

East Twickenham Primary Care Network

Patient Participation Group Meeting

Venue: Cross Deep Surgery

DATE		Tuesday 12 th May 2026	12.30pm
PPG Members		Peter Henderson Maggie Ennis Geoff Woodling Carole McDonnell Anne Marimuthu Maureen Chatterley Barry Bennett <i>Crane Park Surgery & Jubilee Surgery were not represented at the meeting.</i>	YMP YMP WL RL RL TP CDS
PCN Members		Dr Chris Lambert / CL Lacy van der Sloot / LV	Clinical Director PM CDS
			ACTIONS ARISING
1.	Apologies	Andy Mashford	JS
2a	Minutes of Previous Meeting	Approved.	
2b	Matters Arising	Enhanced Access As previously discussed, touched on Uniformity of Approach to ensure that practices websites are checked and updated where required to ensure that Enhanced Access is featured.	All PCN Practices
3	PCN Update	From 1 st April 2026, there has been a strategic NHS change to move from a hospital-centred model toward a “Neighbourhood Health Service”. The aim is to provide more care closer to patients’ homes through integrated local teams. Key principles include: • More prevention and proactive care • Reducing hospital dependency • Integrated working between NHS, social care, pharmacies, mental health, and voluntary services • Care organised around local populations (“neighbourhoods”) What “Neighbourhoods” Mean A neighbourhood is generally defined as a population of around 30,000-50,000 people - very similar to current PCN footprints. Neighbourhoods are expected to become the core delivery unit for community healthcare. Typical neighbourhood teams may include: • GPs • Practice nurses • Community nurses • Pharmacists • Mental health practitioners • Social prescribers	CL

	• Physiotherapists • Paramedics • Social care staff • Voluntary/community sector workers These are often referred to as: • Integrated Neighbourhood Teams (INTs) • Neighbourhood Health Teams New Proposed GP / Neighbourhood Contracts The NHS is proposing two major new contractual models. A. Single Neighbourhood Provider (SNP) This would cover roughly one neighbourhood (~50,000 patients). Likely features: • Based largely on existing PCNs • Holds enhanced service contracts • Greater responsibility for integrated care delivery • More accountability for local population outcomes Importantly: • Core GP contracts (GMS/PMS/APMS) still remain • Participation is expected to be voluntary initially B. Multi-Neighbourhood Provider (MNP) These would cover larger areas (250,000+ population). Expected functions: • Large-scale service coordination • Shared back-office systems • Digital infrastructure • Estates planning • Supporting struggling practices • Potentially taking over failing services Possible providers include: • GP federations • Large provider groups • NHS trusts • Alliances of PCNs Increased Integration with Social Care & Community Services Neighbourhood models require closer integration between: • General practice • Community trusts • Social care • Mental health services • Local authorities • Voluntary/community organisations This is part of Integrated Care System (ICS) development. ICBs (Integrated Care Boards) are now expected to jointly plan neighbourhood care models with councils and providers. Neighbourhood health framework - GOV.UK PCN will continue to exist within this new structure and continue to work towards joint targets and services e.g. Enhanced access.	
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		LV encourages practice to ensure staff are aware of these services, and if not, decimate to their team. LV will contact them to enquire regarding inviting them to the next meeting in November.	
8.	Date/Venue of Next Meeting	<u>Tuesday 17th November at 12.30</u> - Cross Deep Surgery <i>Due to limited space, we ask for a maximum of 2 PPG members and 1 Practice representatives from each practice.</i>	

CDS Cross Deep Surgery
 YMP York Medical Practice
 RLS Richmond Lock Surgery
 JS Jubilee Surgery
 WL Woodlawn & Oak Lan Surgery
 TPS Twickenham Park Surgery
 CPS Crane Park Surgery