

**MINUTES OF PPG MEETING
HELD VIA ZOOM ON WEDNESDAY 12th MAY 2021 at 6.30pm**

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

INTRODUCTION & WELCOME

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

APPROVAL OF MINUTES OF LAST MEETING

The minutes of the last meeting were approved.

The action from the previous meeting was completed (ensuring patients collect prescriptions promptly from York Medical Pharmacy).

ACCESS – INCLUDING KLINIK

KLINIK

■ explained that YMG plan to introduce a new access system for patients the second week in June called Klinik. This is a Finnish online system, which other large practices in the City and in fact the country have implemented in the last year to improve the patient journey and access into Primary Care.

The service will be open online 24/7 giving patients a wider window of access; unless the practice is completely overwhelmed by demand when there is the ability to pause the service. Patients will access Klinik via our website.

The reasons for implementing the change is two-fold; one is to try and manage the huge amount of care requests received from patients each day, particularly during COVID-19 and allow us to manage them in a different way and secondly take the opportunities learnt from using new IT resources that have arisen out of COVID-19 and make them part of our new normal. Klinik will also provide the practice with useful data allowing our access team to plan staffing levels and flex and increase our workforce when demand is at its highest. Patients who don't have online access will still be able to call or come into the practice where a PCC will go through the same online form with them. All care requests received before 4pm will be triaged the same day and patients will either be given an appointment or self-care advice as appropriate.

■ gave a demonstration of the patient journey using Klinik.

WILL THE FORM AUTO-FILL THE PATIENT DETAILS?

■ advised that unfortunately it doesn't yet link into our NHS database however if your device would normally auto-fill your name in a form it may also do on Klinik.

HOW MANY MENUS HAVE WE HAD TO COMPLETE?

■ explained that there were 11 layers with multiple questions; the reason for this is that every time information is entered into Klinik the artificial intelligence in the background will predict how urgently you need to be seen and will use this intelligence over time to improve the system. It does ask more questions than traditionally might be asked to access the service, but it is hoped that it will get you to the correct clinician at your first request. It would encourage you to ring 111 or 999 if the symptoms you uploaded into the form were serious.

WILL PATIENTS WHO DON'T HAVE ONLINE ACCESS GET A WORSE SERVICE, HOW ACCESSIBLE IS THE SYSTEM – THOSE WITH SCREEN READERS, IS IT MOBILE FRIENDLY? IT LOOKS GREAT BUT IF YOU ARE REALLY POORLY GOING THROUGH A HUGE RANGE OF QUESTIONS WOULD BE DAUNTING

■ if you don't have mobile, PC or tablet patients can still call the practice as normal. It is hoped that most of our patients will access care via the online form, therefore releasing the pressure on the phone lines for those that really need it. The PCC will take the patient through the questions in the same way as you would do online and over time will become skilled at completing the forms. There have been no reports from other practices that patients do not want to complete the form as they were very unwell. Klinik will work on mobile phones.

PATIENTS WITH SEVERE DEPRESSION WOULDN'T BOTHER DOING A FORM – IT WOULD BE LESS DIFFICULT FOR THEM TO CALL THE PRACTICE BUT IF THIS SYSTEM MEANS THEY CAN GET THROUGH QUICKER THAT IS GOOD

WOULD THIS NOT INCREASE THE LENGTH OF THE PHONE CALL IF THE PCC IS TAKING THE PATIENT THROUGH THE FORM WHEN THEY CALL AND CAUSE GREATER DELAY?

■ agreed that call length would increase however data from other practices suggest most patients use the online form and we would encourage anyone that is able to do so. This would then free up more time for the PCCs to assist those patients who do not have online access either on the phone or by calling into surgery. This system allows all patients equitable access to care.

IS IT BEING BROUGHT IN BECAUSE YOU ARE GETTING THE MESSAGE THAT EVERYTHING IS TOO SLOW – IT IS NOT LONG SINCE WE HELPED TRAIN THE PCCS ON THE PREVIOUS PROJECT

■ stated that the Right First Time project that the PPG previously helped with went live 6 months before COVID-19 hit. Our PCCs have already been trained to ask some of the questions that are in Klinik, so we are slightly ahead of the curve. This platform however will provide 24/7 online access and will provide the practice data on what kind of appointments are required, when demand is at its highest and enable us to manage demand better. There have been some successes with IT during COVID-19; online consultations, text messaging and video consultations; there is also a high call volume first thing in the morning which the practice is unable to manage so this will allow staff to review appointments for the day and work through all care requests in a safe way using the triage tool that will identify the most urgent and allow clinicians to manage patients in the most appropriate way with either an appointment, a text message suggesting further tests or self-care advice.

WHAT HAPPENS IF YOU HAVE A LONG-TERM DISABILITY AND WISH TO SEE THE SAME GP

■ advised that there is an option to add free text where a patient can add a named clinician and there is also a tile for follow up with a GP. Continuity of care is something that YMG is striving to improve and the aim is to get patients seeing their preferred GP however there are only a limited number of appointments available and it may not always be possible.

PEOPLE ARE ALREADY USING KLINIK AND THESE PROBLEMS WILL HAVE ALREADY BEEN EXAMINED AND DEALT WITH

■ reiterated that feedback from patients at other practices is fantastic; the only worry is managing demand but that doesn't appear to have been a problem and Klinik will provide data to show when to flex the workforce to try and manage demand.

CONSULTATIONS AND DIAGNOSIS OVER THE PHONE OR BY SENDING IN PHOTOS PROVIDES A FANTASTIC SERVICE

■ agreed that it had worked brilliantly for many people and was very satisfying for the clinician and would continue.

IF ALL REQUESTS NEED SORTING HOW MUCH NOTICE WILL PATIENTS GET FOR APPOINTMENTS AND HOW ARE PATIENTS GOING TO BE TOLD ABOUT THIS NEW SYSTEM

■ said that YMG opens at 8am and PCCs will look at the care requests that are not important and can be placed immediately into an appointment e.g. blood tests; care requests will be sent to different departments (medication reviews and prescription queries to the Pharmacy Team, nursing queries to the Nursing Team etc). Klinik will also triage the most urgent requests that will be reviewed by GPs and the aim is to review all care requests received before 4pm on the same day. Klinik also asks a patient to record when they ARE NOT available so that appointments can be made at mutually convenient times.

■ explained that posters will be distributed to sites, information is already on the website, Facebook and on the phone system. Leaflets are being produced to go with prescriptions and some text messages will be sent. Email was also suggested as an alternative pathway to notify patients of the changes.

■ said that the beauty of this system is that for the average user calling the practice nothing will change when we "go live" and whilst in the call queue you will be informed that you can now access the service online at your convenience. With Right First Time patients had to call in at specific times.

■ asked patients if the wording of the tiles was understandable for patients and it was agreed that they were clear and would direct patients well.

Repeat prescriptions should continue to be requested via SystmOnline or the NHS app and not via Klinik.

■ was interested to know when patients might use the "I need to contact you about a health problem" and "I have a general enquiry" are they different, what do they mean to patients?

THE CONTACT ABOUT A HEALTH PROBLEM WOULD BE IF I NEEDED TO SEE A GP/NURSE AND THE GENERAL ENQUIRY MIGHT BE HOW DO I REGISTER OR IF IT DOESN'T FIT INTO ONE OF THE OTHER TILES

WHAT IF YOU HAVE A PERSONAL ISSUE AND YOU DON'T WANT TO PUT THE INFORMATION ON THE FORM

■ explained that clinical problems will go to issue will go to a GP or a nurse but our PCCs open many patients records daily and are all bound by a code of confidentiality and are all very professional.

■ said that previous patient feedback was that sharing information with PCCs was embarrassing so completing the care request via Klinik won't necessarily be seen by a PCC.

ARE YOU THINKING OF HAVING A PRACTICE RUN OF THE NEW SYSTEM BY THE PPG?

■ advised that a practice run was planned when all internal training was complete and would value the help and feedback of the PPG before going live with the system.

Patients unanimously agreed that Klinik looked like it would be a good way to access services at YMG.

■ said it was great to see the positivity during the meeting and how well the practice and patient group are working together. This feels like an exciting opportunity to use the wisdom of the patients and capturing both the good and bad and learning from this in the best way to make things better going forward.

COULD AN "IDIOTS GUIDE" BE PRODUCED TO SHOW PEOPLE HOW EASY THE NEW SYSTEM IS

■ felt that this is something the PPG could feedback comments on to add to the website as it would give a very powerful message.

ALL PPG MEMBERS SHOULD BE INVITED TO HAVE A GO ON THE SYSTEM BEFORE GOING LIVE

■ reported that YMG have over 600 patients on the PPG and do have a broader audience but it would be difficult to ask them all to take part.

REPEAT PRESCRIPTIONS – PROCESS WHEN A REVIEW IS DUE

I HAVE TWO ITEMS ON REPEAT PRESCRIPTION – ONE CAME UP FOR REVIEW AND IT WAS NOT DISPENSED BY THE PHARMACY – I REQUESTED IT AGAIN VIA THE WEBSITE AND IT WAS PRESCRIBED BUT WAS THEN OUT OF SYNC WITH MY OTHER MEDICATION – I HAD TO INTERVENE TO BRING THEM BACK INTO LINE AND IT WAS COMPLICATED

■ agreed that this was a common frustration for patients and clinicians. Klinik will help if patients have a medication or prescription query and this will be directed to YMG's pharmacy team. However, there is now a Clinical Admin Hub working in the practice manned by GPs and Pharmacists working together to help streamline the process of medication reviews and re-starting annual reviews, that were put on hold due to COVID-19, for patients with long term conditions.

YMG is constantly trying to find efficiencies and develop to improve services.

THE REVIEW SYSTEM IS VERY COMPLICATED – WHAT IS THE DIFFERENCE BETWEEN A MEDICATION REVIEW AND ANNUAL REVIEW

■ explained that if a patient has a chronic disease they would be called to surgery once per year, in their birthday month for a specialist nurse annual review. If the patient is doing well the nurse will message the GP to update the medication review and the GP will forward on the medication review date to the next year also triggering both an annual and medication review in the birthday month the following year again. Some annual reviews were missed during COVID-19.

■ went on to say that there are two reviews referred to, one is a review of a patients' medical condition the other is for medication. GPs can only put a review date of a maximum of 12 months and clinicians do try and align all medications to the same review date, however there are occasions when this is not safe or possible on the grounds a patient may have more than one medical condition that needs more than one review. The

practice will try to conduct all reviews that can be done together at the same time, but this may continue to be an on-going issue that will never fully be resolved.

ARE THERE ANY ISSUES WITH DELIVERY COMPANIES FOR MEDICAL APPLIANCES – THE ONE I USE IS CONTACTING ME EVERY WEEK

■ advised that YMG don't have direct contact with companies or pharmacies that deliver, or any influence over them. The patient may need to talk to the firm directly to find out why they keep calling but also thanked the patient for pushing back and not over ordering. Email the issue to ■ who may be able to assist.

YMG ROADMAP OUT OF LOCKDOWN

■ explained that lockdown had been interesting and challenging phase in the practice; doors were closed initially to protect both staff and patients which has meant a low infection rate for patients and staff. A dedicated team were set up with total decision making authority and to respond quickly to any change in guidance and there have been a few stop starts with unlock where plans have had to change but the aim is to always align with government policy

YMG is now focusing on putting Klinik in place to improve access for patient and opening the doors whilst continuing to maintain social distancing in practice.

The vaccination programme is going exceptionally well in York and many clinicians from YMG are assisting at the Mass Vaccination Site which has vaccinated around 260,000 people.

Currently the practice is experiencing a very high level of sickness, some of which is down to COVID-19 burnout but the practice is looking to unlock services.

Much resource has also been diverted into vaccinating our most vulnerable patients who are unable to get to the Mass Vaccination Site as well as the homeless population of York.

Four sites (Water Lane, Tower Court, Acomb and Monkgate) are open for face to face appointments and the practice is working on re-opening Woodthorpe 2-3 days per week. It is hoped that minor surgery appointments will re-commence at 32 Clifton and Tower Court is also due to have a major refurbishment to improve the experience for patients.

The garden at 32 Clifton is to be opened to Musical Connections and some of our patients, through our social prescribing team, are going to come and give it a makeover!

YMG has also been using Push Doctor to help with demand and pressure on clinicians.

WE HAVE TO HAVE A COVID-19 PASSPORT IS THIS ON THE NHS COVID-19 APP

■ explained that this was through the NHS app that can also be used to order repeat medications.

I HEARD THERE WAS A DATA LEAK WHERE PEOPLE COULD GET INTO THE COVID-19 BOOKING SERVICE AND USE SOMEONE ELSE'S NAME AND D.O.B - HAS THIS BEEN FIXED

■ said he had not heard about this, but it was a national database so if you knew a person's name and date of birth it would tell you if they had already had an appointment.

■ felt that this meeting was important and appreciated the engagement of patients as YMG re-emerges out of COVID-19. General practice is tough, and the aim is to "build back better" and continue with a hybrid online and face to face model and enable fair access to all. It was lovely to hear the positive comments and asked members to email AR so that this could be shared with all staff.

COVID-19 VACCINATION PROGRAMME

■ explained that the Mass Vaccination Site was the only site in the area to offer Pfizer, Astra Zeneca and Moderna vaccinations. It is likely that boosters will be available in the winter and these will be given at the Mass Vaccination Clinic along with the flu jab.

■ advised that YMG staff had been out vaccinating our most vulnerable patients (homeless, care home and sheltered housing residents and the housebound) and had administered 833 in Jan & Feb, 384 in March and 489 in April.

■ reported that there may be opportunity for the site to be expanded over the next 5 years into a health village for the mass population's health needs and has been a fantastic success and a great example of community collaboration volunteers from all walks of life.

THERE HAS BEEN AN INCREASE OF VOLUNTEERING ACROSS THE BOARD WHICH IS GREAT FOR SOCIETY

ANY OTHER BUSINESS

NEXT MEETING

■ asked members to think about how they would like to take the PPG forward, which may include a mixture of face to face and online meetings/forums. Whilst online is not always ideal it does give the opportunity for the housebound or young parents to attend without the need for babysitters or the need for anyone to travel. The current attendees were taken from the 21 who expressed an interest in attending with a mix of patients from across all our sites with a broad as demographic as possible. ■ has added Future Direction of the PPG to the agenda for the next meeting.

■ thanked the members for taking the time to be part of group and their viewpoints and wisdom in helping to build services. It would be easy for this group to become a space to complain but members bring challenges and a balanced approach.

YMG appreciate members working with us as a partnership to build a better place for all of our patients and for being advocates for those in the practice who can't be here.

MEETING CLOSED

Meeting closed at 8.31pm

DATE OF NEXT JOINT PPG

Wednesday 7th July 2021 – 6.30 pm via Zoom