

PPG Meeting
March 2nd 2022
Alwoodley Medical Centre (AMC)

Present (Patients): Dr Stewart Manning (SM), Shelley Ross (SR), Marilyn Ableson (MA), Alison Dickinson (AD), Brenda Metcalfe (BM), Louise Escott (LS)

Present (Practice): Dr Raj Sathiyaseelan (Dr RS), Dr Martin Sutcliffe, (Dr MS), Jayne Tait (JT), Sue Appleyard (SA)

Compiled by: SR

Item	Notes	Action
1	Apologies Alex Sharp, Richard Killington	
2	The minutes of the October 6 th 2021 meeting were approved	
3	<p>Discussion Points from the October 6th Meeting</p> <p>PPG Contacting Patients</p> <p>At the October 6th meeting, SR said that Adam Stewart from the CCG had advised that GDPR would not be contravened by asking patients in a one-off text whether they would like to receive the newsletter. This was because the newsletter supports the practice and a single text would offer patients the chance to opt in. Dr MS had agreed to speak to other members of the practice team about taking this forward. At today's meeting Dr MS advised he had not done this but advised again that this would be a contravention.</p> <p>A discussion ensued about how the PPG can communicate with the practice's patients. SR said this was a priority as there were 26 members of the PPG – 11 core and 15 virtual. She said she did not feel it was satisfactory that as a patient group they were unable to have any contact with the practice's 20,000 patients. She felt they were unable to represent patients effectively.</p> <p>Dr SM said he had noticed a letter on the AMC website which updated patients about the practice and what was going on behind the scenes. He said the PPG should be advised in advance of such notifications and changes to the practice. For instance, changes to the appointment system, new messages for patients on the telephone, new doctors being appointed/leaving etc. He added that the group was not asking to be consulted on such changes but advised before they were made public. SR said this would also enable PPG members to disseminate the information to family and friends. Dr RS said this was not an unreasonable request and would be beneficial to the practice. He added they had not thought to do this as some changes were often made quickly, however, they would aim to do this going forward. Dr RS added that there would</p>	

	<p>be some changes in early summer and an announcement would be made as a result.</p> <p>General Maintenance</p> <p>Coat hooks had now been placed in both the male and female toilets in reception.</p>	
4	<p>Newsletter</p> <p>SR said that as the group was unable to contact patients, she did not feel the newsletter played a purposeful role. She also said that it needed to be produced in collaboration with the practice and content for each addition was consequently proving difficult. Prior to the pandemic, hard copies of the newsletter had been placed in the waiting rooms of both Adel and AMC. However, only a limited numbers of copies were taken. During the pandemic, no hard copies had been produced but members of the Alwoodley Residents Group on Facebook and Nextdoor were advised of a link which they could click on to read it on the AMC website. She explained that it was difficult to gauge how many people actually read the newsletter and both sites only reached approximately 9,000 people.</p> <p>Dr RS asked if there was a better way of disseminating information while AD wondered if particular groups could be targeted. SA advised that some organisations restricted the type of information they liked to receive. Dr MS suggested that a newsletter could be produced by the practice about staff and how patients are cared for. He said hard copies could be produced but patients should be told how to access things digitally; QR codes could be placed on the practice's noticeboards. He said the newsletter could be produced four times a year. BM said that practice news could be put on social media but Dr MS said that social media worked well for vaccination news but out of 20,000 people only about 2,000 were interested. BM suggested that patients could be told on social media to check the practice website for updates but Dr MS said if the practice has a presence on social media, then it could be open to negative comment. BM said there were lots of positive comments about the practice. SA pointed out that social media excluded older members of the community. When asked by AD if there was a comms lead, JT advised that there was not. AD said that a university student could assist as part of his or her course but this was rejected by the practice team because there were, according to Dr MS, too many channels to communicate with. For instance, he explained that elderly people like to be notified by post, whilst some like to be contacted by telephone. Many people used social media. SR suggested using the Alwoodley Residents Group to communicate with patients but Dr MS said patients lived in a number of different wards and the practice would need a presence with other social media residents groups. Dr MS said he</p>	

	would investigate whether there was an option where people could sign up on the website and request to be notified of practice updates.	Dr MS
5	<p>Health/Cancer Champion</p> <p>Dr SM said he believes the practice would benefit from having a Health/Cancer Champion. He explained that as part of his remit as chairman of the Yorkshire Cancer Community, he often speaks to different groups. MA said she had spoken at the Christie Hospital, Manchester about caring for her husband who had had cancer. AD added that other sectors could be targeted, such as mental health. Dr RS and Dr MS agreed that it was a good thing to do and would support it. Dr SM advised he would give a presentation at the next meeting.</p>	Dr SM
6	<p>MAECare Rep</p> <p>PPG member Robert Stephenson had suggested that MAECare – Moor Allerton Elderly Care - should have a representative on the PPG. A discussion ensued in which Dr RS explained that there were a number of patients who were supported by MAECare. However, it was agreed that as the PPG is made up of patients, a representative would have to be a patient. Dr MS added that MAECare can always contact the practice if required.</p>	
7	<p>Accessible Information Standard</p> <p>AIS is a legal requirement for patients who have additional communication needs such as loss of sight, loss of hearing and learning difficulties. Dr SM advised that provision is made for these patients on the AMC website.</p>	
8	<p>AOB</p> <p>CPCS – Community Pharmacist Consultation Service</p> <p>SR asked if the practice was using this service. Dr MS said they were one of the first or second practices to go live with this, but had experienced some problems. Five patients had been referred to the pharmacy at Sainsburys but no-one had been available to help them. Patients are also referred to Alwoodley Pharmacy. Dr MS said patients had no need to call the practice in order to visit a pharmacy.</p> <p>Healthwatch</p> <p>PPG member Robert Stephenson wanted to know if the practice received any feedback from Healthwatch. Dr MS advised they did not.</p> <p>ONS Covid 19 Infection Survey</p> <p>Robert Stephenson wanted to know if the practice knew of any patients who were involved with this survey. Dr SM said he was taking part however, Dr RS said he did not know of any patients taking part.</p> <p>Books on Prescription</p> <p>The PPG was allocated funding for this scheme in July 2019. Dr SM said he had recently seen something similar at another medical</p>	

	<p>centre and wondered if the practice was still interested in implementing this scheme. Dr RS said he was in favour of it and it was suggested that the bookcases should be wall mounted. Dr SM said he would send some photographs of the bookcases he had seen to MA. MA said she would start working on it and feedback at the next meeting.</p> <p>PPG Budget Dr SM asked if there were any funds available for the PPG to use for mailing letters to members etc. He was advised there was not but any letters could be emailed to the practice who would distribute them.</p> <p>PPG Banner AMC Waiting Room It was agreed to remove this</p>	<p>MA</p> <p>SA</p>
10	<p>Date of next meeting June 1st 2022</p>	