

Patient Participation Group Meeting
24th June 2024
Minutes

Actions	
1. Introductions and attendance	
Dorinda Jack – Chair (DJ) Hazel Hood – PPG Member (HH) Eileen Blagburn – PPG Member (EB) Dave Pierce – Senior Group Manager (DP) Elaine Medhurst – Senior Practice Lead (EM) Chris Mcgee – Communications Officer (CMc) via Teams	
2. Apologies: Jill Mark and Bryan Stanley	
3. Note taker: Elaine Medhurst	
Main items	
4. Terms of reference and relationship with the NPC PPG Chairs meeting (DJ)	
Katie Stevens, Chairs of NPC, recently contacted DJ regarding attending the NPC wide PPG meetings. Currently awaiting date. Discussions would then be fed back into local PPG meeting.	
5. NPC and contract overview (DP)	
DP gave on oversight of NPC. We are a wholly owned LTD. We have a Board which is made up by Katie Stevens, Chair, and Chris Gray, Non-Executive (they are the main non-employees) and the rest of the Board are employees of NPC. Struggling practices tend to join NPC. We currently have 130,000 patients. Our parent organisation is Northumbria Healthcare NHS Foundation Trust (NHCT). Dr Lees and Dr Waite, as the previous GMS contract owners, delivered all services. The GMS contract and the Quality and Outcomes Framework (QoF) affects the income, and we need to hit targets. Income is also based on prevalence, Enhanced Services, GP Registrars and Medical Students. Income is significantly less than funding available. Previous Partners would earn income based on profits. NPC only have salaried staff. Practices	



<p>have budgets and hope to break even at the end of the financial year. Widdrington and Felton have now joined NPC PCN along with the rest of our practices. Some of the PCN staff may be sourced from NHCT and cross-charged to NPC.</p> <p>Patients can only access their own surgery due to the GMS contracts but can attend extended access clinics within North Northumberland as well as Northumbria Way in Cramlington. We have just moved over to using Anima to improve access.</p>	
<p>6. New surgery (DP)</p> <p>The relationship with the Horner family has greatly improved. Land is owned by the Parish Council of Felton as it was gifted by NCC. Discussions still ongoing between the council and the developer. NPC is committed to move into a new build in which they will be the tenant. We will need to apply for the dispensary to move sites. Another meeting is taking place tomorrow between council and developer which will be key.</p>	
<p>7. Telephone system problems (EM, BS)</p> <p>This now seems to be resolved by adding area code. Brian's call details are being looked at by phone provider IPNetix, Avaya and Visage.</p>	
<p>8. Staff – up to date list (EM)</p> <p>Circulated</p>	
<p>9. Clinics and services at Felton, schedules, opening times etc (EM)</p> <p>Circulated</p>	
<p>10. Website</p> <p>CMc would welcome and fully support input from the PPG as users of the website. Issues highlighted with website by DJ. PPG to arrange a separate meeting to review website and send a list of issues identified to CMc.</p>	
<p>11. Communication (inc Facebook)</p> <p>DJ highlighted there are currently only 30 followers on our new Facebook page compared to 100+ on the old page. Suggestions made regarding publicising new page. PPG to help locally with noticeboards.</p>	



<p>12. Queries from patient</p> <ul style="list-style-type: none"> BP monitor for patient use at Felton? Currently trialling the use of the new machine in Widdrington as machine is quite expensive. Felton waiting room is very small so we may need to wait until we move into new build. 	
<p>13. Future meetings (Jill can't make Mondays)</p> <p>Date of next meeting Friday 6th September at 2pm in Felton Surgery</p>	
<p>14. Any other business</p> <ul style="list-style-type: none"> Widdrington surgery refurbishment discussed – provisional start date is mid-September. Both external and internal works will increase space and we will have an additional 5 clinical rooms. This will be beneficial when looking to increase clinical capacity in the future. DNA rates – we are currently looking at the appointments in which the patients do not attend to see if there are any themes. Missed appointment figures will be shared with the patients to try and encourage patients to cancel their appointment if it is no longer needed. 	
<p>Date and time of next meeting</p>	
<p>Friday 6th September at 2pm Felton Surgery</p>	