# Minutes

# Hill Surgery Action Group (HSAG)

*Date: 7th February 2025*
*The meeting was held virtually*

**In Attendance:** Nick Andrews (NA) - Chair, Maxine Green (MG), Karen Purser (KP), Paul Rogers (PR)

## Meeting Summary for HSAG Meeting & Survey Review

The HSAG committee convened to discuss the survey results, the future of the HSAG, the progress made since the inaugural meeting on 9th February 2024, and the potential for dissolution.

## Survey Results and Service Concerns

MG, PR, KP and NA reviewed the survey results and garnered 65 responses. They noted improvements in the responsiveness of the surgery and prescription services, with 49% and 54% of respondents reporting positive changes, respectively. However, concerns were raised regarding difficulties accessing patient records through the NHS app and scheduling appointments with GPs or practice nurses. Additionally, the committee discussed the relevance of the surgery's website to the local patient base and the timeliness of follow-up communications after hospital consultations.

## Beaconsfield Road Site Closure Concerns

MG, PR, KP, and NA deliberated on the potential closure of the Beaconsfield Road site. MG mentioned that the Hill Surgery website indicated over 2,000 responses had been received to the site survey. NA confirmed he had participated in the survey and expressed serious concerns about the closure, given the site's significance to approximately 10,000 patients.

A discussion ensued regarding the methodology and validity of the survey, particularly whether only Beaconsfield Road patients were invited to participate or if it was a general Hill Surgery survey. It was observed that many patients who did not regularly attend might not have been overly concerned about the closure.

NA noted he had written to Helen Dollimore (MP) and the ICB NHS Sussex, outlining the historical significance of the surgery and the potential consequences of its closure; however, he has not yet received a response. The committee also expressed scepticism about the survey questions, suspecting they were crafted to elicit favourable responses towards the closure. They agreed to consider sending a polite letter to the practice manager requesting clarification on the survey's methodology and participant selection.

## HSAG Survey

MG, PR, NA, and KP further discussed the survey results from its members. The survey achieved a solid response rate, with 65 participants indicating improvements in various aspects of the surgery, particularly scheduling appointments and prescription services. Despite this, a disconnect remained between hospital appointments and follow-up communications. There was also a significant preference for face-to-face interactions with the surgery, with many respondents favouring HSAG or Patient Participation Group (PPG) representation. The current Newsletter and survey format is not well received.

The future of HSAG was the subject of debate, with MG expressing concerns about diminishing interest in further action from members. The group's initial goals appear to have largely been met, and tangible improvements are evident. It was agreed that HSAG had been a thorn in the side of Hill Surgery. However, the improvements are recognised, and it is clear that HSAG's involvement with the ICB and local MP Sally-Ann Hart has significantly contributed to these advancements and raised awareness of the poor service levels. The committee also acknowledged a decline in activity on their website and Nextdoor group and limited engagement on their Instagram and Facebook pages.

## Hospital Communication and Prescription Challenges

KP shared her experience with an encrypted email system used by a French hospital, where she was required to print a report for her surgery. Unfortunately, the surgical team was not prepared to receive emails and asked her to deliver the documents by hand or postal. She found this process inefficient, particularly for older patients who may not have access to a printer.

MG noted that these logistical challenges likely contribute to dissatisfaction with hospital communication and her surgery. This situation emphasises the need for the ability to attach and send documents directly to The Hill Surgery. Our recent survey reinforced the demand for email communication with the surgery; however, HS remains reluctant to adopt this option and insists on postal communication.

The ICB agreed with HSAG that this approach is inefficient and seems a unique issue at Hill Surgery, as most GP surgeries offer some form of electronic communication. MG mentioned her positive experience using the NHS app for electronic communication, suggesting that this option deserves more attention. In KP's case, she could securely forward the email and attachments using a one-time passcode, which the surgery provided, while not widely used, could simplify the document exchange process.

MG also discussed her struggles with prescription deliveries, which she resolved by requesting a three-month prescription. The committee agreed that transitioning from one-month to three-month prescriptions, where appropriate, could enhance patient experience while reducing the burden on the surgery and delivery pharmacies.

## Patient Participation Group's Future Discussed

The committee explored the future of their Group (HSAG) and the prospect of its dissolution. They recognised the group's success in achieving initial objectives, such as improving appointment scheduling and phone communication, but noted declining patient participation and several complaints. The improvements in the surgery's overall service have been successful, with one or two minor areas of concern that we should bring to their attention.

Ultimately, the committee decided to resign from their positions and dissolve the group, with plans to publish a closing statement on their website and Nextdoor. They also discussed the possibility of continuing to engage with the ICB should it be felt that the service started to decline again. A distinct lack of transparency or a willingness to communicate makes the HSAG endeavours difficult.

### Hill Surgery Patient Group

HS claims to have an active patient participation group, but this appears untrue. Following the dissolution of the PPG Committee, they switched to a newsletter and survey format, which has become more of a general NHS public information service rather than reflecting local patient views. The survey methodology favours the surgery, lacking clear criteria and objectivity. It is hoped that future surveys will better represent patient needs and concerns rather than general NHS updates.

### HSAG Next steps

- NA will prepare a closing statement for HSAG and distribute it to Paul, Maxine, and Karen for review and refinement.
- MG will post the survey results on the HSAG website and create a link to share on the Next Door community site.
- MG will renew the HSAG website again and then discontinue the monthly fee. The website will close at the end of February or March, depending on the subscription period.
- MG will generate abbreviated meeting notes and share them with the group.
- The HSAG team will keep the Next Door group active and monitor any future trends or issues with Hill Surgery.
- The HSAG team will encourage people to use the Next Door community website for any future concerns about Hill Surgery.

The meeting closed at 5 pm.