

## Notes from West Locality Patient Group, 28<sup>th</sup> August 2013

Note: this meeting was intended to be an informal meet and greet session for new members. However, no new members were in attendance so the meeting was used as an opportunity to discuss the future development of the patient group.

Attendance – Jacqui Wylie collected slips from attendees with names, contact details and communication preferences to enable more effective communication with group members in the future. Practices with members attending were Dr Lefley's, Old Forge (3 reps), DR Khalidi's and Church View. In addition to LPG members, Jacqui Wylie, Dr Iain Gilmour, Aileen Sullivan and Donna Bradbury were in attendance.

Key points for future action / consideration were as follows:

- The group wanted more clarity about their purpose, including what they are there to deliver (as opposed to LEBs), how they link in to the CCG so their views can influence decision making, how they link back to PPGs. Some members expressed concerns over the MIU consultation as they felt their views were not adequately taken in to account. Aileen Sullivan explained how the MIUs fitted as part of the whole urgent care system and that the CCG were now very keen to get views of the patients of Sunderland and this would be an ongoing process. IG also noted some of the issues with MIUs and the difference in models across the city, and the need to find a solution that helps address urgent care pressures.
- The group noted that they would like to have information and data around areas of the plan in order to make more informed comments
- The group felt that terms of reference needed to be developed for the group. Members seemed unaware of the draft previously discussed, and generally it was felt that further work should be done on these so the terms of reference were clearer about how Locality Patient Groups fit as part of the CCG reporting mechanisms, and also clearly defines their purpose. Aileen Sullivan explained that work was being done at the CCG to look at the engagement strategy. It was also noted that there were plans to look further at support to the development of the locality patients groups and that this could also help define the future direction.
- Some members of the group were unaware of the dates of LEBs. There was also confusion about dates of the locality patient groups meetings, with different dates and times being circulated, and some members thinking meetings had been cancelled. It was agreed that further work needed to be undertaken to make sure communications were more effective. In particular members wanted more notice regarding meetings.
- It was suggested that all locality groups could have discussions about areas they wanted to focus on e.g. smoking to avoid duplication of effort.
- Promotion of the Locality Patient Group was discussed. JW stated she would take forward work with the practice managers to ensure practice displayed information about the groups (e.g. in waiting areas and on websites), and also circulated to PPG members. It was also noted that plans should be put in place to make better use of technology – e.g TV screens and message boards and use of transmitters to deliver text messages to phones of people waiting in the practice to promote the

group. It was also suggested that a poster should be developed and shared with newsagents, local supermarkets, and community groups such as young mothers, youth groups or Age UK. It was also suggested that meeting times should vary to include some evening meetings for people who work or are busy in the daytime, and that the group explored ways of using surveys, virtual groups and social media to get comments / input from a wider range of people who may be able to contribute without attending meetings.

- It was suggested that the group could be exploring linking in with the Duke of Edinburgh awards scheme and see if people could get credits for attending the locality patient group. A structured pilot scheme could be developed
- Jacqui Wylie confirmed the locality were still working with public health to explore developing links with schools, and that this project could also link to the locality patient group.