

**MINUTES FOR THE MEETING OF NORTH LEEDS MEDICAL PRACTICE'S PPG  
TUESDAY 21 FEBRUARY 2023 AT 6.15PM**

**ATTENDEES:**

Beverley Kite	Chair
Philip Elphick	Vice Chair
Diana Oakes	Vice Chair
Karen Smith	Practice Manager
Philomena Iqbal	
David Harris	
Rosemarie Harris	
Debbie Beirne	
Bernie Wilson	
Nigel Leakey	

**APOLOGIES:**

Peter Kite  
Jaqui Williams Durkin  
Derek Levy  
Mary Sheridan  
Yolande Sowerby

**Agenda\*:**

1. Queen's Voluntary Service Award (QVSA) developments - Now King's (KVSA) for Leeds Caring Hands
2. Outlook e-mail - discussion required regarding confidentiality
3. PATCHS - new system that replaces AccRX & E-consult
4. Fabric chairs in the waiting room
5. Elderly patients struggling with technology
6. Working with Leeds City Council - Digital Skills
7. Blood pressure monitor in reception
8. Patient questionnaire
9. AOB

*\*We didn't keep to the order shown above, as the discussion led us ahead sometimes.*

**Beverley** opened the meeting by welcoming everyone and asked if everyone was OK with the minutes from the last meeting. Everyone confirmed minutes were accepted as issued.

**Beverley** read out the apologies, and stated the agenda for the day.

**1. Q/KAVS**

**Beverley** updated everyone that the visit from the award representative, Richard, went really well, he stayed for quite a while at the Group and was pleased with what he saw, and Peter Khoo attended also, as well as Rebecca, the Social Prescriber.

**Beverley** then gave us the good news: we've now been put through to the West Yorkshire level of the **King's Award for Voluntary Service** (KAVS). If we pass that, we go through to national level. The process is being slightly delayed because of the intense activity taking place for the upcoming Coronation.

[See more about the Award here.](#)

**Beverley** also mentioned that all nominees will be invited to an event at [Bowcliffe Hall](#) in Wetherby, on 29 March. **Beverley** to update further in due course. Since the meeting Beverley has been informed that we have been put through to the National level and Beverley, Elaine Pinnock and Philomena Iqbal will be attending Bowcliffe Hall on the 29<sup>th</sup> March 2023.

**Rosemary** asked how many people attend now the activity groups. Beverley replied that it's about 18-20 people on a Wednesday, and between 11 – 15 on a Monday for the Chair Exercise group.

**Beverley** also updated the group that we've received **two donations** – one of £200 and another of £500 – both donors wanted to remain anonymous but agreed that the Trustees could be notified.

## 2. Outlook emails

**Beverley** explained the background – that the ICB (**Integrated Care Board\***) was no longer allowing us to use any existing email addresses for Chair, Vice-Chairs, etc. for PPG business, and said that they will give us Outlook email accounts. However, a slight disagreement began between the PPG and the representative from the ICB when PPG Vice-Chair **Philip Elphick**, an IT specialist by trade, flagged some issues with the conditions that the ICB was imposing on our usage of the proposed new Outlook email addresses. Both **Philip** and fellow Vice-Chair **Diana Oakes** raised two main concerns, stating the conditions were not acceptable: the ICB insisted that:

- they see all emails sent from these addresses to the PPG, and that
- we use – and don't change – the password they supply us with.

**Beverley**, as Chair, spoke to both Vice-Chairs (**Philip** and **Diana**), both of whom drew on their digital experience – **Philip** as an IT SME (Subject Matter Expert) and **Diana** as a Communications Lead in a bank – to conclude that the above conditions, if imposed, would constitute actual breaches of the Information Security legislation, including GDPR, as well as various Online Safety guidelines and best practice. **Diana** even checked this with one of the Data Protection Managers (DPMs) at her workplace, who confirmed that, in the spirit of GDPR, and other Cyber Safety rules, **no one should be forced to share their email account password with another party, or to not change it** from the originally-provided one.

Equally, the emails exchanged should not be visible to anyone apart from the person(s) they were intended for. Patients may contact us with confidential information, or information they may not want – at least at first – the Practice or the ICB to see. By the same token, occasionally, the emails exchanged by the Chair and Vice-Chairs may contain personal information, which is not intended for other parties.

**Philip** added that Outlook was notoriously easy to hack, too, and passwords weren't very secure, and **Beverley** said she'd also raised the above-mentioned confidentiality issue, in a Zoom call with **Philip** and **Adam**, the ICB representative, and **Adam** eventually agreed for us to use what we prefer.

**Rosemary** asked what other PPGs do. Beverley replied that some do what we do, have a PPG domain, while others use their personal email addresses. We don't know if others raised this, too.

**Post-meeting update:** **Diana** has [asked this question in the NAPP Forum](#) and will give an update at the next meeting.

**Beverley submitted to the vote** the keeping of the existing email addresses for PPG business use: [chair@northleedsppg.org.uk](mailto:chair@northleedsppg.org.uk) and [vicechair@northleedsppg.org.uk](mailto:vicechair@northleedsppg.org.uk) – with unanimity of votes, the existing emails were kept.

*\*ICBs replaced Clinical Commissioning Groups (CCGs) in the NHS in England from 1 July 2022.*

### 3. PATCHS

**Karen** (Practice Manager) explained that [PATCHS](#) is a new system that will soon replace EConsult and the system currently used for text messages (SMS). This is because the ICB is stopping the funding for EConsult and the SMS service on 31 March 2023.

PATCHS is designed by GPs and patients, in collaboration with [The University of Manchester](#). It will do the same job as the above two systems, but on the same platform.

Patients and doctors register for it. A patient will receive a text message to alert them that they have a PATCHS message and the patient has to access the message on the PATCHS platform.

It will be rolled out on a phased basis (e.g. the clinical aspect won't be there at first). We're in the 2<sup>nd</sup> wave of the pilot, the Practice has just started trialling it out.

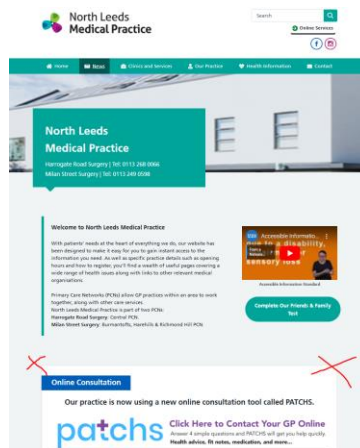
**Philip** asked what happens to the data – **Karen** replied that only NLMP patients can use ours. Similar conditions to how EConsult was.

**EConsult will be switched off on 9 March** and SMSs to be sent to people to register for PATCHS (**note:** as at 24 March, some of the PPG members have not received yet an SMS).

**Karen** stated that information is already posted on the Practice's website, and there will be posters in the two surgeries. **Note:** as at 24 March, PATCHS is [active on the NLMP website](#). It is easy to register, especially if you use the option of registering with your NHS log-on details.

#### **Read more about PATCHS:**

- [For patients](#) – all a patient needs to know.
- [For doctors](#) – if you want to read more – quite interesting.
- [YouTube video](#) (length: 1min 18 sec)



#### 4. Elderly Patients Feedback - originally no. 5 on the Agenda

We discussed feedback received about older patients struggling with technology and what are the potential solutions.

**Rosemary** suggested there is also a **mindset aspect** here: there are those people who genuinely **can't** use technology and those who **won't** use it.

**Karen** suggested that if other people would use the online services, then phones could be left free for those who can't use tech.

**Beverley** reminded everyone of the iPads we have, purchased with the money we were awarded through Diana's submission to the Halifax plc Community Fund and that we can re-start the teaching sessions we had started before the pandemic.

**Update after the meeting:** We have now received funding from Leeds City Council for 5 iPads and an Internet/Wi-Fi booster, plus data for 24 months. They set everything up, through **3** (the telecommunications company), and support too. Total: £1,740. We're going to possibly do a 5-6 week course with **Philip** for 5-6 people, pre-booked, as it covers all Central PCN. We can also use them on a Wednesday, too, for the activities Group. **Beverley** and **Philip** to progress.

**Karen** explained the Practice has a dummy account patients can practice on.

#### 5. Fabric chairs in the waiting rooms

**Karen** updated us that by November 2023 we must have a 'Cleaning Standard', and we have to have a star rating. It was flagged that the fabric chairs are very dirty and Karen mentioned the guarantee has run out and that the Practice doesn't actually know how to clean them, so they will attempt to use an upholstery steamer, scheduled to happen over one weekend.

#### 6. BP Monitor

A short discussion - **Beverley** flagged that the BP monitor in the surgery pod, in the ground floor waiting room at Harrogate Rd didn't seem to work. **Karen** stated that the dome bit will be taken away as it's out of warranty and while a bill was sent to the practice, it's not working.

#### 7. Patient Questionnaire

**Beverley** explained that we have set up a small 'working group' to discuss and come up with the right questions for the new Survey/Questionnaire.

We started discussing how a lot of things have improved, and **Karen** also expressed the Practice's frustration with the fact that CQC has paused their inspections and we've waited for 18 months still stuck with the 'Requires Improvement' rating when in fact their concerns from last time have now been addressed.

**Rosemary** asked if there was anything the Practice/Karen wanted us to add to the Patient Questionnaire, such as to find out how many people struggle with tech, would they use a service to teach them, etc.

**Debbie** advised it's best to keep the questions short and clear, and limited to what we need to know the most.

**David** stated that the phone system has improved greatly, and waiting times on the phone have reduced considerably. Karen explained that this is because they have 10 people first thing in the morning, and 7 later on. Another improvement is having everyone in the same room answering the phones for both Harrogate Rd and Milan St., so that staff feel more supported and learning is enabled. The practice has now got a TV screen showing the staff how many calls are awaiting (like in larger call centres).

**Update after the meeting:** the working group will meet on 28 March at Harrogate Rd. Surgery.

#### **AOB**

None.

At this point, with no other business, **Beverley** closed the meeting, thanking everyone for their time and advising that, as always, she will write to everyone with the date for the next meeting.

#### **END OF MEETING**

***PLEASE NOTE: PEOPLE WHOSE NAMES ARE IN RED ARE THOSE NEEDING TO ACTION QUERIES BEFORE THE NEXT MEETING - THANK YOU!***