgin Bozsahin (Practice Manager) Carlie Newman Debbie Ensor Elsa Santos Graham Williams Hilary Lance (Chair) Jamila Heinecke Janet St John-Austin Mark Agathangelou Peter Sibson Sara Katchi Sheila Rossan Vanda Renton	**Not in attendance:** Cathy Katz (GP) Bee Thompson Jessie Gibson Juan Schehtman Michael Fletcher Natasha Leith-Smith

1. **Introductions, attendance & apologies** - as above

2. **Practice update**
   - **Staff changes**

     Reception. One receptionist resigned towards the end of her probationary period as the job was not what she wanted.
     A second receptionist has had her probationary period extended.

     Belgin explained the complexity of the job is so much more than answering the telephone or greeting patients on arrival. The job demands a breadth of understanding and knowledge of the Practice and it is not easy to find people with the right skills or potential .

     GPs. Two new salaried GPs have been appointed Two new salaried GPs have been appointed, Dr Sazeen Al-Jaf / five sessions and Dr Soheeb Mehr / six sessions. They replace Dr Dunlop, who retired earlier this year, and Dr Valentina Di-Crocewho has left to live and work in Italy . Both new appointees have been working in the Practice for some time as a locum and/or as part of their GP training. Both are warmly welcomed as new team members

- **Website and footfall update.** Silicon Practice supplied FootFall, a system used by the Adelaide Medical Centre (and many, many other GP Practices) , for online patient access and consultations. Patients are unable to access online medical services after the tech firm powering their practice websites collapsed into administration.
  The (AMC) Practice has plans for restoring online access as quickly as possible via Accurx (hopefully buy next Monday). Meanwhile patient access is by phone or visiting the practice.
  In parallel, the system for supporting GP Practices NHS site (with in which eg Footfall/ Accurx sits) is changing.

  The work that in now underway is an acceleration of the plan already in place to replace Footfall.

  It was clarified that when new IT on-line system is in place access will still be possible via the NHS app. .

  The PPG wants to thank the whole Practice team for the extraordinary hard work and time the team have put in to minimise the problems caused. Belgin has led this work, and some staff have come in on their day(s) off to help .
  Action Hilary to write to the staff team to thank them

3. **CQC (Care Quality Commission) visit: feedback**
   The CQC visit was not a full inspection of everything . It was quick planned check that the rating of "Good " was maintained – which it was. [To be rated "excellent" requires a full very detailed inspection.]
   It went very smoothly. Patients were invited to give feedback. 40 patients did so: 38 gave very positive feedback ; the other 2 were complaints about footfall.

   The PPG chair had lengthy telephone session with the inspector . He commented that the PPG was evidently very active and well attended with a good number of members.

   A short report is on the Practice website

4. **Special project proposal**. At an earlier meeting this year it was agreed to resurrect a former plan for a special project aimed at seeking feedback from an under-represented group: focussing on e.g what works well for you and what could be better? Since then a member suggested we find a way to attract younger PPG members. Past efforts have proved hard to achieve this for various reasons.

   It was agreed. A way forward might be for a special project interviewing willing younger people in the waiting room over a period of time.

The following guidelines were agreed

- Detailed proposal to be agreed by the PPG.
- This has to be a **simple** approach with no undue extra pressure. practice staff
- A target of number of interviews to be agreed
- "Younger patients " to be defined
- Agree who interviews (preferably those who have some expertise in this area)
- Agreement on how to describe what the PPG is/does and why we are undertaking the survey
- Personal details to be collected eg sex, age,
- Suggested content of interview . 1. "what works well for you? "
  2. "what could be better ?"
- Plans for recording answers
- Plans for how to analyse the information

Sheila agreed to coordinate the project assisted by Debbie and Sara .

5. **CPPEG** (Camden Public & Patient Engagement Group) – brief update

Currently in limbo due to ICB (Integrated Care Board)

6. **AOB**
   - Holding an **open day** eg one Sat morning was mooted . The Practice vetoed this on the grounds of cost and amount of work involved.
   - **General open evenings**. Strong case made for these to be re-instated. Experienced as a useful source of information for patients . the exceptionally low and disappointing attendance at the last two meetings suggest now is not the right time for the Practice rethink this.

   - **Social prescribing.** Can patients self-refer? Yes some patients see notes below from the Social Prescribing Linkworker about new referrals.
     "Clients who have had support from me before can directly self-refer to me. In case they are not able to reach me they can self-refer via the Age Uk Camden Website. All new clients can self-refer via the Age UK Camden" .
     Further details, including telephone number, are on the website .
     Belgin is also preparing an information sheet for display on a notice board.