

Minutes of Meeting - University Health Centre Patient Reference Group

6pm Wednesday 26 November 2025

University Health Centre

- Practice update

Dr Thomas outlined some the changes that have occurred over the last twelve months:

- GP Registrars:
Our current registrars are Dr Ahluwalia and Dr Znati. As we now have two GPs able to train GP Registrars we can now potentially train up to 3 Registrars but obviously need the consulting rooms available for them to use; this can be the limiting factor. GP's who have trained here have achieved very good outcomes.
- Advanced Clinical Practitioner
As Zara has now moved on to undertake a PhD in Clinical Psychology, we are supported through the Primary Care Network (PCN) by Cherry Shaw and Tony Dharma. Tony is new to the team but brings with him expertise and senior experience from secondary care mental health services and can provide a link between UHC and secondary care.
- A New phone system was introduced in July – aimed at providing a smoother experience for patients. The most notable feature for patients is the 'Call Back' facility where patients do not have to wait in the queue any more, they can request that we call back when it is their turn. This is an automated process and patients do genuinely retain their place in the queue.
- GP Patient Survey – conducted earlier in the year. We achieved results consistently above national average all areas. LG – is good to know that the Practice is getting positive recognition for a good service.
- TV screens in waiting area – these have been reintroduced and are a positive step. They can be used to keep patients up to date, promote public health campaigns etc. and are better than noticeboards from both patient and practice perspective.
- Clinical Pharmacist - this is a service also provided by the PCN and we have had a number of different Pharmacists via this service but are keen to achieve continuity and have now been given one Pharmacist, Elena Ashraf, who can work closely with our GPs and get to know our patient group.
- Additional First Contact Practitioner (Physiotherapy) appointments have been increased in number and are always in demand.
- We have regained our CQC 'Good' status following re-inspection in June. This has been a very positive result for the team. Areas of focus for improvement had included Pharmacy and Cervical Screening. Some CQC measures are difficult for us to excel at as we are an a-typical practice so we are delighted that we are able to move forward again as a Good practice.

- Increase ultrasound appointments have been increased to 4 sessions a week at the Practice which helps to keep waiting times short.
- External pressures/national changes – as ever the Practice continues to adapt and be proactive when it comes to upcoming national changes and pressures. Going forward the new Neighbourhood Model is likely to be introduced via the PCN. The Daphne Steele Building is now able to provide u/s scans. The provision as a whole is led by secondary care (ie not GP service) but we liaise as appropriate and are keen that our patients benefit from new services.

- Research Practice

The University Health Centre has recently been accredited as a 'Research Ready' practice. We have been involved in just a few studies so far but are keen to increase this. Research studies teams will be looking for a particular profile of patients – eg particular age bracket, background or health conditions and then eligible patients will be offered the opportunity to participate should they wish to. Rules regarding Data Protection and Ethics are well established and monitored by all parties including the National Institute for Health Research (NIHR)

Our GP Research Leads are Dr Tasneem Siddiqui and Dr Lizzie Sweeting who already has a Research Role in her work with the NIHR.

Comment – If patients are sent a text with a link there is a risk it could look like a scam, need to send documents that are clearly official. **UPDATE: JC has fed this back to the Research team at UHC but because the wording of texts for Research Studies is pre-agreed with Ethics committees and the NIHR we are unable to adapt them.**

- Patient communication apps/platforms

LG had requested this agenda item after concerns that there are multiple softwares involved and that when logging into the NHS App, patients are encouraged to log in to PATCHs and into Patient Knows Best when UHC uses neither. The University Health Centre uses eConsult and AccuRx. Do patients still need the 'PatientAccess' App as well ?

- Dr Thomas explained that PATCHs was disabled at the practice as we had opted to use eConsult for clinical reasons, enabling our Triage system to be robust and safe. Questions can be frustratingly repetitive but the PATCHs system is too simple and questions are too few and too open. The eConsult system is also preferred because there is less reliance on AI. UHC found PATCHs to be unsatisfactory during its first year of launch – the system was being developed as it went along so there were many teething problems, and customer support was very poor compared with eConsult and AccuRx. The NHS App will mention it due to a national contract but that may change over coming months.

- The 'Patient Access' App has now been superseded by the NHS App and no, patients do not need it if they also have the NHS App as everything (ordering prescriptions etc) can be done on the NHS App.
- 'Patient Knows Best' is used by the Hospital for patient letters and not used by GP practices.
- UHC conducted a patient survey in May 2025, regarding the triage system including eConsult and the booking link system (provided via AccuRx). Results and comments were shared with the group. Patient comments had been fed back to the software providers concerned, and AccuRx have made changes so that patients can now see which clinicians are available when sent a booking link. This has vastly improved the system and addressed many of the comments regarding the Booking Link system. Several of the comments regarding eConsult related to the repetition of questions but as outlined above, the Practice feels that too many questions are better than too few. cConsult have previously worked with Kirkburton surgery to improve their software.
- The general feeling within the group was that the Triage system works well, patients who need to are being seen on the day. Receptionists and GPs are more able to work together and triage decisions are being made by a Clinician rather than a Receptionist. Patients are able to submit eConsults throughout the day which is much more convenient than having to phone at 8.15am.

Q. What to do if problem is not on the list, can be difficult to complete?

A: at bottom of list is an option 'Can't find your health problem? Request other advice'

Q. Is it possible to look back at thread in communications eg patient's reply to a an AccuRx text message?

A. No – if messages are sent with the option to answer it is a once-only opportunity to respond; we cannot have ongoing dialogue via messaging in case patients use it to report serious symptoms that require urgent attention. Patients should submit another eConsult – possibly an Admin one if appropriate or send an email to u.healthcentre@nhs.net

General feedback from patient group members was very positive.

Dr Thomas thanked everyone for attending and for their constructive feedback.