

# Hollies Patients Forum (HPF) Steering Group Meeting Monday 13 April 2026, 6-7.30pm

## Attendance

Linda Campbell (LC)  
Craig Fishwick (GP Partner) (CF)  
Sally Freeman (Notes, SF)  
Howard Fry (E-group Coordinator) (HFy)  
Ian Hodgson (Chair) (IH)  
Jeet Khosa (JK)  
John Nelson (JN)  
Jean Nowell-Eyre (JNE)  
Andy Smith (Practice Manager) (AS)  
Pauline Tryner (PT)  
Michael Worboys (Newsletter)(MW)

## Apologies for absence

Rory Freeman  
Harry Frost

## CORE AGENDA ITEMS

### 1. Apologies for absence

Apologies were received from Rory Freeman and Harry Frost. Andrew Schwartz has shared that he wishes to withdraw from the steering group. The group passed on their thanks to Andrew for his contributions over the past year.

### 2. Welcome and Introductions.

### 3. Notes from previous meeting and action points

These were confirmed as correct, and action points addressed in this meeting as appropriate.

## CORE DISCUSSION THEME

### 4. Mental Health #1: Accessing services and community networks [Lesley Faithful]

Lesley has in the past worked with the Citizen's Advice Bureau (now Sheffield Citizen's Advice), and her current role is [Associate Mental Health Act Manager \(AMHAM\)](#). This includes ensuring the legal rights of patients detained or subject to Community Treatment Orders (CTOs) under the Mental Health Act (MHA) are maintained.

Lesley shared some aspects of the role and her activities:

- Three AMHAMs sit on each panel reviewing a detention, and they have the same powers as a tribunal.
- Decisions are made based on reports received from clinicians, social workers, and others involved in care of the patient. Evidence is reviewed and appropriate treatments and actions considered, including 'Power of Recall' judgements (where a person can be released conditionally, but recalled based on medical or other evidence, e.g., a danger to the person or others).
- Some people may wish to be considered for voluntary status in hospital care if compliance with medication and treatment is agreed.
- In Sheffield, all hearings are face-to-face, though this is not the case nationally. There is evidence **[included as a summary with these notes (1)]** that virtual decision making is not as accurate or reliable as face-to-face.
- Around 10% of people are discharged following their review.

- People detained under the MHA are reviewed at least every three years in long-term cases.
- The [Sheffield Advocacy Hub](#) is part of Sheffield Citizen's Advice and advocates on behalf people with mental health issues, including (under the Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DoLs)) statutory support for people detained.
- In Sheffield, specialist units with which Lesley is involved include the Eating Disorders Unit at [Riverdale Grange Hospital](#), and [Forest Lodge](#) low secure inpatient unit.

The forum thanked Lesley for her fascinating presentation.

## PRACTICE FOCUS

### 5. Practice update – AS and CF

- **GP Contract update**
  - 98% of GPs have **rejected** the new contract (via a British Medical Association vote).
  - **Some practices are having to introduce changes** much more quickly than Hollies, e.g., full triage (which Hollies has been running since 2025).
  - A key issue is the **need to increase access** (as per instructions from the Department of Health) without additional core funding.
  - As an example, **CF shared that today (Monday) Hollies** had received 220 submissions via Accurx, telephone, and walk-ins. All must be actioned by midnight, and on any given day there are around 50 appointment slots available. Effective triaging does help, as this often filters patient to the correct service (e.g., not always a GP).
  - Another issue is around the **'right to refer'** from primary care to secondary (hospital) specialist services. The new GP contract adds the option of 'Advice and Guidance'. This means a hospital consultant (for example) could refer a patient back to the GP for additional tests and treatments prior to accepting the hospital referral. This shifts the financial burden from the hospital back to the GP. This *may* resulted in some reduction in hospital waiting lists but, in addition to the financial impact, lines of responsibility can be complicated. **[see article accompanying these notes (2)]**.
  - A **further decision around possible industrial action** is likely at the end of April 2026.

### 6. Update on induction courses for new admin staff (from previous agenda).

- Course content depends on their level of experience, and is often developed by the practice, and eLearning forms part of this. A checklist of training and competencies is made.

**Action: AS to forward the training guidance to IH**

### 7. Update on new Hollies patient guide for Hollies.

- AS and IH will meet to discuss now Andrew Swartz has left the group.

## PATIENT FORUM FOCUS

### 8. E- group feedback (HFr)

- There were no queries from the e-group. The steering group discussed ways to increase participation and agreed that sharing the agenda in good time prior to a meeting would be useful.

### 9. HPF Newsletter, updates and next edition (MW)

- The next newsletter is planned for September 2026. There was discussion of the Newsletter's potential role in patient communications. MW suspects that the

Newsletter is seen by very few patients, just those who read it while waiting or come across it on the website. Also, its role is to give HPF, not practice news.

#### 10. Planning for 2026

- JK shared details of **several community groups with whom she has connected**. She is making good progress reaching out to explore avenues for sharing essential health information and bridging community groups with primary care. Key topics could include menopause, prostate issues, and ultra-processed foods (UPFs). The group thanked Jeet for her work and looks forward to further developments.

#### 11. Tai chi at Hollies

- JN shared a request whether Hollies would be interested in running Tai Chi classes, possibly at Nether Edge Bowling Club (this was a query from a colleague). AS will explore further and see who the best contact is to take this forward.

**Action: AS will speak with PVPCN Social Prescriber, Martha Jones.**

#### 12. Miscellaneous

- IH shared information about a **meeting held in March 2026 between representatives of active PPGs** in the Porter Valley Primary Care Network (PVPCN). JNE and Andrew Swartz attended with IH on behalf of HPF [**minutes included with these notes (3)**]. The meeting was seen as helpful, focusing on the impact of the [10-Year Plan for Health in England](#) on primary care in the long term, and for the short term the new GP contract. A further meeting is planned for later in 2026.
- IH also shared that a **new patient group** has been established at Rustlings Road Surgery.

### ANY OTHER BUSINESS AND FUTURE FORUM MEETINGS

#### 10. Any other business

- Thanks to **LC** for providing delicious cakes for the meeting, and **AS** for supplying drinks.
- No other business.

#### Date of Next meeting

- **Monday 1 June 2026** [Theme: *Sarcoidosis – JNE*]

#### Remaining HPF Meetings in 2026 [all Mondays @ 6pm]

- 3 August 2026 [Theme: *Mental Health #2 – focus on addiction and recovery services – JN*]
- 5 October 2026 [Theme: *Infectious disease, to reflect the Autumn vaccine clinics – IH*]
- 7 December 2026 [Theme: *HIV and prevention, to reflect World AIDS Day – IH*]

SF/IH

22 April 2026 [FINAL]