

**MINUTES OF PPG MEETING
HELD VIA ZOOM ON WEDNESDAY 1st DECEMBER 2021 at 6.30pm**

Attendees YMG:	[REDACTED]
Attendees Patients:	[REDACTED]
Apologies:	[REDACTED]
Facilitator:	[REDACTED]
Note Taker:	[REDACTED]

WELCOME & INTRODUCTION

All attendees introduced themselves to the meeting and were thanked for attending.

APPROVAL OF MINUTES & ACTIONS OF LAST MEETING

The minutes of the last meeting were approved.

The actions from the previous meeting were shared (and are attached to these minutes).

Discussion is still on-going on how patients email into surgery.

TEENAGERS ARE UNAWARE THEY CAN GET APPOINTMENTS WITH A GP OR THE COVID-19 VACCINE WITHOUT THEIR PARENTS BEING INFORMED

█ advised that there could be page on our website explaining that teenagers have a right to confidentiality and can attend appointments without their parents' knowledge. This page could also include suitable information around mental health, sexual health issues.

IF A KLINIK FORM IS PUT IN SHOULD WE GET A RESPONSE WITHIN 10 WORKING DAYS – I HAVE BEEN WAITING 12 DAYS AS OF TODAY – IF THIS IS NO LONGER THE TIMESCALE PATIENTS SHOULD BE INFORMED

WHILST ABROAD I MADE AN APPOINTMENT USING KLINIK AND IT WAS VERY EASY. I NEEDED A FURTHER APPOINTMENT AND I WAITED 15 DAYS AND DIDN'T HEAR ANYTHING SO HAD TO RING UP

I NEEDED A LONG TERM CONDITION REVIEW – I DIDN'T KNOW MY HEIGHT AND WEIGHT SO COULDN'T COMPLETE AND SUBMIT THE FORM – I HAVE BEEN TOLD I HAVE TO GET THIS DONE AT THE SURGERY

I COULDN'T SUBMIT THE FORM AS I DIDN'T HAVE MY NHS NUMBER – IT WOULD BE USEFUL TO KNOW WHAT IS REQUIRED BEFORE COMPLETING THE FORM

A meeting has been held to review the forms and improve this service to ensure they work for both patients and the nursing team as it is currently causing an increased workload.

RECEIVED TEXT TO MAKE AN APPOINTMENT – THE KLINIK FORM IS NOT GOOD FOR REQUESTING SIMPLE THINGS LIKE TRYING TO BOOK AN APPOINTMENT AT THE SURGERY'S REQUEST

█ explained that this has been implemented at most practices in York as there was a belief that there was significant unmet patient demand due to patients being unable to get through on the phone. Klinik also enables patients to be triaged by a GP and a team of people ensuring patients see the right person first time based on information that has been shared. If a request is deemed urgent you will be seen the same or next day however there is a challenge with routine appointments. The 10 day limit was set by YMG and unfortunately the more urgent appointment requests received mean that routines get pushed behind. There is the equivalent of 4 GPs on sick and no locums available to replace lost clinics consequently routine appointments have been sacrificed.

The country is seeing an unprecedented level of demand matched with extremely high levels of sickness and our most resilient doctors are struggling. The Health Minister has now given a further challenge to provide all flu vaccinations and COVID-19 boosters before the end of December. All practices are in a similar place and it is a dire situation to which there is no easy fix.

Government is providing a Winter Access Fund to enable us to offer more access however this would be using the same GPs who are already struggling. The NHS is at breaking point.

I RANG UP TO SPEAK TO A GP OR NURSE ABOUT MY MEDICATION – I WAS TOLD 5 WEEKS – IT'S NOT GOOD ENOUGH

■ apologised but it is impossible to control sickness within the organisation or find Doctors to recruit into vacant posts and demand is increasing daily.

THE ONLY QUESTION I HAVE AROUND KLINIK IS THAT I UNDERSTOOD THAT IT WOULD BE AVAILABLE TO COMPLETE AT ANY TIME OF THE DAY. A COUPLE OF TIMES WHEN I HAVE GONE IN ON AN EVENING, IT HAS SAID THAT I NEED TO WAIT UNTIL THE NEXT MORNING AT 6AM. THE IDEA OF COMPLETING IT ANYTIME, ESPECIALLY FOR NON URGENT, WAS ONE OF THE THINGS THAT WAS REALLY APPEALING. OTHER THAN THAT, IT HAS WORKED REALLY WELL FOR ME

■ advised that due to the high levels of requests for access via Klinik the difficult decision was made to offer the service during office hours only.

ACTION	COMMENT	PERSON RESPONSIBLE	TARGET DATE
Discuss with the admin team a facility to enable patients to email into the surgery	COMPLETE – see separate action list	■	13-12-2021
Discuss with IT lead about having a dedicated website page for our teenage patients	COMPLETE - It is hoped to make this part of our new website on launch	■	01-01-2022

FEEDBACK ON LOCAL INITIATIVES

■ advised NHSE Winter Access Fund will provide additional resources to deal with winter pressure. All GPs in York have been asked to provide more appointments, but they are very tired and due to the increase in demand Locum fees have spiralled.

Our recently implemented Push Doctor facility is also to be rolled out across the City.

YOU HAVE MY HEARTFELT SYMPATHY – THERE IS A GOOD REASON WHY THIS IS THE POSITION

Primary Care is constantly seeking initiatives to improve services for patients.

A new clinic called PATH (Paediatric Ambulatory Treatment Hub) has opened at the Mass Vaccination site for children with respiratory issues. This aims to reduce the number of children who are seen at A&E; out of 70 patients seen only 2 were sent to A&E.

To clear the waiting list of undiagnosed asthma patients' clinics will be available at the Mass Vaccination site for Spirometry and Feno.

An additional 8000 Push Doctor appointments have been secured for York, of which 2000 a month will be available for YMG patients between December 2021 and March 2022 to help deal with the backlog of routine appointments.

YMG is in the process of securing additional locums on contract for the next 3 months and by over employing it is hoped to maintain the level of appointments required and to mitigate against further sickness.

Patients are being referred to the CPCS (Community Pharmacist Consultation Service) for minor problems. YMG are pioneering this service in York and this will be rolled out to other practices in York in the coming months.

Nurses are being asked to see patients with minor illness to enable GPs to deal with more complex issues.

We are considering changing Long Term Condition Reviews especially for patients whose conditions are under control.

We are also looking at reducing routine appointments during winter so that we can increase resource for same day care.

We are also looking at different ways to communicate with patients and letting them know when we are under significant pressure.

To help reduce pressure in A&E Nimbus are providing a GP at the front door in A&E (12pm – 8pm). We are seeing early signs of success and this service is likely to be extended. This has a dual purpose of reducing pressure in hospital and general practice.

ADVICE & GUIDANCE ON HOW BEST TO COMMUNICATE WITH PATIENTS

PRIMARY CARE SHOULD WORK IN COLLABORATION WITH SECONDARY CARE TO MANAGE PATIENT EXPECTATIONS

■ agreed and reported that high levels of complaints are being received from patients who are dissatisfied with the service that also must be reviewed and responded to and asked how best to communicate with patients. There is a back log of almost 2000 patients waiting for a routine appointment and the pressures are weighing heavily on the organisation.

■ also asked patients to be understanding of the impact this has on staff who are trying their very best, want to provide good care for their patients and are extremely demoralised with how the media and government are portraying Primary Care.

I RECEIVED A TEXT ASKING ME TO FILL IN A FORM – CAN'T YOU TEXT PATIENTS AND SAY WE ARE UNABLE TO CONDUCT REVIEWS AT THIS TIME

THERE SHOULD BE SOME WAY OF FENDING OFF THOSE PATIENTS WITH TRIVIAL MATTERS – I SUGGESTED PUTTING FORWARD A SPOKESPERSON TO THE RADIO – NOT LIVE BUT VIA SUBMISSION OF AN ARTICLE TO THE PRESS OR RADIO OR IN THE LOCAL LINK

■ reported that GPs in the city have been broadcasting in the media to explain the current situation.

ANYTHING IN THE MEDIA HAS TO FIT WITH THE WIDER NHS VIEW

■ concurred that any messages need to be carefully considered.

THANK YOU FOR BEING SO HONEST WE APPRECIATE IT AND WE CAN SEE THE STRUGGLE. I THINK PART OF OUR ROLE IS TO FLY YOUR KITE IN THE COMMUNITY AND WHEN WE HEAR CONVERSATIONS WITH OUR NEIGHBOURS TRY AND EXPLAIN THE PRESSURES - I CAN ALSO UNDERSTAND THOUGH IF YOU HAVE A CHILD WHO IS SERIOUSLY ILL, THEY WANT THEM TO BE SEEN - IT IS DIFFICULT.

It was advised that children will always be seen as soon as possible.

■ asked the PPG to assist in videoing some clips to share on our website.

A text or email to our whole patient population to explain the pressures will also be considered.

WHAT HAS HAPPENED TO THE SYSTEM THAT KEEPS YOU ON HOLD AND CALLS YOU BACK

■ stated that when demand is high this is turned off.

IT IS A GOOD IDEA TO SPEAK TO THE MEDIA – THE KEY THING IS MANAGING PATIENT EXPECTATION

■ *left the meeting at 19:20*

THIS IS THE PERFECT STORM BETWEEN NATURE AND WESTMINSTER – TOTALLY APPRECIATE THE PRESSURES – ONE PROBLEM IS THAT GPS ARE MORE RELIANT ON 3RD PARTIES – MY EXPERIENCE WITH KLINIK WAS FINE, I WAS SENT TO PUSH DOCTOR AND GOT INTO A LOOP AND COULDN'T GET AN APPOINTMENT – THERE WAS NOTHING TO ADVISE IT WASN'T WORKING SO I HAD TO RING THE PRACTICE AND DID FEEL GUILTY BUT THERE WAS NO OTHER WAY - SOMETIMES YOU ARE LET DOWN BY THOSE PROVIDING SERVICES FOR YOU

COULD YMG ACCESS VOLUNTARY WORKERS PARTICULARLY THOSE THAT HAVE BEEN IN THE MEDICAL PROFESSION FOR ADMINISTRATION WORK

■ agreed that voluntary workers at the Mass Vaccination site had been a great success but unfortunately there are more challenges in Primary Care with access to patient records and confidentiality. This will be given consideration however the shortfall is in GPs and not administrators.

■ commented that a "perfect storm" is brewing with pent up demand emerging, patients who would normally cycle through the system and are unable to get an operation at the hospital are coming back to GPs for pain management

We are planning for a very difficult winter with flu (as we have been protected against this in the last 2 years with COVID-19), respiratory diseases are expected to peak and finally both the flu and COVID-19 booster campaigns are all expected to be managed with a shortage of GPs and a spent workforce.

I SUPPORT THE IDEA OF VOLUNTEERS BUT THERE IS A TRAINING ISSUE ALTHOUGH THIS WOULD NOT BE INSURMOUNTABLE

YOU DON'T HAVE TO BE A MEDICAL PROFESSIONAL TO UNDERSTAND THE RULES OF CONFIDENTIALITY

THE COST OF ASKING FOR VOLUNTEERS COULD BE PROHIBITIVE AS THEY WOULD HAVE TO HAVE A DBS

■ also suggested that each volunteer would need training and access to a computer, but this would be discussed further with the Senior Management Team

■ will also contact this group via email for further support.

ACTION	COMMENT	PERSON RESPONSIBLE	TARGET DATE
Discuss volunteering opportunities with SMT		■	01-01-2022

QUESTIONS & ANSWERS

HOW MANY PATIENTS ARE THERE AND HOW MANY DOCTORS?

Our current patient population is 44,287. We have 18.8 FTE (full time equivalent) GPs, both employed and Partners and 22.6 FTE nurses.

■ explained that under normal circumstances the GP would see the patient and treat the condition or refer to the hospital who would treat the condition, but the cycle is broken, and more people are coming back to general practice. There is a 5 year backlog of patients waiting to be treated in hospital and demand in Primary Care is increasing.

WE DISCUSSED PREVIOUSLY THAT DNAs (DID NOT ATTENDS) WERE SIGNIFICANT AND TRYING TO CORRECT THIS WAS DIFFICULT

■ advised that this problem has reduced with telephone consultations.

WELL DONE ZULF THANK YOU FOR COMING AND LISTENING TO US!

ANY OTHER BUSINESS

There was no other business.

MEETING CLOSED

Meeting closed at 8.00pm

DATE OF NEXT JOINT PPG

Wednesday 13th April 2022 – 6.30 pm via Zoom