

**MINUTES OF PPG MEETING
HELD VIA ZOOM ON WEDNESDAY 20th JANUARY 2021 at 6.30pm**

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

APPROVAL OF MINUTES OF LAST MEETING

The minutes of the last meeting were approved.

COVID-19 VACCINATION

WHEN I HAD MY VACCINATION, BECAUSE I AM ON WARFARIN I WAS INFORMED I HAD TO HAVE AN INR CHECK – WHEN I SAW THE NURSE SHE DIDN'T NOW THAT IT SHOULD BE CHECKED

█ stated that the advice following a COVID-19 vaccination is that patients who are on Warfarin may be affected by COVID, but should only have an INR check if there is any unusual bleeding or bruising. No need to get an extra check otherwise.

PATIENTS THAT ARE IN THE 3RD OR 4TH TIER FOR RECEIVING VACCINATIONS WILL IT BE THE ASTRAZENECA VACCINE? PFIZER VACCINE SHOWS IMMUNITY AFTER A WEEK THAT CARRIES ON FOR 12 WEEKS – IS THE SAME THING TRUE OF THE ASTRAZENECA VACCINE?

█ advised that it could be the AstraZeneca or Pfizer vaccine administered. There is a lot of misinformation being shared but it is felt that the AstraZeneca vaccine will give the same level of protection. The original directive for the Pfizer vaccine was to have a repeat at 3 weeks and for the AstraZeneca 4 weeks. The AstraZeneca vaccine is given to those who have a higher allergy risk; however Pfizer offers better protection on current evidence.

The Mass Vaccination Clinic (MVC) has two sites. The National Vaccination Centre (NVC) are offering the AstraZeneca vaccine; the Local Vaccination Centre (LVC) are predominantly using the Pfizer vaccination as they have the correct storage facilities to be able to control its stability, but also have availability of the AstraZeneca vaccine for those patients with serious allergic reactions. Which vaccine is given will depend on which site you are called into. The second dose will be of the same vaccine as the first that patients are given.

IS THERE SOME DEBATE AS TO WHETHER THE PFIZER VACCINE WILL BE OK TO BE RE-ADMINISTERED AT 12 WEEKS – ISN'T THERE SOME SUGGESTION IT WILL NOT GIVE THE SAME LEVEL OF PROTECTION

█ explained that work is still being done on this and we have to rely on our experts. There should be faith in the science and research and if it has been tested with a repeat vaccination at 3 weeks then normally this is what would be recommended however, the Public Health experts are advising that patients will still get immunity when given the repeat dose within 12 weeks and this is better for the population as a whole. The Public Health experts will be taking into account all the different variables.

I DON'T SEE WHY ALL HEALTHWORKERS SHOULDN'T HAVE BEEN AT THE TOP OF THE QUEUE BEFORE THE OVER 80s

█ stated that the decision was made that the first cohort of the population to receive the vaccine would be the over 80s and those resident in care homes; as those were the people who were dying and where the most serious harm was being caused.

THERE ARE A LOT OF HEALTHCARE WORKERS OFF WITH COVID-19 WHO NOW CAN'T MINISTER TO THEIR PATIENTS WHO ARE DYING AS EFFECTIVELY AS THEY MIGHT

█ agreed but there is a secondary problem that once people are vaccinated there is no clear guidance or evidence as to whether they can continue to transmit the infection.

ARE THE LETTERS THAT COME OUT NOW – ARE THEY DUE TO COME OUT AND IF SO DO THEY TELL YOU TO GO TO NUMBER OF PLACES OR TO THE NATIONAL CENTRE?

█ advised that he is involved in the organisation, on behalf of YMG, that has got the Mass Vaccination Centre up and running and is a Director of Nimbuscare. York is fortunate to get a NVC in Wave 2 which means that anyone

within a 45 min drive of the site can use it; the LVC is predominantly for the York population and York health workers and both are working alongside the Mass Vaccination Centre (MVC) that was set up for flu vaccinations on the old Park and Ride car park near Tesco at Askham Bar. The reality was in the first few weeks that both the over 80s and health workers were vaccinated alongside each other. As of last week YMG had 80% of its workforce vaccinated.

█ stated that all staff have been encouraged to have the vaccine, but this is not compulsory. All residents and staff at our care homes have also been vaccinated; if any vaccines remained following these clinics staff were offered the opportunity to attend our Tower Court site to receive a vaccine and ensure there was zero waste.

8 out of 12 attendees of the meeting had been vaccinated.

The Pfizer vaccine is more volatile; it cannot be moved easily, needs to be stored under strict temperature conditions and can only be moved using special equipment. The AstraZeneca vaccine is more stable and will be used for our patients that are in care homes, housebound and in sheltered housing.

█ explained that our highest risk patients, 80 years old and over living in sheltered accommodation will be vaccinated on Friday 22nd January and our housebound patients on Saturday 23rd January using the AstraZeneca vaccine.

█ acknowledged that there will be anomalies; for example a spouse/partner or official/unofficial carer that may be living with a housebound patient and YMG is working on the premise that if that patient can attend the MVC when invited in their cohort then that will be when they receive their vaccination.

York Medical Group is also seeking a licence to operate a temporary vaccination site at Tower Court for our vulnerable and frail patients who are unable to get to the MVC.

League tables show that North Yorkshire is leading the country in vaccinations.

█ stated that many volunteers including the Army, St John's Ambulance staff, as well as Dentists were working at the MVC.

█ is very proud of York Medical Group as our GPs and nurses have been very involved working at the site, █ was part of the planning and Michelle Phillips is working in the Lead Nurse role. █, who is on leave this week, has spent much of his time at the MVC and was Lead Clinician in the opening of the MVC on Monday. Wednesday was the first day that both sites were open and 1100 patients were booked into the MVC and 1200 into the LVC; this caused some problems with traffic issues but otherwise ran smoothly.

Patients arriving early for appointments are causing traffic issues, as this affects the numbers and flow of patients into the MVC so we would urge patients to arrive as close to their appointment time as possible.

WHAT PRESSURE IS THIS PUTTING ON YMG WITH NORMAL PATIENT SERVICES

█ stated that the pressure on all practices was quite profound. YMG has worked tirelessly since the beginning of the pandemic, except for a slight respite during the first lockdown, but now demand has grown exponentially. There is a lot of exhaustion, but also euphoria with a "wartime spirit" of wanting to help and take care of people during the largest vaccination programme in our history. The bulk of the vaccination programme is being carried out by primary care staff and █ agreed with █ that he feels proud that many YMG staff are working at the MVC.

It remains a challenge to manage the workforce to ensure they are not burnt out and consideration is being given to see if GP and Nurse trainees can also help deliver vaccines.

Having a MVC is a feather in the cap for York but also greatly benefits the patients in the area. The MVC is working towards offering a 7 day a week service as the whole population (750,000 people) will require two vaccinations.

DO YOU THINK THE GOVERNMENT TARGET FOR THE FIRST 4 COHORTS WILL BE REACHED?

█ was confident this could be achieved in York. One issue is vaccine supply, there have been some occasions when the vaccines expected were not delivered and patient appointments had to be cancelled. This is the first occasion the City has worked together quickly to get the site up and running and has been a pleasure to be a part of it.

█ agreed the targets could be reached and although there was pressure working at the site it was also an enjoyable experience as the patients are very happy to receive the vaccine. It has shown the strong spirit of Britain and the NHS that they can work together to get things done.

█ was proud of his colleagues in York; this has brought all the local GPs together. There was an organisation called Nimbus that YMG were not previously part of but joined with a view to move things forward for the people of York. It is a testament to how well everyone works together that Yorkshire is one of the top vaccinating areas in the country and our local system worked so well it has been rolled out nationally. Previously the LVC relied on being given vaccines but now that York has a MVC vaccines can be ordered, which will ensure the best chance of hitting the government target.

I HAVE HAD MY FIRST VACCINE – WILL THE SECOND VACCINATION THEREFORE COMMENCE

EARLIER THAN EXPECTED

■ advised that this was unlikely and the programme would just move on to the next cohort of patients.

■ shared possible evidence that the longer time left between vaccinations could cause the second dose to act as a booster.

I HEARD ON THE NEWS THAT OVER 70s IN YORK COULD EXPECT AN INVITE WITHIN THE NEXT 10 DAYS

■ suggested this might be possible. The MVC has started inviting the over 75s but the guidance is to ensure all patients over 80 have been vaccinated before moving on to the next cohort of patients.

I WONDER IF THE NVC AND LVC ARE WORKING SIDE BY SIDE – MY HUSBAND GOT A TEXT TO HAVE HIS VACCINATION AND TODAY GOT A LETTER INVITING HIM AGAIN – IT DOES SAY IF YOU’VE ALREADY HAD THE VACCINE TO IGNORE THE LETTER

■ understood there may be a cross over and duplication of invitations but felt it was better to be asked twice than not at all.

SOME OF OUR FRIENDS AGED 90 HAVEN’T HAD THE VACCINE YET BUT SOME YOUNGER PEOPLE HAVE

■ explained that the first cohort to be invited was the 80 year olds and above.

■ felt there may be a reason, for example they may be housebound or in a care home.

■ advised that all YMG patients resident in a care home had received their first vaccination.

■ also felt that there will be elements of people that have not been called but the system has been set up from scratch at speed and the NHS is lucky to have access to a national database to help with the organisation of the vaccination programme.

■ advised of a national NHS link which allows you to book your COVID-19 vaccination if you are part of a qualifying group.

I WAS IMPRESSED I HAD A PHONE CALL THURSDAY – SEEN FRIDAY AND TOOK LESS THAN AN HOUR - IT WAS A VERY SLICK OPERATION

■ thanked the PPG members who had offered support with volunteering and helping the practice and once all relevant checks have taken place this will be a great help.

YMG have been asking staff to step in at short notice and on weekends to ensure patients are booked in for their vaccinations or when they have had to be cancelled at short notice. We are immensely proud of how our staff have coped with this but need to remain mindful that they aren’t burnt out as there is a long road ahead.

Safety measures currently in place will also need to stay in place until there are assurances that the vaccine is doing its job; this could be another 12 - 18 months.

I WOULD ECHO I WAS MOST IMPRESSED WITH THE WAY WE WERE HANDLED AT THE VACCINATION CENTRE – A CREDIT TO THOSE WORKING THERE

ME TOO – IT WAS VERY GOOD

■ – SPOKE AT THE YORK OLDER PEOPLES ASSEMBLY AND HE SAID THROUGHOUT THE PANDEMIC THINGS THAT WERE TAKING YEARS TO SORT OUT HAVE COME TOGETHER IN WEEKS

■ explained that YMG is following national guidelines on which services to continue during the pandemic. Thankfully the government have removed some of the administrative burdens and have provided an income guarantee irrespective of whether work has been done. YMG has taken the decision to continue providing all services that are practical and where services have stopped like ear syringing and some minor surgery waiting lists are being kept of patients who require treatment.

YMG has reduced to 4 open sites which has helped maintain social distancing for staff and allow protection for those that are vulnerable. Around 80% of our workforce is now working from home and this can be easily flexed up and down as required. This has been a significant undertaking but has allowed us to keep to zero infections on site and staff that have had to self-isolate has been due to other members of their family coming into contact with the virus. Our staff feel they have been very well protected which was reflected in a recent staff survey.

YMG also set up a COVID-19 team who were given devolved decision making; it has gone from meeting daily to twice weekly and works really well. A clear log of all changes that have been made has also been kept to satisfy CQC requirements.

A question was raised on whether the pandemic had resulted in undiagnosed health conditions; there is evidence that there has been an increase in mental health issues but YMG continues to do all it can for its patients whilst also protecting our staff.

PATIENT ACCESS – TELEPHONE SYSTEM

■ asked the PPG members to share their experiences contacting the surgery via phone.

I HAD A REQUIREMENT TO SEEK AN APPOINTMENT – GIVEN THE FACT THERE WAS A QUEUE YOU KNEW WHERE YOU WERE AND ONCE I GOT THROUGH I WAS DEALT WITH EFFICIENTLY AND MY EXPERIENCE WAS PERFECTLY OK GIVEN THE CIRCUMSTANCES. I GOT A CALL BACK AND WAS REFERRED TO ANOTHER CLINICIAN AND DEALT WITH QUICKLY I WAS QUITE IMPRESSED.

I TRIED TO MAKE A NON URGENT APPOINTMENT – IT TAKES 2 MINS TO GET THROUGH ALL THE MESSAGES AND WHEN I DID GET THROUGH AT 10:05 ALL THE APPOINTMENTS HAD GONE

I WAS HAVING AN ISSUE AND TRIED TO GET A NON URGENT APPOINTMENT WITHOUT SUCCESS – I ACTUALLY DIDN'T NEED AN APPOINTMENT I COULD BE DEALT WITH BY THE RECEPTION TEAM – COULD YOU MAKE IT CLEAR ON YOUR WEBSITE WHAT THINGS RECEPTION CAN DEAL WITH SO PATIENTS SPEAK TO RIGHT PERSON. LAST TIME I MENTIONED THE RECORDED MESSAGE AND REALISED IT'S NOT THE PERSONS VOICE THAT'S AN ISSUE IT'S THE WAY IT'S PROCESSED - THE END OF THE WORDS CHOP OF SHARPLY AND MAKE IT SOUND INHUMAN

WHEN YOU'VE BEEN ON THE WEBSITE AND CAN'T FIND WHAT YOU NEED AND GO TO THE PHONE SYSTEM YOU'RE HELD IN A QUEUE – IF YOU ARE FOR ANY LENGTH OF TIME IS THERE SOMETHING THAT CAN BE DONE SO MESSAGES AREN'T REPEATED

■ explained that YMG is working on introducing a new system called Klinik. This is a customisable front end piece of software that will allow patients to complete requests for a non-urgent consultation online, 24 hours a day, by asking a series of questions. This will then be triaged and forwarded to the most appropriate clinician. Phone traffic into surgery will also hopefully be reduced enabling those without access to technology to easier get through to the practice.

I TRIED TO USE THAT SYSTEM SOME WEEKS AGO NOT REALISING THIS WAS NOT UP AND RUNNING FOR YMG – I THEN FOUND E-CONSULT, COMPLETED THE FORM IN GREAT DETAIL AND IT TOOK 4 WEEKS FOR A RESPONSE AND MY PROBLEM WAS STILL NOT RESOLVED

■ explained that YMG were no longer using e-consult and thought the system had been turned off.

I WAS VERY IMPRESSED WITH THE SYSTEM WHEREBY YOU CAN LEAVE A MESSAGE AND YOU GET A CALL BACK – THERE WAS CONFUSION LAST TIME I USED IT AS THE WORDING IN THE ANNOUNCEMENT SAID APPOINTMENTS WERE AVAILABLE 2 OR 3 DAYS IN ADVANCE BUT THE PCC SAID ONLY SAME DAY APPOINTMENTS WERE AVAILABLE

■ advised that where possible YMG are trying to offer patients a same day appointment. There is an on-going issue with the availability of routine appointments and the Operations & Access Team are working really hard to create more capacity. This is part of the reason for introducing Klinik as a solution by providing a more pro-active approach to routine appointments by the surgery calling the patient rather than the reverse.

There is a move in the system to offer urgent care as a City by June and create 4 primary care urgent centres; freeing up GPs for routine and Long Term Condition management, which is more complex.

IF YOU GETTING LOTS OF QUERIES VIA PHONE ABOUT THE COVID-19 VACCINATIONS CAN THIS INFORMATION BE SHARED ON THE WEBSITE

■ explained that our IT lead is in the process of recording a video for the website about the COVID-19 vaccination.

■ will also be reaching out to ask the PPG to assist with testing Klinik before it goes live to help develop the system. There will then be a soft launch over the next 6 – 12 months.

ACTION	COMMENT	PERSON RESPONSIBLE	TARGET DATE
Remove the Christmas opening times message from the news section of the website	COMPLETE –this has now been removed	■	21-01-21

FEEDBACK ON PROCESSES DURING COVID-19

■ asked for feedback (negative and positive) on how YMG was adapting and working during the pandemic

NORMALLY I ATTEND A SPECIAL CLINIC AT THE HOSPITAL – BUT THIS TIME I GAVE BLOOD AT THE NUFFIELD - I HEARD NOTHING BACK AND HAD TO APPROACH THEM FOR MY RESULTS

I HAD OCCASION TO VISIT THE SURGERY AND HAD A BLOOD TEST AND THE RESULTS WERE ON MY RECORD WITHIN 7 DAYS

I HAVE BEEN TWICE ONCE FOR RETINOPATHY – WHERE I GOT A LATE CANCELLATION AND ONCE TO SEE A CONSULTANT AT THE HOSPITAL WHO ARE OFFERING A MUCH MORE STREAMLINED SERVICE WHICH WAS VERY POSITIVE AND A BIG IMPROVEMENT

■ suggested registering for online access in order to access results.

■ advised that blood tests results are often back within 24 hours and as soon as these are processed by a GP they are visible on patients' notes. Hospital results go back to the clinician who asked for them and when they write to us results are often included within the letter and not put into the blood result file.

If a consultant at the hospital has requested investigations the results do not get sent to the GP.

The majority of hospital consultations are now being conducted by phone; for most conditions there is no reason to see a patient, other than it is nice to see people, but it often doesn't add anything.

■ also explained that the reason that the blood taking service was moved to the Nuffield was not down to a capacity issue, but to maintain patient safety by asking them to attend a COVID-19 free area and avoid unnecessary visits to the hospital. Although going to the hospital is safe if you have an appointment and need to attend. Blood tests are now carried out at Peppermill Court, which is an NHS site, to allow the Nuffield to continue with their private appointments, or in one of our open sites.

Routine hospital investigations will remain on hold until the R number reduces.

I HAVE TO ATTEND THE HOSPITAL FOR AN X-RAY AND THE ONLY PRECAUTION I NEED TO TAKE IS WEAR A MASK

■ stated that patients used to take a form to the hospital and wait in a queue, however, an appointment is now required for all x-ray appointments.

I AM DUE A DENTAL CHECK UP APPOINTMENT – SHOULD I ATTEND?

■ has been working closely with dental colleagues at the MVC who feel it is high risk and very challenging; they are using fog machines and working in full body protection, 3 layers of gloves, respirators, visors and can't easily use magnifiers.

■ feels that if dental work is required patients should attend but deferring check-ups may be sensible.

QUESTIONS RELATING TO HOW THE PRACTICE IS RUNNING

■ asked how keen patients were to get back into practice to see a GP or would they be happy to continue to use the phone/text/video consultations now in use.

I'M QUITE HAPPY TO SPEAK ON THE TELEPHONE – ONLY IF I NEED AN EXAMINATION DO I THINK I NEED TO COME IN

ALL ATTENDEES GENERALLY AGREED

■ felt this was not just about the efficiency of seeing patients but the work/life balance for staff. Even before COVID-19 it was evident that staff were overworked. There had been regular cuts to budgets and primary care often lost out with government investment going into hospital; when in fact they only see a fraction of the population and the majority of contact is through primary care.

YMG is experimenting with self-care options for patients by lending diagnostic equipment to patients with long term conditions who can feed back results to the practice.

A LOT OF PATIENTS ALREADY HAVE THEIR OWN

■ asked if patients would be comfortable purchasing their equipment like blood pressure machines and pulse oximeters.

COULD YMG BULK BUY AND SELL THEM TO SAVE PATIENTS MONEY

■ advised that this had been looked into and there are no deals available. Patients can purchase equipment cheaply through Amazon. If patients wish to purchase their own machine they should look for a medical BP machine; Omron machines are used in practice.

■ reported that capability has been reduced in improving long term condition management and with continuity of care and patients seeing the same clinician. YMG want to improve this as we come out of the pandemic so that patients develop a relationship with a team of staff and don't have to repeat their history. This is beneficial for both the patient and clinician.

■ asked if continuity of care for complex issues was important to patients.

ALL AGREED IT WAS PREFERABLE

■ has been a partner for more than 20 years and has built relationships with patients.

■ likes to be called ■ as this denotes it as a professional relationship; however you often know things that a patient may not have told anyone else so a rapport is built over time. During the pandemic consultations have involved using more technology, which has to accepted, however it is important not to lose the connection with patients and to continue the journey with them throughout their life. With the increase in the number of patients in practice and a reduction of GPs continuity becomes a challenge. It is not always possible to get across everything during a consultation and continuity means a clinician knows the patients history, they don't have to repeat it saving time and it comes with the reassurance that the clinician knows them and what the right course of treatment will be to move them towards better health. It can sometimes benefit to see someone new who has a different perspective and is not blinkered but there are definitely more benefits to continuity which are difficult to quantify.

IT WOULD BE REALLY SAD IF ALL CONSULATIONS WERE TELEPHONE, THIS IS OK IN THE SHORT TERM BUT A COMBINATION OF BOTH WOULD BE BETTER

■ agreed that everyone is pining for a return to some sort of normality but there has never been a better opportunity to start looking at primary care with a fresh slate and design something from the ground up. Primary care has not had the need to change in the past but the pandemic gives the opportunity to change the way practices operate; this does not mean to lose the heart and soul of the surgery but there is opportunity to re-design the service and as key stakeholders the PPG will help to play their part in its future.

■ stated that YMG was lucky to have fantastic technical people, ■ is fantastic with computers and ■ has a background in technology but it should be incorporated to enhance the service without losing what we had before.

ANY OTHER BUSINESS

FUTURE PPG MEETINGS

■ asked how the members would feel about introducing new members into the group.

■ felt that maintaining the same group of people allowed for continuity. The patients attending are a cross section of the demographic of patients who responded to the initial meeting request however an email will be sent out to all the PPG to ask if anyone else would like to join the meeting.

The maximum number of patients should be 12.

ACTION	COMMENT	PERSON RESPONSIBLE	TARGET DATE
Email the PPG to ask if there is anyone else who would like to be part of future virtual meetings	COMPLETE – PPG were emailed on 04-02-21	■	12-02-21

MEETING CLOSED

Meeting closed at 8.01pm

DATE OF NEXT JOINT PPG

Wednesday 10th March – 6.30pm via Zoom