

Painswick Surgery Patient Group (PPG)
Extended bulletin for eMail readers
June 2026



The May meeting of the Patient Group with the Surgery focused on two aspects of NHS provision: current and coming digital developments (again!) and Pharmacy. One member with deep insights into digital aspects of GP work drew our attention to some in-depth research from a practising Ulster GP which, satisfyingly, once again showed Painswick Practice ahead of the rest with about a third of patients using online appointment booking and patient satisfaction rates of 'Good' (above the national average despite us using it more than other Practices). More details of this research are in the meeting's minutes [on the Practice website](#). Similarly, the Practice confirmed that repeat prescriptions via the NHS App are working well and represent a significant proportion of requests. Both NHS App and eConsult have been seen to improve markedly and it's worth reflecting on how well Painswick is progressing with digital developments given a predominance of above average age patients.

The Patient Group has been offering help with use of the NHS App locally and we have been pleased to collaborate recently with the Parish Council to move toward wider support for digital developments in the village. More to follow . . .

So much for existing digital developments, but what's around the corner? We heard reports of highly accurate and efficient use by GPs of 'ambient scribing' – the use of artificial intelligence (AI) supported auto-note-taking during consultations. This can also operate at an enhanced level which adds prompts to the Doctor such as AI suggestions of further concerns for the GP to consider, or treatments to recommend (more on this also in our minutes on the [Practice website](#)). Is this coming to Painswick soon? Not soon perhaps as it requires too much investigation from over-stretched Doctors locally for rapid progress to be made. Results elsewhere are encouraging though.

Pharmacy

Our main focus for this extended meeting was on pharmacy provision, both at the commercial Painswick Pharmacy and within the Practice. We were very pleased to welcome Adis Kikic from our community pharmacy and Alex Oprea, the in-house Clinical Pharmacist to enlighten us on the changes in pharmacy in recent times. The main one for Adis is the Pharmacy First scheme which allows him to treat certain conditions, many with limitations. The Hoyland House website gives more details [here](#). Do have a look – it's an important page to know about, not least for the number of restrictions from the NHS such as the age of patient for some conditions. The pharmacy has a small private treatment room where consultations can take place. There is talk of this range of conditions being extended but Adis would need a second qualified pharmacist to cope with any increase.

Adis' main concerns are how slow the NHS provided online system is, the increase in demand for prescriptions (up 3-4% a year) and problems with limited supplies of medications. The latter result from market conditions but he estimates that he spends about two hours a day finding appropriate alternatives to those initially prescribed and sometimes has to ration the amounts provided. Unfortunately this can create the need for a second consultation with the prescribing GP.

The pharmacy currently delivers approximately 15% of prescriptions to homes free of charge. Adis noted this is not sustainable long-term for rural pharmacies and some have already introduced delivery charges.

Since the meeting a new contract has been issued to Pharmacies by the NHS and, pleasingly, Adis tells us that he thinks it is an improvement and should be manageable.

Whilst Adis is well known and often seen by patients, Alex works more in the background, specialising initially in asthma and now cardio-vascular and hypertension issues. Some queries come to him from Doctors triaging patient queries and he carries out 'Structured Medication Reviews' for key patients - those with frailty concerns are a priority. He also monitors patients' medications after discharge from hospital and works closely with local care homes, especially over compliance with Care Quality Commission (CQC) requirements.

Both Adis and Alex asked us to take this opportunity to emphasise to patients the critical importance of taking the whole course of any treatment prescribed for you. Whilst this applies to treatment for viruses (for which antibiotics are not effective) it is especially critical when a course of antibiotics is prescribed. Take all of it!

Other news

Unfortunately Dr Evans was unable to attend our meeting this time as he gives absolute priority to seeing patients – and this despite our meeting going on until 7pm. Late working like this results from the October 2025 contract that was imposed on GPs despite resistance. The changes to the contract continue to be a) disputed by GPs nationwide and b) creating unsustainable pressures. For example, against a European recommendation that a GP sees no more than 25 patients in a day, in our Practice this continues to run at over 50. This raises concerns about patient safety, of course, but often unconsidered are the GPs' concerns for their own safety. Rushing consultations leaves them at risk of errors of judgement and communication that could result in accusations of malpractice and even striking-off, so losing their career. Now that NHS England insists that every online request for an appointment (eConsult) must receive at least an initial response the same day doctors are left with no escape and non-urgent consultations have to wait for ever longer times – matters that concern the Patient Group very much.

It was also of interest to us that a recently appointed Receptionist soon left the Practice having found the pace of work too much. Fortunately a replacement

has been found but, as ever, this means a temporary gap in staffing – and more pressure of course.

Be kind in your dealings with the Practice in these difficult times!!

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