

# Welcome to the Patient Partner Annual Event

## 19 October 2021

**We will be starting soon - in the meantime**

- Please ensure you are on mute
- We advise you keep your camera turned off until we begin



# Patient Partner Annual Event

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## Welcome and introduction

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**Kate Kennady**

**Lay Member for Patient and Public Engagement**

**NHS NYCCG**

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# Housekeeping to help the meeting run smoothly

- Microphones are on mute
- Please use the chat box in the control panel to ask questions
- Please be a good listener and active participant
- By participating in this session you are agreeing to it being recorded



# Patient Partner Annual Event

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**Helen Clothier - to commence chairing the meeting**

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**Patient Partner – Beech House Surgery, Knaresborough**

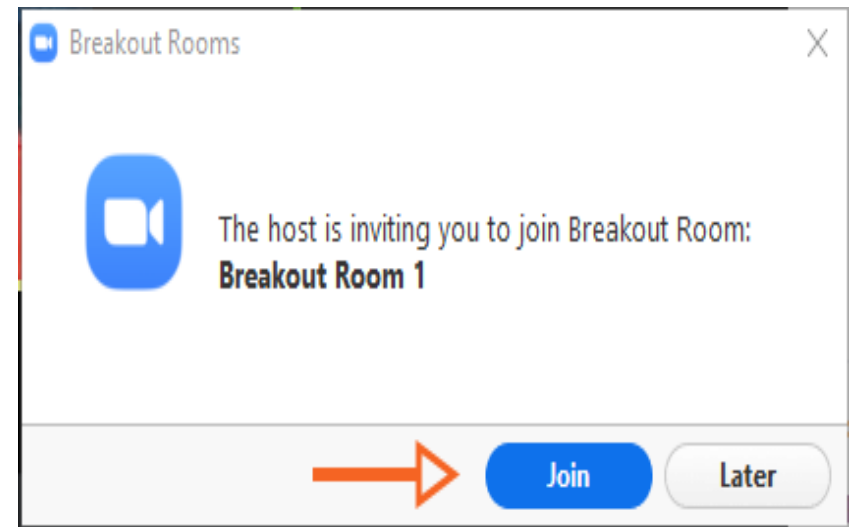
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# Patient Partner Annual Event

	Agenda
1	Welcome and introductions
2	NHS Reforms – Julie Warren, Director of Corporate Services
3	Breakout sessions
4	My local practice: accessing services in the modern world – Georgina Sayers, Communications and Engagement Manager
5	Comfort break
6	Healthwatch – Ashely Green, Chief Executive Officer
7	Breakout sessions
8	Closing summary

# Instructions for breakout session

- We will have three breakout sessions throughout the event
- You have all been designated into a breakout room
- Members are asked to note the instructions on the screen and the host will automatically put you into your respective breakout rooms
- Members are not required to press any keys, unless you are advised to do so



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# Patient Partner Annual Event – NHS Reforms

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**Julie Warren**

**Director of Corporate Services, Governance and Performance (including Continuing Healthcare)**  
**NHS North Yorkshire CCG**



**Humber, Coast and Vale**

**North Yorkshire and York Partnership**





**An overview of the ICS operating model,  
places and local partnerships**



**Understanding our strategic objectives  
and priorities**



**What matters to our system  
partners**





# Our Integrated Care System

## Integrated Care System in Humber, Coast and Vale

### Serving a population of 1.7 million people

- 230 GP Practices
- 550 Residential homes
- 20 Hospices
- 180 Home Care Companies

#### Acute Hospitals

- Northern Lincolnshire and Goole NHS Foundation Trust
- Hull University Teaching Hospitals NHS Trust
- York and Scarborough Teaching Hospitals NHS Foundation Trust
- Harrogate and District NHS Foundation Trust

#### Mental Health Trusts

- Humber NHS Foundation Trust
- Tees, Esk and Wear Valleys NHS Foundation Trust
- Rotherham, Doncaster and South Humber NHS Foundation Trust

#### Local Authorities

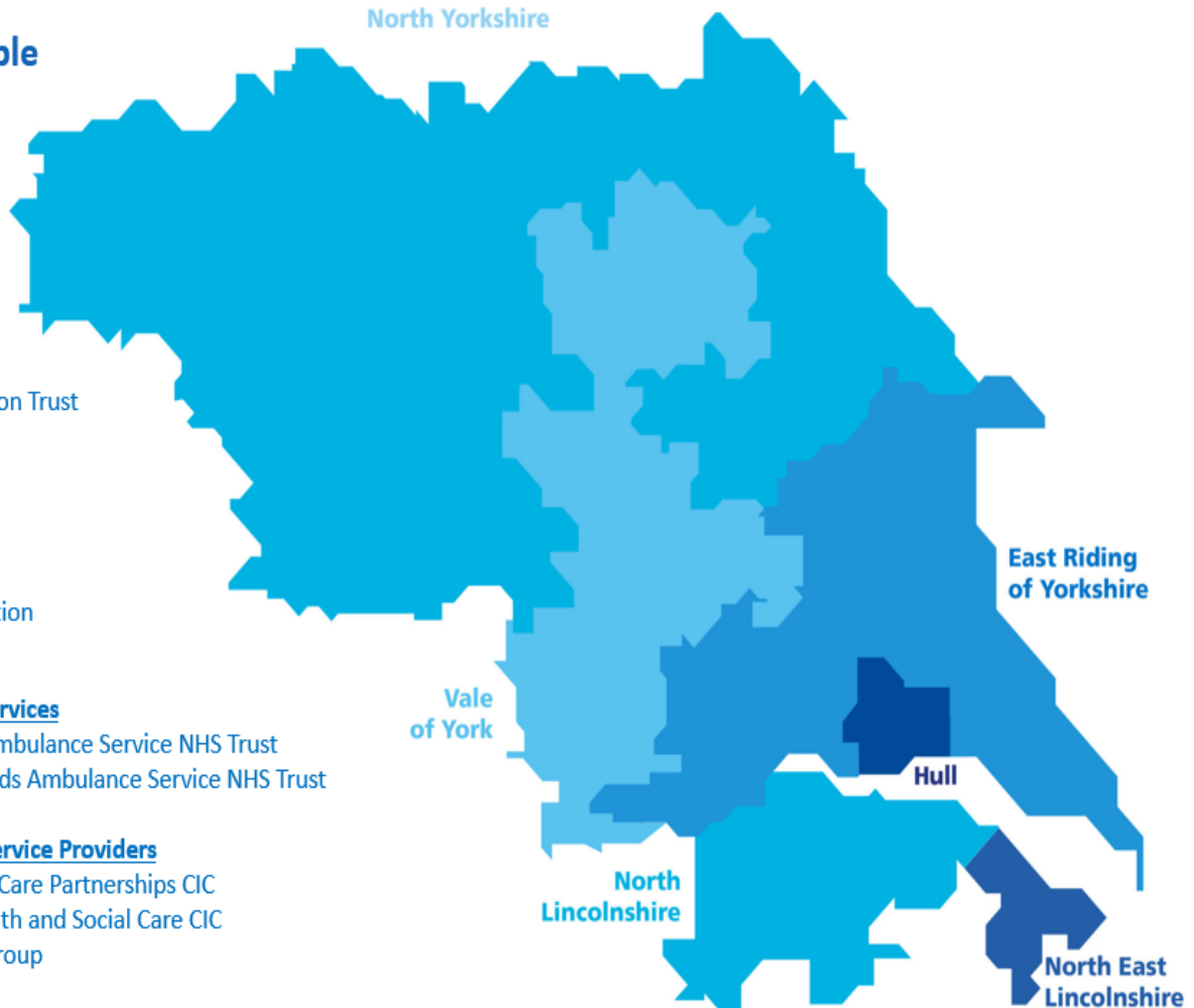
- City of York Council
- East Riding of Yorkshire Council
- Hull City Council
- North Lincolnshire Council
- North East Lincolnshire Council
- North Yorkshire County Council

#### Ambulance Services

- Yorkshire Ambulance Service NHS Trust
- East Midlands Ambulance Service NHS Trust

#### Community Service Providers

- City Health Care Partnerships CIC
- Navigo Health and Social Care CIC
- Care Plus Group

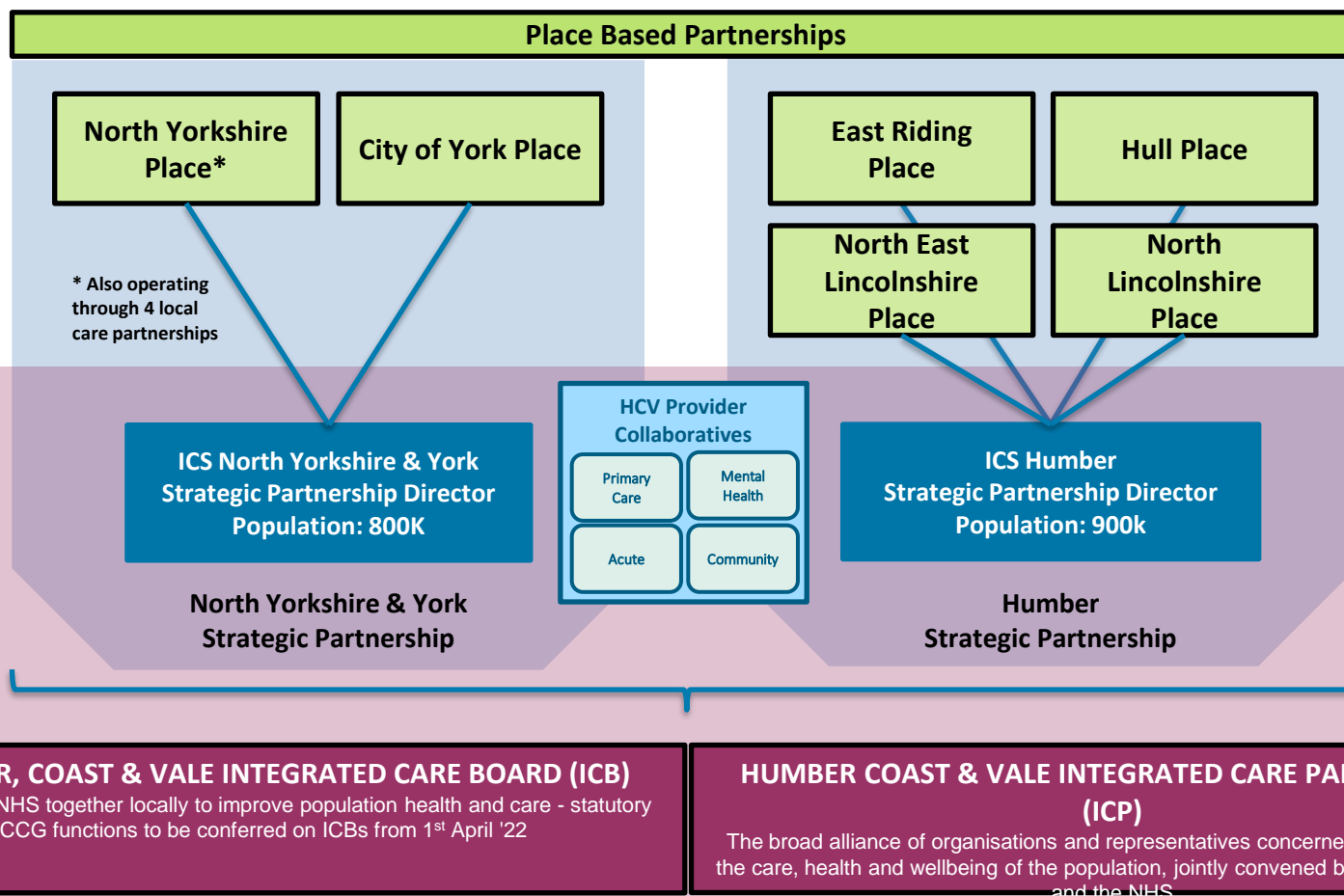


# Our Governance Arrangements

<b>A statutory Integrated Care System (ICS)</b>	Will be made up of a statutory NHS body – the <b>Integrated Care Board (ICB)</b> and a statutory joint committee - the <b>Integrated Care Partnership (ICP)</b> - bringing together the NHS, Local Government and partners. ICSs will be able to <b>delegate significantly to place level</b> and to <b>provider collaboratives</b> . A <b>duty to co-operate</b> will be introduced to promote collaboration across the healthcare, public health and social care system. ICSs, NHS England and NHS providers will be required to have regard to the ' <b>Triple Aim</b> ' of better health and wellbeing for everyone, better care for all people, and sustainable use of NHS resources.
<b>Integrated Care Board (ICB)</b>	<b>Directly accountable for NHS spend and performance</b> within the system. The two systems are 'North Yorkshire & York, and 'The Humber'.
<b>Integrated Care Partnership (ICP)</b>	The ICP will be a wider group than the ICB and will develop an <b>integrated care strategy</b> to address the health, social care and public health needs of their system. The membership and detailed functions of the ICP will be up to local areas to decide. Focus on the <b>wider connections between health and wider issues including socio-economic development, housing, employment and environment</b> . It should take a <b>collective approach to decision-making and support mutual accountability</b> across the ICS.
<b>Place-based Partnerships</b>	Arrangements between local authorities, the NHS and providers of health and care will be left to local areas to arrange. The statutory ICB will work to support places to integrate services and improve outcomes. <b>Health and Wellbeing Boards</b> will continue to have an important role in local places. <b>NHS provider organisations</b> will remain separate statutory bodies and retain their current structures and governance, but will be expected to work collaboratively with partners.
<b>Provider Collaboratives</b>	Arrangements to ensure <b>each provider is part of a collaborative</b> to deliver specific objectives with one or more ICB, to contribute to the delivery of that system's strategic priorities. The members of the collaborative will agree together how this contribution will be achieved. The ICB and provider collaboratives should define their working relationship, including participation in committees via partner members and any supporting local arrangements, to facilitate the contribution of the provider collaborative to agreed ICB objectives.



# Our Governance Arrangements: Overview of the ICS operating model (draft)



# Our Governance Arrangements: Places and Local Partnerships

## Our Commitment

This framework sets out delivery through a North Yorkshire and York Strategic Partnership with a single operational and financial plan. It proposes 4 Local Care Partnerships where leaders and providers can work collectively to a shared vision and purpose that meets the needs of their population, and is aligned to the single Strategic Plan and ICS ambition.

## Our Places

North Yorkshire

York

## Local Care Partnerships

Craven

Harrogate

Hambleton and  
Richmondshire\*

East Coast\*\*

Vale and Selby

York Health and Care  
Alliance

## Primary Care Networks and Federations

• including  
Whitby

\*\* excluding  
Whitby

• Heart of Harrogate  
• Mowbray Square  
• Knaresborough & Rural  
• Ripon & Masham  
• Yorkshire Health  
Network

• Hambleton North  
• Hambleton South  
• Richmondshire  
• Whitby Coast & Moors  
• Heartbeat Alliance

• North Riding  
Community Network  
• Scarborough Core  
• Filey & Scarborough  
Stronger Communities  
• Whitby Coast & Moors

• Selby Town  
• Tadcaster & Rural Selby  
• South Hambleton &  
Ryedale

• Priory Medical Group  
• York Medical Group  
• West, Outer & NE York  
• York City Centre  
• York East  
• Nimbuscare

# Priorities: HCV ICS Strategic Objectives and Priorities

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## Strategic Objectives 2021/22

Pandemic response

Deliver the Partnership operating plan 2021/22

Leadership and development of the Partnership (ICS)

Manage the transition to new arrangements for integrated care systems (aligned to the White Paper)

## HCV Priorities 2019-2024

Helping people to look after themselves and stay well (prevention, resilience, health inequalities personalisation)

Providing services that are joined up across all aspects of health and care (primary care, services outside of hospital, unplanned care services, sustainable future for our hospital services)

Improving the care provided in key areas (cancer, mental health, planned care, maternity)

Making the most of all our resources (people, technology, buildings, money)



# Health and Care Priorities... What our systems partners said

Level up health inequalities and add years to life!

The wider determinants of health, environment, housing and education need to be tackled and take a 'whole life' approach. Engaging people as active participants in their own health and care



## Four Biggest Health and Care Priorities

■ Prevention ■ Health inequalities ■ Collaborative Working ■ Workforce



Need an umbrella view across all partner organisations in order to reduce duplication with services underpinned by true integration of service models

A cross organisational workforce strategy is key for a sustainable future of health and social care needs and looking at competitive advantage





## Critical Success Factors... What our systems partners said

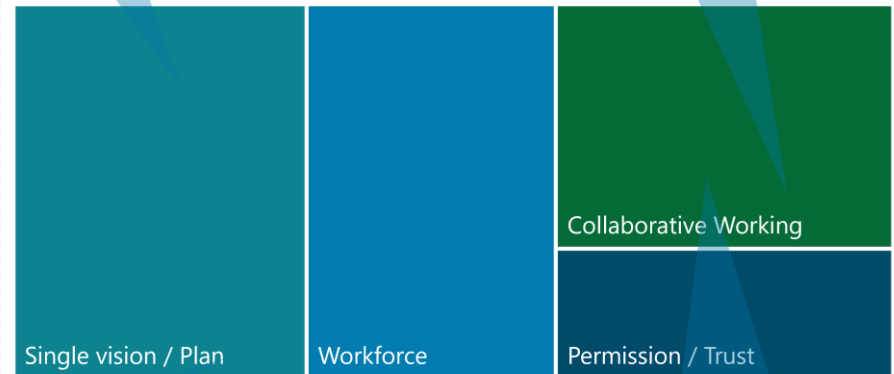
NYY single plan sensitive to the priorities in the Local Care Partnerships and that sets out priorities and resources to support delivery

'Owning' a problem collectively – agree what 'good' looks like and do things differently!  
Utilising rich assets!



## Four Biggest Critical Success Factors

- Workforce
- Collaborative Working
- Single vision / Plan
- Permission / Trust



A truly integrated workforce strategy.  
Workforce recruitment and modernisation is critical and needs to be developed in the community itself linking with training partners

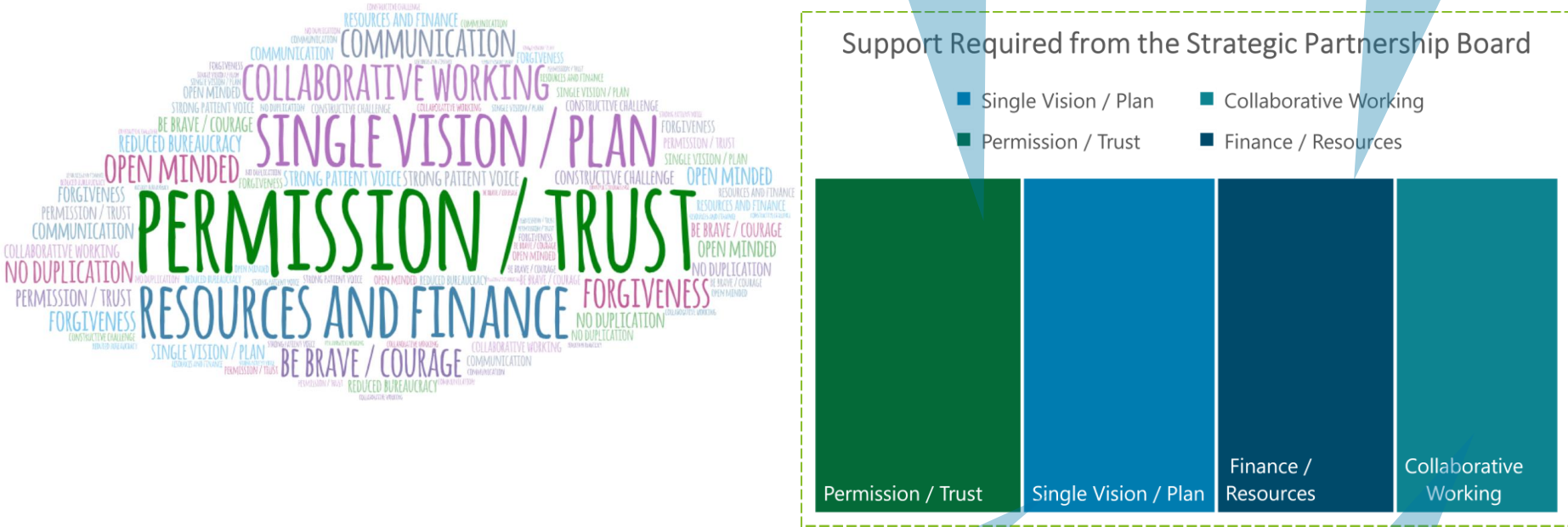
How do we feel equal, and ensure we have equal voices. We need to trust and respect all contributions.



## Support required from the Partnership Board... What our systems partners said

Mutual accountability.  
Local devolution and allowing  
us to agree local priorities.

Provide sufficient supporting resources and framework.  
Fairness in funding!



Collective set of priorities and collective plan which avoids unintended consequences on individual organisations

Equal partners.  
Innovative and flexible workforce  
roles between organisations

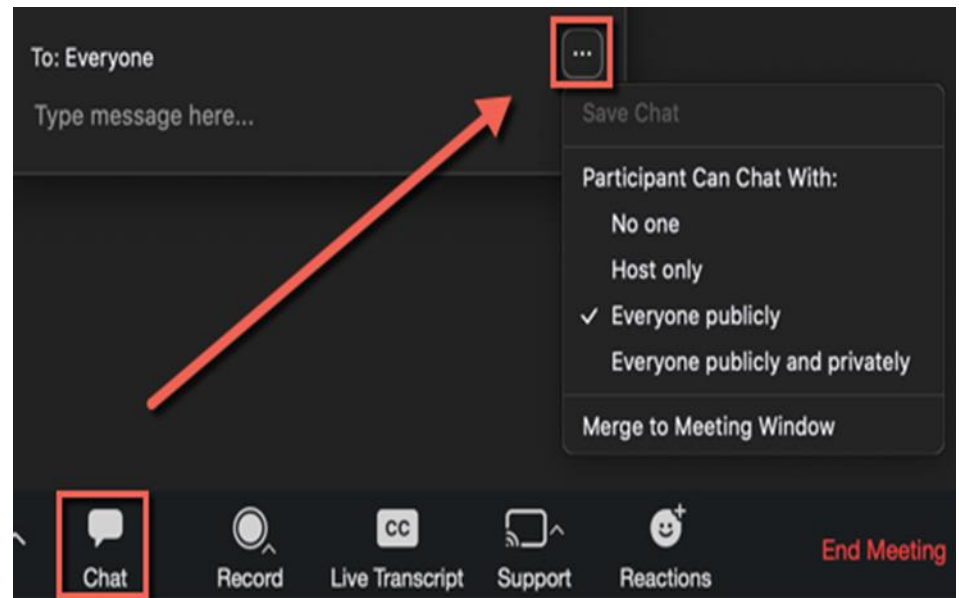




# Patient Partner Annual Event – NHS Reforms



- Have you any questions?
- You can also use the “**Chat Box**” facility



# Patient Partner Annual Event – NHS Reforms



You can keep up to date with developments on our website here:

<https://northyorkshireccg.nhs.uk/about/transforming-care/>



# First breakout session – Get to know fellow members

- We have divided you into 6 groups
- You have 20 minutes
- A designated facilitator in each group will support the flow of conversation and capture the feedback

## *Opportunities:*

*To meet patient representatives from other localities within North Yorkshire*

*To reflect on the NHS Reforms presentations – do you have any unanswered questions?*

*To have an open conversation with fellow patient members*

*To share any further issues*

# Patient Partner Annual Event

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## **My local practice: accessing services in the modern world**

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**Georgina Sayers**

**Communications and Engagement Manager**

**NHS North Yorkshire CCG**

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# What we're hearing.....

**Pressure remains on Face to Face GP Appointments in North Yorkshire**

**North Yorkshire GP staff face growing abuse post-lockdown**

“Not a day goes by that a member of our practice staff isn't crying” - Anon

**NHS staff face rising tide of abuse from patients provoked by long waits**

**GPs say 'challenges remain' as just over half their appointments are face to face**

“I've lost 2 receptionists over the past few weeks, both of whom told me that patients' attitudes were a significant factor in their decision to leave.” - Anon



**Exclusive: GPs still ignoring orders to allow patients face-to-face appointments**

# What we know.....

## **North Yorkshire in August 2021:**

201,598 appointments

128,081 face to face

63,431 telephone

487 video/online appointments

722 home visits

Approximately half of all booked appointments were same or next day (99,058)

Social distancing within practice – awaiting guidance

Sept 2021: The average waiting time for a face-to-face GP appointment is currently significantly shorter than before the Covid-19 pandemic, a Pulse survey has revealed.

Positive feedback around the variety of ways to access appointments

But we know things are different...


Patients are waiting...

Phone lines are busy...

It's still a very difficult time for all.

## What we know....

## Primary care networks (PCNs)

- Build on the core of current primary care services and enable greater provision of **proactive, personalised, coordinated** and **more integrated** health and social care.
  - Clinicians describe this as a change from reactively providing appointments to **proactively** caring for the people and communities they serve.
  - They are working **differently**.
- 
- A colorful illustration depicting a networked healthcare system. At the center is a computer monitor displaying a medical chart. Surrounding it are various icons: a smartphone, a tablet, a clipboard, and a person holding a magnifying glass over a document. To the left, a group of people (an elderly couple and a family) are connected by lines to the central network. To the right, a person is shown using a laptop. The entire scene is set against a background of stylized clouds and a sun, suggesting a holistic and integrated approach to healthcare.



## New roles can be recruited to work across PCNs:

- Community Pharmacists
- First Contact Physiotherapists
- Physicians Associates
- Social Prescriber Link Workers
- Pharmacy Technicians
- Health and wellbeing coaches
- Care Co-ordinators
- Occupational therapists
- Dietitians
- Podiatrists
- Community Paramedics
- Mental Health Link Workers

# What we know.....

## NHSE/I – *Our plan for improving access and supporting general practice* (14 October 2021)

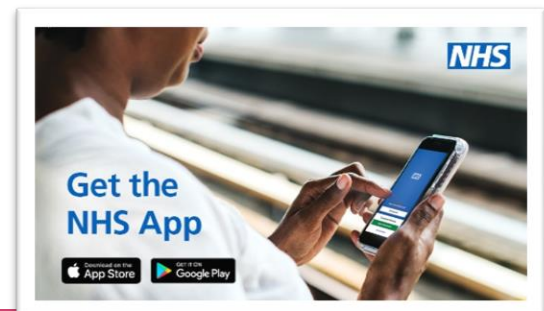
- Acknowledges the increased pressure on practices and patient demand
- Shares patient satisfaction with primary care has held up well and actually showed an increase in overall satisfaction
- Acknowledges the agility of practices and the use of online consultations which some patients find it more convenient
- Identifies unacceptably poor access in some areas including the ability to contact the practice – especially long waits over the telephone
- Shows awareness of campaigns regarding the perceived lack of face-to-face GP appointments
- Evidences that some areas are utilising face to face appointments more than others and there is no specific guidance around ‘best practice’ or ‘the right mix’ – practices working through this now
- Challenges from Covid-19 and as we move into the post-emergency phase – particularly around staffing pressures
- Aims to make people more aware of the range of skills available in general practice
- Highlights never an excuse to tolerate abuse or violence towards staff



# How “the digital world” can help



“We believe everyone deserves the opportunity to safely participate in our digital world and no one should be left behind.”



- Now 17 million users of the NHS App
- 1 million log-ins every day
- 30% of 50 – 59 year olds are not registered
- Overall 95% of the population are now digitised in some way

# NHS App: how can it help you?

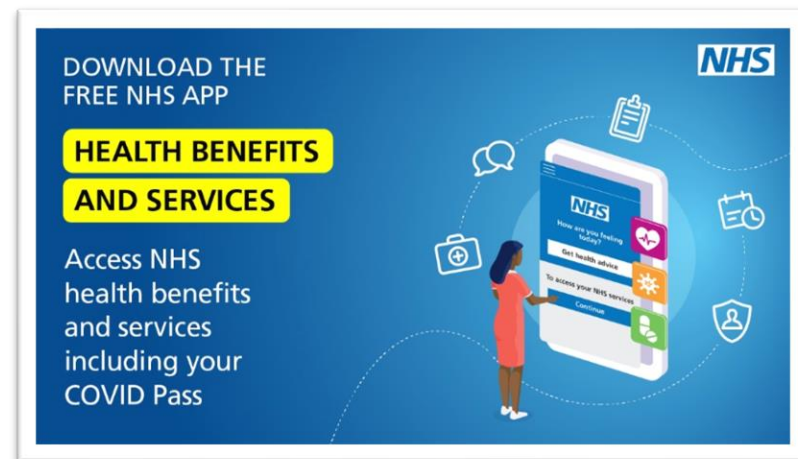
If your GP surgery or hospital offers other services in the NHS App, you may be able to:

- **book** appointments instead of waiting on the telephone
- **order** repeat prescriptions
- **message** your GP surgery or a health professional online
- **consult** a GP or health professional through an online form
- **access** health services and advice on behalf of someone you care for
- **view** your hospital and other healthcare appointments
- **view** useful links your doctor or health professional has shared with you
- **view** your health records and manage care plans
- **get** your NHS COVID Pass
- **register** your organ donation decision

## National NHS App campaign to share:

Helpful video explaining how to use the App:

<https://www.youtube.com/watch?v=8KY2qKcA69M>



# What we would like to achieve....

- Help patients to understand all the ways to access the care they need and the benefits of a 'mixed approach' to consultations.
- Help remove some animosity towards staff (particularly receptionists/ care navigators).
- Support primary care by helping to ease pressures and in the run-up to winter.
- Celebrate the work of primary care and help improve staff morale.
- Produce a suite of materials to help tell the story of 'modern primary care' such as:
  - Digital (videos and animations, tv screens, social media, website)
  - Print (posters, leaflets, adverts)
- Sharing of key messages via:
  - Stakeholders (PCNs, PPN, PPGs, Loop members etc)
  - Media
  - Voluntary and community sector



# Can you help us tell the story?

## If the Pandemic is over why aren't GP practices open?

**GP surgeries have never been closed.** Practices worked hard to provide a service throughout lockdown and continue to do so. To protect everyone, we must maintain safe infection control and minimise unnecessary physical contact. The pandemic is not over.

### How are practices working now?

All appointments are triaged. This helps keep you safe and makes sure the people with the greatest need are seen first. We will see everyone in person who needs to be seen that way.

How can we help patients understand that primary care is open and seeing patients in person where there is a need?

### What is triage?

You will be assessed whether you:

- should be seen in person
- need a phone consultation
- can get help via a video consultation
- would benefit from a community pharmacy

How can we help patients understand all the ways to access primary care?

# Can you help us tell the story?

## **Why do receptionists ask personal questions?**

GP reception staff are a vital part of the health care team and ask questions to direct you to the best support. They are skilled in assisting with the triage and treat all information confidentially.

How can we help patients understand that all practice staff are skilled and there to help?

## **I wanted to see my GP so why am I seeing someone else?**

Many surgeries have a range of professionals, such as advanced nurse practitioners, who can diagnose, treat health conditions and prescribe medicines. This ensures you see the right person at the right time, more quickly.

How can we help patients understand that practices have access to a variety of staff with a wealth of skill and knowledge to help?

# Can you help us tell the story?



GP practices in York and North Yorkshire are exceptionally busy at the moment, with a high demand for appointments. As a result, if you ring your surgery it may take a little bit longer for your phone call to be answered than it usually would.

**Please be patient.**

**NHS**

**KEEP  
CALM  
AND  
BE  
KIND**



# Can you help us tell the story?

PLEASE KEEP BEING PATIENT & KIND

## MY LOCAL PRACTICE IS....



**1** still open  
book online, phone & NHS App

**2** seeing patients  
online, phone & in person

**3** More than just a GP  
other professionals could help

**4** full of expertise  
nurse, physio, GP, receptionist

**5** asking about me  
to help me as quickly as possible

**6** doing its best  
to help me find the right care

#MYLOCALPRACTICE



PLEASE KEEP BEING PATIENT & KIND

## MY LOCAL PRACTICE RECEPTIONIST IS....



- often the first person who can help me
- going to ask me more about my condition to help find the right care as quickly as possible
- skilled in administration and customer service
- doing their very best to help me and others

#MYLOCALPRACTICE

PLEASE KEEP BEING PATIENT & KIND

## MY LOCAL PRACTICE GP IS....



- looking at all aspects of my care: physical, social, emotional, spiritual, cultural and economical
- able to help me in person, via the phone or online
- able to refer me to other professionals if needed
- doing their very best to help me and others

#MYLOCALPRACTICE



PLEASE KEEP BEING PATIENT & KIND

## MY LOCAL PRACTICE NURSE IS....



- a very skilled & knowledgeable member of the team
- able to help me with things like:
  - blood tests
  - wound care
  - vaccinations
  - stopping smoking
  - health screening
  - long term conditions
- doing their very best to help me and others

#MYLOCALPRACTICE



# Can you help us tell the story?



## Why GP practices are still working differently

### If the COVID pandemic is over, why aren't GP practices open?

It's a myth that GP practices have been closed. We've been open throughout the pandemic and working tirelessly to give patients the care they need. COVID is not over. Cases remain high and sadly patients are still becoming very ill and dying.

Our health services are under enormous pressure, but we are here if you need us. Please continue to be kind to our staff who will always do their very best to help you.



## Why GP practices are still working differently

### Why are there fewer face-to-face appointments available?

We have kept many COVID-safe measures in place to help protect patients and staff, some of whom remain extremely vulnerable. It means we can't currently offer the same number of in-person appointments as we did before the pandemic.

Our health services are under enormous pressure, but we are here if you need us. Please continue to be kind to our staff who will always do their very best to help you.



## Why GP practices are still working differently

### How are practices working now?

With many COVID measures still in place in our surgeries to keep patients and staff safe, we are continuing to triage all appointments. This blended mix of face-to-face, telephone and virtual appointments means we can help the maximum number of people and ensures those who need to be seen in-person can get the care they need.

Our health services are under enormous pressure, but we are here if you need us. Please continue to be kind to our staff who will always do their very best to help you.



## Why GP practices are still working differently

### What is triage?

When you contact us to make an appointment, you will first be assessed over the telephone.

This helps us decide who needs:-

- ▶ to be seen in person
- ▶ a telephone appointment
- ▶ a video consultation
- ▶ help from a community pharmacy

Your appointment will be with the most appropriate healthcare professional for your needs.

Our health services are under enormous pressure, but we are here if you need us. Please continue to be kind to our staff who will always do their very best to help you.



# Can you help us tell the story?

## We're MORE than just a doctors' surgery

"I'm **MARIE** and I'm a **RECEPTIONIST** working in general practice"

- ✓ Welcomes patients and visitors
- ✓ Helps ensure patient appointments are with the most appropriate person (eg. nurse practitioner, rather than GP)
- ✓ Trained in data protection and confidentiality laws and guidelines
- ✓ Signposts patients to appropriate advice and guidance
- ✓ Helps maintain accurate patient records

It's not always necessary to see a doctor – talk to our reception team about seeing another member of our clinical staff instead



NHS  
Scarborough and Ryedale  
Local Community Group

## We're MORE than just a doctors' surgery

- ✓ Paramedic Science degree
- ✓ Extra qualifications accredited by the Health and Care Professions Council (HCPC)
- ✓ 12 years' experience treating acutely ill patients
- ✓ Visit patients at home
- ✓ Run minor ailment clinics at the surgery

It's not always necessary to see a doctor – talk to our reception team about seeing another member of our clinical staff instead

"I'm **DEREK** and I'm a **PARAMEDIC** working in general practice."



NHS  
Scarborough and Ryedale  
Local Community Group

## We're MORE than just a doctors' surgery

- ✓ Three years' training to become a registered nurse
- ✓ Successfully completed further studies to work in general practice
- ✓ Complex wound management
- ✓ Travel health advice
- ✓ Vaccinations
- ✓ Family planning
- ✓ Women's health
- ✓ Men's health
- ✓ Smoking cessation advice

It's not always necessary to see a doctor – talk to our reception team about seeing another member of our clinical staff instead

"I'm **DREW** and I'm a **NURSE** working in general practice"



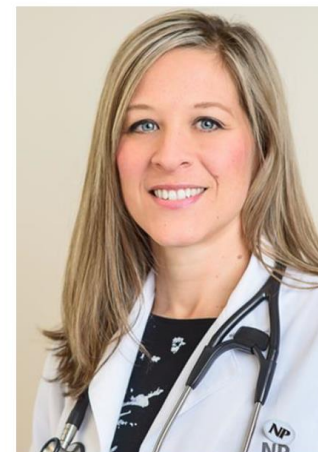
NHS  
Scarborough and Ryedale  
Local Community Group

## We're MORE than just a doctors' surgery

"I'm **LUCY** and I'm a **NURSE PRACTITIONER** working in general practice"

- ✓ Three years' training to become a registered nurse with extra training to become a nurse practitioner
- ✓ See patients with undiagnosed conditions
- ✓ Make treatment decisions
- ✓ Order investigations
- ✓ Prescribe medication
- ✓ Refer patients to hospital consultants
- ✓ Arrange for a GP to sign 'fit notes'

It's not always necessary to see a doctor – talk to our reception team about seeing another member of our clinical staff instead



NHS  
Scarborough and Ryedale  
Local Community Group

## Third breakout session – Can you help us tell the story?

- Each group will consider three questions and you will have 15 minutes to discuss

**1. What gets in the way of people understanding how their local practice is working?**

**2. Design concepts: which do you think would be most effective and why?**

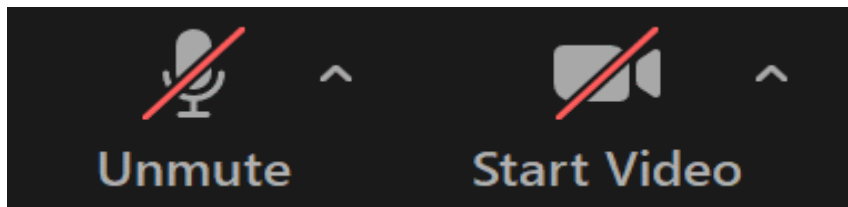
**3. Do you have any other ideas how we can tell this story?**

- The facilitator in each group will support the flow of conversation and capture the key points.

# We will now have a 10 minute break

**Before you leave your computer or lap top please ensure:**

- Your microphone is on mute
- Your camera is turned off



We will be back at 2.40pm





# An introduction to Healthwatch North Yorkshire

Ashley Green  
Chief Executive Officer

**healthwatch**  
North Yorkshire



# healthwatch

North Yorkshire

- ▶ Who we are
- ▶ What we do
- ▶ Our plans
- ▶ How you can help us!



Healthwatch North Yorkshire is your local health and social care **champion**. From Scarborough to Selby and everywhere in between, we make sure NHS leaders and other decision makers hear your voice and use your feedback to improve care.

We exist to make sure that people are at the **heart** of care.



# healthwatch

North Yorkshire

 Listen

 Understand

 Signpost

 Improve



# Listen

We're here to **listen** to the issues that really matter to people in North Yorkshire

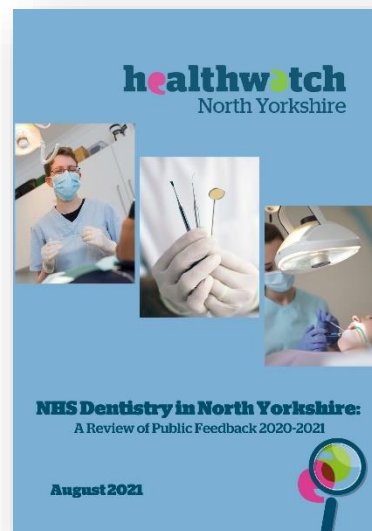
We're entirely **independent** and **impartial**, and anything you share with us is **confidential**.

- We heard from over **1,000** people
- Held **2,600** conversations with the public

**healthwatch**  
North Yorkshire

# Understand

Healthwatch uses your **feedback** to better **understand** the challenges facing the NHS and other care providers and to improve your health and care



# Signpost

We can also help you to get the **information** and advice you need to make the right decisions for you and to get the **support** you deserve.

• Over **74,000** people visited our website



**healthwatch**  
North Yorkshire

# Improve

We use your feedback and insight to influence change and **improvements** in care. All feedback - good or bad is valuable to us.

**healthwatch**  
North Yorkshire



# Our plans

- Focus on care home sector
- Improve access & provision to NHS dentistry
- Reduce the gap around health inequalities – Scarborough & Selby
- Support improvements to young peoples health care
- Influence health & social care – COVID-19 recovery

**healthwatch**  
North Yorkshire



# How can you help?

- ▶ Share your feedback with us!
- ▶ Tell your friends and family about us
- ▶ Sign up for our newsletter or join our network
- ▶ Get involved and volunteer – [admin@hwny.co.uk](mailto:admin@hwny.co.uk)



[www.healthwatchnorthyorkshire.co.uk](http://www.healthwatchnorthyorkshire.co.uk)



Thank you



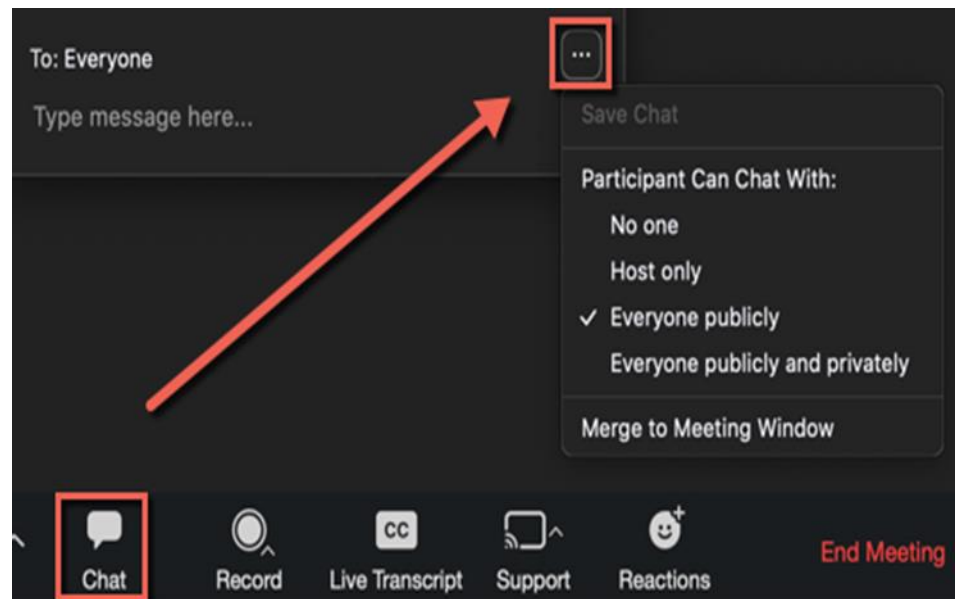
Any questions?



# Healthwatch North Yorkshire



- Have you any questions?
- You can also use the “**Chat Box**” facility



## Third breakout session

- Groups will consider three questions and you will have 25 minutes to discuss

**"What is the one key success of your PPG"**

**"How do you see your PPG developing"**

**"Do you see any challenges in developing your PPG"**

- The facilitator in each group will support the flow of conversation. Key points to be captured from each group and facilitator to highlight one key point from the discussions to the whole group.

# Feedback from groups

**"What is the one key success of your PPG"**

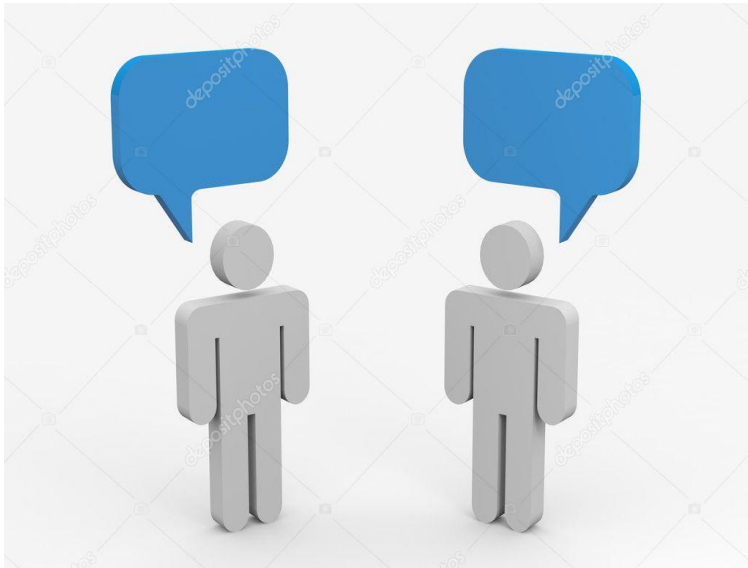
**"How do you see your PPG developing"**

**"Do you see any challenges in developing your PPG"**

***Each group to highlight one key point from their discussions***



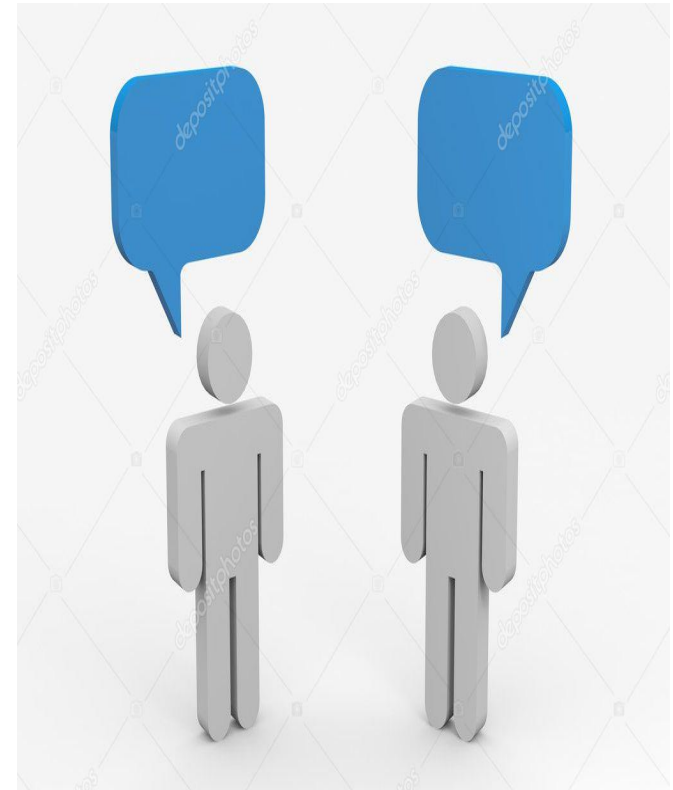
# Chairs closing remarks – Helen Clothier



- Thank you for attending
- As patient partners lets continue to support and represent our local GP practice
- Look forward to the next adventure , working with the Integrated Care System

# Closing summary – Kate Kennady

- Thank you for your continued support
- There will be change ahead, but we will work to make this change for the better
- We will continue to engage and keep you updated
- Our next local meetings are taking place:
  - ***HaRD - Tuesday 11 January 2022 16.30 – 18.30***
  - ***HRW - Tuesday 18 January 2022 16.30 – 18.30***
  - ***S&R - Tuesday 25 January 2022 18.00 – 20.00***



# Thank you for attending

