

Quarterly PPG Meeting Minutes – 31st March 2026

Present:	Penny Rathbone (Chair/Secretary)	Apologies:	Colin Blair
	David Butler		David Back
	Chris Allchurch		Michael Clarke
	Stephen Doyle		Suzanne Wright
	Kitty Anderson		
	Jo Walters		
	Nicola Rice (Practice Manager)		
	Molly Dewar (Practice Assistant Manager)		

1. Introductions

The chair welcomed everyone to the meeting and asked that everyone introduce themselves. No GP was available for the meeting this time due to the change of date. It was announced that the previous chair Michael Clarke had stepped down and was also leaving the PPG. We thank him for his tenure.

2. Agenda Items and Matters Arising

The agenda was accepted and the chair rescheduled the timing to give priority to those items that had attendees at the meeting first. There were no matters arising.

3. Minutes of the last Meeting/Actions

The minutes of the last meeting in November 2025 were taken as read. The following discussion about improving the content and action lists confirmed that the minutes would have a different form (see item about Role of the PPG) and would in future be produced by the PPG as per the NHS requirements.

- The outstanding action (**ACTION 2025/1**) from the previous meeting was for the practice engagement events. There have been Dementia/Age UK run clinics which are ongoing and the addition of an Admiral Nurse being available for carers' support was noted.
- The contact for Diet and Exercise was Claire at the Sports Centre in Ponteland, but she has since left and moved elsewhere so may no longer be a contact. Northumberland Council do have a health and diet program and can be contacted to see if they will help.

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ACTION 2026/1 Penny Rathbone to send Chris Allchurch the details for the Council Program so that Chris can make contact and report back at the next meeting whether this is a potential route to support an engagement event on Lifestyle. *Due Next PPG Meeting*

- An engagement group for learning disabilities was also discussed and had been followed up with Dr Brown previously. However no further action had been taken at the time.

ACTION 2026/2 Nicola Rice to request that Dr Brown makes contact with Jo Walters to follow this up. Jo to contact Nicola if there has been no further contact by **30/04/2026**

4. Role of the PPG

A discussion on the expected role of the PPG going concluded the following:

- Dissemination of Information
- Information and feedback for the practice
- Concerns/Suggestions/Improvements
- To support the practice

The PPG is an NHS contractual requirement which gives the following mandate and responsibilities

- The group should be made up of Practice Patient Volunteers, the Practice Manager and/or deputy and a GP from the practice.
- The group should discuss the services on offer, and how improvements can be made for the benefit of both the practice and the patients.
- The GP practice should put at its heart the patients and improving health and the PPG should support it with this aim.
- The PPG should contribute to and assure the action plans and monitor improvements.
- The Patient Volunteers should provide both the chair and secretary
- There should be diversity across the patients.
- There should be evidence of recording the discussions, action plans and improvements.

It was suggested an annual review of the PPG would be a useful thing to disseminate so that the practice and its patients could see the value the group can bring and it may encourage a wider diversity in the future.

ACTION 2026/03 All PPG members to encourage other practice patients to join in the specific groups where the PPG has gaps. *Update at next PPG Meeting*

The dissemination of the meeting Agenda and Minutes currently is not widespread, being limited to the PPG members only. The date of the next PPG should be advertised on the noticeboard and social media along with a brief description of the PPG mission.

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ACTION 2026/04 Nicola/Molly to add the next date when agreed to the notice board in the surgery and social media platforms.

The minutes after agreement will be shared on the practice website and be made available via a link from the social media pages.

ACTION 2026/05 Nicola Rice to contact Chris McGee in Comms about how best to advertise and disseminate information from the PPG *Update at the next PPG Meeting*.

5. GP Update

There was no GP update this time.

6. Appointment issues – David Butler

David raised a couple of examples of difficulties associated with attaining appointments and which comprised a number of missed call backs and miscommunications which led to significant delays and confusion in seeing a GP. The underlying issue seems to be two-fold with additional training being highlighted as needed (for example a flowsheet of where to send simple requests vs GP assessment needed) plus issues with continuity between telephony, digital and physical communication systems. There were far too many touchpoints for a simple appointment booking and this will be taking practice time needed elsewhere while causing patient distress.

ACTION 2026/6 Nicola Rice to contact the Digital Group to understand if there is an underlying problem and use the anonymised examples here as evidence *Update for next PPG Meeting*.

The signposting of patient self-referral services is also poorly known, and this will cause calls or System Connect requests which have to be triaged and allocated, which could be dealt with by the patient for the patient.

A third incident was raised by Stephen Doyle regarding difficulties making an appointment and then being routed to the incorrect health care professional in the first instance before (after some time) seeing the correct one and solving the problem.

Both these reports highlighted that the systems were not working as smoothly as they could and echoed the survey results that only 17% found it easy to contact by phone and 38% finding it easy by web access, both of which are below the national average.

The difficulties of the practice patient loading per GP was raised and appears to be significantly unbalanced compared to other practices within NPC. This will be exacerbated by the number of missed appointments.

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Missed appointments were then discussed and again the systems may not be helping as automatic notifications are a) one way and b) fallible with some evidence that the messages are not arriving or are incorrect when they arrive. It was suggested that the text and email messages offering the appointments could have a definitive Yes/No for attendance to provide confirmation that the patient has got the message and will/will not attend.

ACTION 2026/7 Nicola Rice to investigate with the digital group the ability to add a confirmation process into appointment offers. *Update at next PPG meeting*

7. B12 Guidelines – Stephen Doyle

The B12 guidelines are unclear, and an example was given where a B12 injection was due and an appointment made which was subsequently cancelled by the practice leaving the patient outside the guidelines. The issue was with the fact that the patient asked about an earlier injection but was told that they can't have it until the 12-week period was up but then ended up having it more than 2 weeks later.

ACTION 2026/8 Stephen Doyle to share the issue with Nicola Rice to raise with the practice and disseminate amongst patient facing staff so that the right message and injection frequency is carried out. *By 30/04/2026*

8. Patient Survey/NPC – David Back (Presented by Chair)

The current annual patient survey is sent out by NPC to a small section of the patient population, and the results are received back to NPC. They do not routinely share these with the GP practices, so these have to be requested specifically.

In addition, the context of the practice is not included (for example it is easier to see the same GP in a smaller practice than a larger one with more patient throughput), but they are all measured the same.

ACTION 2026/9 PPG Chair to raise the lack of feedback and communication at the next NPC PPG chairs meeting. *Date TBC*

ACTION 2026/10 Nicola to let Chair know when the next meeting is as this is as yet unknown.

Some of the results were discussed along with the monthly Friends and Family survey and the Local monthly practice survey. If the information from the NPC survey was either shared with or received directly by the practice, then action plans would be more forthcoming. The practice is delivering on some improvements, but these are not widely known or shared. This could be improved.

It was suggested that uptake of the local surveys might be better and more in-depth information received if a topic was picked for each month, advertised on the notice-boards/social media. The

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results and actions could then be shared on that specific topic providing a golden thread from the topic through the survey to the end result.

9. Carers – David Back

This was held over until next time as the time was insufficient at this meeting.

10. Chair Role

Penny Rathbone has agreed to take the Chair role with Jo Walters acting as secretary from the next meeting.

11. Date of next meeting.

As the incoming chair cannot make the next scheduled meeting and this meeting was delayed, the next meeting will be rescheduled, and a Doodle Poll will be sent out to find the next suitable date for the majority of people. The original date of 12/05/2026 will not now go ahead.

End of Meeting