



Crossley Street Surgery  
Patient Participation Group  
Minutes of Meeting held at the Surgery  
on 22 January 2026

Present: LB, MT, KS, LM, JD, FS, AD, PG, NP, AH, S-J Martin (Practice Manager)

Apologies: TG, ST, JB

1. Welcome and Apologies	LB welcomed those members present and gave Apologies on behalf of members unable to attend.
2. Approval of Minutes	The Group's November Minutes were approved.
3. Matters Arising	<p>Veterans' and Carers' Afternoons: There was no session in January as it fell on 2 January and it was felt to be too close to New Year. Sessions for February and March are to be held and PPG volunteers were thanked for giving their time. AD to let Julie Freeman know names of volunteers, There will be no session in April as the date scheduled is Good Friday.</p> <p>Main Board Display and Winter Newsletter: Both had been ready by early December and members thanked those who had contributed. Thanks were also given to Bethany Martin for her help.</p> <p>Lloyd George Notes: Progress continues to be made with alphabetising/filing these and volunteers are currently at 'P'. Target Day dates awaited in order for volunteers to continue.</p> <p>NAPP: No information had been received about the Corkill Award. It was felt that this was extremely disappointing considering the amount of work that had gone into the submission. NAPP is now being wound down and the date for closing is now 27 February with no means of communicating with them after that date. LB told members that for more than fifty years the organisation had been raising nationally the voice of patients and that with its closure, that voice will not be heard.</p> <p>MT was thanked by members for co-ordinating the Group's gift of biscuits to the Practice before Christmas. S-J thanked the Group and said how delighted staff had been to receive so many gifts.</p>

<p>4. Surgery Update</p>	<p>Staffing: Dr Winterton finishes at the Practice on 23 January. Dr Rhoma Tahir successfully passed her last exam before Christmas meaning she is now a fully-qualified GP. She was interviewed and was successful in securing a permanent role within the Practice.</p> <p>Registrars: Dr Ejiofor will leave early February to do a further rotation in his training. Two new Registrars will be starting in February - Dr Zeyad Elkammany and Dr William Matthews. Dr Raj Jha will remain with the Practice for a further five or six months undergoing his GP training,</p> <p>Lois Etheridge (DATA Quality Admin) returned to work at the beginning of January. Pauline Tidswell (Reception Manager) will hopefully return to work in the next few weeks following a period of illness. There is a vacancy for an HCA following the retiral of Rusty Ripley who will be returning temporarily over the next month due to staff shortages. Sister Sharon Lax will be retiring in the Spring. These two positions will be advertised on the NHS Jobs website.</p> <p>Appointments in December: A total of 4,541 GP and Nurse appointments were made. 1,312 of these were Nurse/HCA appointments, 1,871 were GP face-to-face appointments, 314 were telephone appointments, 931 were triage appointments and 113 were home visits. The number of appointments where a patient did not attend was 109. Of these, 60 were with a GP, 31 with a Nurse and 18 with an HCA and represent a total of 22hrs and 38mins. Members expressed disappointment at the DNA numbers but were again assured by S-J that a rigorous protocol for dealing with patients who miss appointments was in place.</p>
<p>5. Patient Concern</p>	<p>LB raised a concern she had received from a patient. This related to being given a Pharmacy First referral from the Practice. S-J had looked into this concern. When a patient is referred to Pharmacy First, their care (for that one condition) transfers from the Practice to Pharmacy First. Exploring whether a follow-up/fail safe system could be used by the Practice to confirm that a patient had been contacted by a pharmacy following their referral is not straightforward due to differing systems being used by individual pharmacies and individual practices. LB will report back to the patient. Members thanked S-J for trying to close up a loose end. S-J asked if members had any conversations with patients who have a concern about appointments that they ask the patient to contact the Practice/Practice Manager direct.</p> <p>NP raised a concern from a patient about seeing a doctor of their choice. S-J explained that this would depend on whether that doctor was on duty that day. She also said that if a patient had a problem seeing the doctor offered following the completion of an AccuRx form, the patient should contact her through Reception in order for her to be made aware of their concern.</p> <p>S-J took this opportunity to talk through the Pharmacy First referral procedure as well as the triage system with members. She also drew the attention of members to recent notifications on FB that the triage system had had to be closed early due to GP illness.</p> <p>JD thanked S-J for a 'nuts and bolts' explanation on how the AccuRx and Pharmacy First systems worked. Members felt that they would now be better equipped to listen and respond when a patient voiced a concern to them.</p>
<p>6. Fundraising</p>	<p>It was agreed that a fundraising campaign should be launched around August/September.</p>

7. AOB

Members felt that patients who believed that Day Lewis Pharmacy was part the Practice might be confused by the Group's Main Display Board having a Day Lewis sign directly above it. Longer-standing members said this was 'historical' in that the board had once been a Day Lewis display that they no longer needed and it had been used by the Group for a number of years. S-J offered to enquire at Day Lewis if their sign could now be removed.

AH asked about a recent report in the media about Jess's Rule - a Department of Health initiative about patients presenting three times with similar symptoms. She asked whether information about this could be displayed in the surgery. S-J was aware of this initiative from the media but no formal notification had been received by the Practice. When it was, the information would be passed on to patients.

NP asked about whether the Group/Practice might produce a document informing patients about 'Making the Best of your GP Appointment.' S-J confirmed that information explaining to patients about the triage system as well as the common conditions that the Pharmacy First system deals with, and asking that patients raise only one condition at a GP appointment is already on the Surgery website and displayed in the waiting rooms. It was clarified that a patient would not be prevented in raising a second condition by a GP as it was sometimes the case that the second symptom had a bearing on the first.

S-J to let LB and AD have a note of the Practice Target Days to allow dates of PPG meetings and of 'Lloyd George Days' to be confirmed.

NP let the group know that his photograph had disappeared from the Group's photos on the board in the waiting room. ST to be asked if she can provide another.

NP shared his concern that there were no younger members in the Group. It was felt that trying to get younger members was very difficult because of the times of meetings and work commitments. NP thought that some other PPGs had younger members and offered to find out how they had managed to achieve this (ie were their meetings held via Zoom or Teams?)

8. Date of Next Meeting

**4 p.m. Thursday 19 February 2026.**