

SUMMARY OF ACTION NOTES

North Yorkshire Clinical Commissioning Group

Patient Partner Annual Event

Tuesday 19 October 21 13.00 – 16.00

Video Conference: Zoom

**Chair: Helen Clothier Patient Partner Member
Beech House Surgery Knaresborough – HaRD PPN**

In Attendance

Kate Kennady – Governing Body – Lay Member Patient & Public Engagement
NYCCG (KK)

Julie Warren Director of Corporate Services, Governance & Performance NYCCG
(JW)

Rachael Durrett – Head of Communication & Engagement NYCCG (RD)

Julie Hardiment – Communication & Engagement Manager NYCCG (JH)

Georgina Sayers – Communication & Engagement Manager NYCCG (GS)

Tim Readman – Senior Communication Officer NYCCG (TR)

Bridget Read – Engagement Manager, NYCCG (BR)

Alex Flowers – Communication & Engagement Officer NYCCG (AF)

Jane Marchant – Engagement & Administration Officer NYCCG (JM)

External:

Ashley Green – Chief Executive Officer Healthwatch UK

Patient Partner Network

Scarborough & Ryedale (13) (7 Practices represented)

Alan Rowley – West Ayton & Snainton

Ann Theakston – Eastfield Medical Centre

Craig Powell – West Ayton & Snainton

Denise Earnshaw – Eastfield Medical

Diane Robinson – Central Healthcare

Dr Graham Lake – Derwent

Keith Taylor – Brook Square

Philip King – Brook Square

Phillip Sainter – Hunmanby

Sheila Miller – Derwent

Steve Parsons – Scarborough Medical Group

Jeanette Anness – Derwent

Ruth Fairchild – Central Healthcare

Hambleton Richmondshire and Whitby (9) (6 GP Practices represented)

David Tucker – Thirsk

Geoffrey Linehan – Leyburn

Hazel Hickman – Staithes

Jack Dobson – Mowbray House
 Jill Pouncey – Staithes
 Jim Forrest – Mowbray House
 Maureen Bursell – Quaker Lane
 Pete Hart – Glebe House
 Shirley Brook – Staithes

Harrogate and Rural District (8) (6 GP Practices represented)

Arnold Warneken – Springbank
 Charles Gibson – Nidderdale Group
 Helen Clothier – Beech House, Knaresborough
 Joy Stanton – Nidderdale Group
 Linda Boon – Nidderdale Group
 Malcolm Bottomley – Dr Moss & Partners
 Malcolm Wailes – Leeds Road
 Roy Wilson – Park Parade

Item		Lead
1	<p>Welcome and Introductions</p> <p>Kate Kennady (KK) welcomed Patient Partners to the NHS North Yorkshire Clinical Commissioning Group Patient Partner Annual event held via video conference. This is the first event since the three CCGs – Harrogate and Rural District, Hambleton Richmondshire and Whitby and Scarborough and Ryedale – became NHS North Yorkshire CCG on 1 April 2020.</p> <p>KK introduced Helen Clothier (HC) Patient Partner from Beech House Surgery in Knaresborough who will chair the meeting. HC welcomed everyone to the event and outlined the format of the meeting and informed the group that colleagues had been put into six groups each with a facilitator for the three breakout sessions as well as presentations.</p> <p>The presenters were Julie Warren (JW) Director of Corporate Service, Governance and Performance, Ashley Green (AG) Chief Executive Officer Healthwatch UK and Georgina Sayers (GS) Communication and Engagement Manager for North Yorkshire Clinical Commissioning Group.</p>	
2	<p>NHS Reforms – A presentation on the integrated Care System (ICS) development in Humber Coast and Vale. – Presentation</p>	
3	<p>Reflections on the NHS Reforms – following the presentation, members went into breakout rooms to continue the conversation. Feedback from each breakout room is detailed below:</p> <p>Breakout Room 1</p> <ul style="list-style-type: none"> • General concern about why the changes were needed. Thought that real change for patients would be needed to justify the process. Experience has shown that significant rearranging does not always achieve changes promised. • Concern that there would be more administrative staff and the capability of those already in post. 	

- Feeling that the increase of specialisms means that people need to travel further to multiple sites. Liked the historic model where generalist services were delivered together and close to home.
- Greater integration between health and social care would be positive.
- Disquiet whether the scale of change could be absorbed by both the NHS and local authority partners who will be going through a significant reorganisation with the development of the unitary authority in the next 24 months.

Breakout Room 2

- Feels like a return to the seventies when social care and health were integrated and a return to Strategic Health Authorities
- Hopefully we have learnt from mistakes and will do things better this time round
- Initial impetus for reforms came from Jeremy Hunt – fear that this is a route to privatisation as the group felt that this is the current Government's agenda
- National Insurance is not ring fenced for health so how can we be sure this money is being used as it should be?
- How will there be a balance between local and national?
- Still a concern about how the money will flow to where it is needed
- Workforce remains a challenge – how will this be addressed
- Many hospital buildings are in poor shape – what is the strategy for this (as the group not convinced by the '40 new hospitals' pledge)
- Will patients be disadvantaged in terms of accessing specialist care – under the previous regime in theory you could travel anywhere in the country for specialist care in order to see a leading expert in your condition. Will patients now be restricted in terms of travelling for treatment – ie. if treatment exists in your ICS is that where you will have to access it?

Breakout Room 3

- Some concern over 'one pot funding' and how that would be allocated across the ICS – would like more info on spending
- How will the ICS and partnership develop their commissioning priorities? Are they set nationally or locally? What are they based on?
- Doesn't feel like a 'National Health Service' when it's local – how will it interface with CCGs?
- Some misunderstanding around the introduction of the ICS and the disestablishment of CCGs – did not understand from the presentation that there will no longer be CCGs after 1 April 2022 (think the ICS is another layer on top of CCGs)
- How will PPNs work after ICS is established?
- Concern over data sharing under the ICS and in primary care – how will that be managed?
- There will need to be some standardisation in communication and privacy across the ICS
- Will there be a cost saving being part of the ICS?
- How will the new board be appointed/elected to?
- Concern over the word "competitiveness" used in presentation referencing social care needs

Breakout Room 4

- Concern over finances – been in this situation before and nothing has happened
- Shortage of physio and occupational therapists have led to long waiting times across North Yorkshire
- NHS is woefully failing patients across North Yorkshire
- Hospitals failing to discharge patients back home/community - need more step up beds
- Concerns that ambulances are not meeting their four hour waiting targets at A&E
- Health system in Ryedale doing well but very patchy elsewhere
- Must ensure that Mental Health services in North Yorkshire are no longer left as a "Cinderella Service"
- Need better integration of services

Breakout Room 5

- Our CCG had a large debt – how will that come into play?
- Having been around health and social care, it feels a little bit like 'here we go again', yet more change.
- Are we going to see the results before the next change?
- How do you give confidence that this is a positive thing?
- What resources will be available? How will it work?
- Needs to be awareness that in my practices, 7,000 patients are not connected digitally.
- What about diagnostic hubs in Northallerton? We need to find a hub, but where do you put it?
- Communications about what the new ICS is all about is very important.
- I'm worried about CAMHS – it seems to be a long process for mental health referrals.

Breakout Room 6

- Over use of anacronyms, not helpful
- Is this a cost savings exercise? Will any savings be retained for service development
- How will patients notice a difference? Should things improve? Prevent it from being worse? Gradual improvement?
- Need to give a positive message to patients
- Where will patient engagement take place?
- What will be the role of PPGs? – who will they liaise with?
- Has the CCG considered the impact on the mental wellbeing of the population of the Bilsdale transmitter out of action and creating social isolation – its still not working
- How are clinicians (GPs, nurses etc) being informed of these changes

Summary of what was heard

During the conversation, each breakout room had concerns, not knowing what the future landscape would look like and where the patient voice would be heard. Members encouraged to read the Q&A on the website's which will be kept updated with developments. <https://northyorkshireccg.nhs.uk/about/transforming-care/>

4 My local practice: accessing services in the modern world

Presentation delivered by Georgina Sayers – on accessing service at your local GP practice in the modern world. An opportunity to gather views on the materials to promote primary care and the new ways of supporting people and giving people additional tools to manage their own care.

Breakout Room 1

- Conversation about e-consult not being available.
- Variety of opinions in the group about whether the increase in remote appointments is a very good thing or a bad thing,
- Need to do more to educate people on the wide range of skills and expertise in primary care now, and the value that receptionists add as care navigators.
- General support for our campaign.

Breakout Room 2

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

- Needs to be better communication – we are open and we are here to help you
- Honesty about the fact that you may have to wait longer – managing expectations and behaviour
- Triage works well but virtual consultations face to face (via Zoom or similar) would be better and more personal
- On the whole the feedback from the group was that their practices had done a good job after seeing patients during the pandemic

2. Design concepts – what do you think would be most effective and why?

- The group liked all the design concepts that they saw
- Felt that practices should be sharing them on social media and on their websites
- Also could supplement with posters/screens in the surgery
- Could also put in a practice newsletter or link via text message
- More people are using digital technology and social media but we mustn't forget the digitally excluded

3. Do you have any other ideas about how we would tell the story?

- Open morning /drop in to talk about the different roles in general practice with those staff talking about what they can do and what sort of treatment/consultations they can provide
- Could also use as an opportunity to talk about the role of receptionists to explain why they are 'personal' questions when you phone the practice

Breakout Room 3

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

- Patients are angry and frustrated – why can't they get what they want?
- GPs to market themselves and say what they're doing – details of what's happening
- Social media gets in the way with negative comments. Needs to be countered and get information out
- Push back the Daily Mail
- Staffing issues in surgeries does not allow time to put this out

- One PP has tried to get a FB page for the surgery to try and use it actively to promote pure facts

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

- NHS App cannot be used in all cases to book appointments – not all surgeries have enabled this.
- Get the slides in a format to use on social media platforms and websites

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

- Education of patients
- Don't always need to see the GP
- Other clinicians are more appropriate

Breakout Room 4

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

- Not getting information out to the public
- Have an elderly population therefore many don't have access to online services/information
- Receptionists under pressure – can't do everything
- Issues need to be shared more widely
- Since the pandemic telephone access more difficult

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

- Leaflet drops
- Posters in local pharmacies/supermarkets
- Staff Retention very important
- Rural districts have a bad network connection so vital alternative ways of communication are invested in.

3. Do you have any other ideas about how we would tell the story?

- Improve different ways of communication especially to rural communities
- Improve network signal especially rural
- Better understanding of the NHS App
- Better explanation from staff
- Improve telephone access at surgeries

Breakout Room 5

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

- People don't seem to appreciate that the pandemic is not over (despite restrictions being eased).
- Not everyone NEEDS to see a GP. It's a good idea that some people are 'filtered' out on the phone – they can be adequately dealt with on the phone.
- Hopefully means more people can see a GP more quickly.
- Over the last 18 months I think it's worked very well.
- I'd like to see arrangements mostly return to what they were prior to the pandemic ... I had to wait 10 days to speak to a GP when I could have done with speaking to someone a lot earlier; I've heard of some people who have been told to just go to A&E instead.
- I think it's working very well. Regarding the measures (social distancing etc), at least it makes people feel safe.

	<p>2. Design concepts: which do you think would be most effective and why?</p> <ul style="list-style-type: none"> • Not everyone needs to see a GP and the resources show that that are other people in surgeries patients can see, eg. nurse practitioners. <p>Breakout Room 6</p> <p>1.What gets in the way of people understanding how their local practice is working?</p> <ul style="list-style-type: none"> • Patients are angry and frustrated – why can't they get what they want? • GPs to market themselves and say what they're doing – details of what's happening • Social media gets in the way with negative comments. Needs to be countered and get information out • Push back the Daily Mail • Staffing issues in surgeries does not allow time to put this out • One PP has tried to get a FB page for the surgery to try and use it actively to promote pure facts <p>2.Design concepts: which do you think would be most effective and why?</p> <ul style="list-style-type: none"> • NHS App cannot be used in all cases to book appointments – not all surgeries have enabled this. • Get the slides in a format to use on social media platforms and websites <p>3.Do you have any other ideas how we can tell this story?</p> <ul style="list-style-type: none"> • Education of patients • Don't always need to see the GP • Other clinicians are more appropriate <p>Summary of what was heard</p> <p>Overall support from members to take the campaign forward with some encouraging ideas on taking the campaign forward – educating the local communities, open days in practices and able to speak to other health professions, (when the pandemic allows) GPs to market themselves, to be open and honest about the situation. Emphasise what the other healthcare professionals can do. Practices to be more proactive and develop the social media side.</p> <p>The CCG will continue to work and involve those members who are interested in taking this campaign forward.</p>	
5	Comfort Break	
6	<p>Healthwatch North Yorkshire – presentation delivered by Ashley Green, CEO</p> <p>See presentation:</p>	
7.	<p>Further networking opportunity</p> <p>The final session allowed patient partners the opportunity to network, to share success of Patient Participation Groups as well as challenges going forward.</p> <p>Breakout Room 1</p> <ul style="list-style-type: none"> • Moving to remote meetings during the pandemic has had a different impact in different PPGs. For some there were members who were not able to 	

participate in online meetings, for others the ease of online meetings facilitated participation.

- Really want to get the message out about the other services which primary care can offer beyond just GPs.
- Drive for some to become self-managing as currently managed by the practice manager.
- All practices feel the challenge of maintain a group that represents the demography of the practice, particularly with young people and working age adults. Thought that evening meetings might be more accessible for these groups, as well as providing an online meeting option.
- An example of a success over the last year was working with the practice to develop a new, more patient facing website with better up to date information.

Breakout Room 2

1. What is the one key success of your PPG?

- Group found this difficult to answer – in some cases meeting had been sporadic during the pandemic and in one case the member was very new to the PPG
- Some within group at one practice don't want to share emails therefore communication with them can be difficult

2. How do you see the PPG developing?

- Hope that with a hybrid (face to face and virtual approach to meetings there might be a way to encourage membership as getting people to join is a challenge
- How will PPGs be accommodated in the new ICSs
- Post-pandemic – maybe drop in information sessions
- Need to focus on comms to encourage members to join – range of mechanisms to ensure include digitally excluded. Might be good to have a sub-group to discuss this

3. Do you see any challenges in developing your PPG?

- Attracting membership from varied demographics
- Need more young people – could we have a leaflet about the PPG that could be given to every young person who comes for appointment – with the virtual offer plus flexibility with times this might encourage them to come forward
- There might be a perception that the PPG has no influence and can't bring about change which might make people either not want to get involved or lose heart and drop out – could a You Said, We Did approach help to emphasis the changes that PPGs can bring and have brought about at their practices.

Breakout Room 3

1. What is the one key success in your PPG?

- A member of the PPG used to sit in the practice and speak with patients directly to get feedback – before covid. Would then meet with practice manager to discuss and take forward
- Worked with practice to develop FB page
- Volunteered during covid to support vaccinations
- Having docs join PPG meetings has helped interest and shows the practice is 'serious' about their PPG

- Held 'library sessions' – one example about social prescribing
- Have asked if people are registered online for advice/test results as reduces phone waiting times
- Some practices give set time slots for ringing the practice for different things to help reduce busy phone lines

2. How do you see our PPG developing?

- Working more collaboratively with other PPGs – particularly as PCNs develop
- Meetings can be repetitive so PPNs can help with topics
- Look at being more representative – can we go into schools and inform them about PPGs?
- Would like closer links with the CQC
- Would be helpful for GPs to get feedback from PPGs on how to do things – maybe PPGs can take a better role in that as staff are so busy

3. Do you see any challenges in developing your PPG?

- Covid has been the biggest challenge to all PPGs to date
- Loss of some members – possibly due to digitalisation and lack of access
- Practice websites differ – need some uniformity. Like it when they list the doctors and their specialisms/interests (more personal and shows qualifications)
- Use of surveys – making sure they're effective
- No set guidance around what PPGs could or should do – share details around the National Association of PPGs
- Some practices may see their PPG as an "irritant" and not there to help
- Practices often seem to be doing their own thing – not a 'National' health service
- Have challenged one practice over their role as a PPG – no response as yet

Breakout Room 4

1. What is the one key success in your PPG?

- A new telephone system installed a few years ago
- Keeping the core group going through the pandemic
- Face to face meeting with the core group during September 21
- Good relationship with the Practice Manager
- Very proactive Practice Manager who produces a six weekly report which PPG get to see
- Planning of a yearly community event including lots of different organisations. Practice already planning next summer's event
- Kept the group going by use of Zoom meetings set up by chair of PPG and always had Practice Manager included in Zoom meetings too
- Having a very good Practice Manager helps enormously

2. How do you see your PPG Developing?

- With difficulty– in the past through involving the parish clerk
- Feels like an on-going battle
- Talking through difficult problems eg concerns re Data Protection
- Helpful to have "Rules of Engagement" drawn up for use at all PPG Meetings

3.Do you see any challenges in developing your PPG?

- Important to get the right people involved
- Need to attract younger people
- Vary times of PPG meeting to make it more accessible to new members
- Meetings to link up town GP practices with rural GP practices to tackle problems between the two conurbations

Breakout Room 5

1.What is the one key success in your PPG?

- It's too soon to measure successes. The group has had a tricky time.
- The committee / clinicians – it's been great, but worked up over a long time.
- A lot of influential people.
- Two-way street. Clinicians feel they have people who can go out there and put it in the back of the net.
- The past developments and developments within the surgery. Eg. physiotherapy, phlebomy full time ...
- we see ourselves as influencers.

2.How do you see our PPG developing?

- First meeting next week, face-to-face. Key will be group and composition and get working group together that can hang in there long enough.

3.Do you see any challenges in developing your PPG?

- Support of GPs in the practices could be a little better.
- The chair and secretary resigned. Problem with the practice due to all sorts of things. Not getting representation from the practice at our meetings. Since the start of COVID we've had no meetings. Not so much interest from the practice – could be because of workload.
- Not attending meetings at the moment. They are virtual. Problem with the number of GPs, two or three have gone. Meetings I attended weren't always attended by the same GP.
- What can we do to help? Educate patients etc? Doing things in a different way?
- Patients have avoided going to the doctors have now got a stack of problems. Before the pandemic the PPG held local events at the library etc.

Breakout Room 6

1.What is the one key success in your PPG?

- Flu jab delivery crisis – leaflets developed to tell people re ceasing weekend session and making sure people didn't ring surgery
- Surviving! People not able to take part because of technical issues eg Zoom
- New telephone system. Delay in people getting through so now has a call back facility and emergency line
- Managed one Zoom meeting but not followed up
- Raised £30k for surgery to buy a mobile ultrasound
- Trained 100 patient in CPR
- 46 volunteers for taxi service for flu jabs, medicines delivery etc

	<p>2.How do you see our PPG developing?</p> <ul style="list-style-type: none"> • More proactive in interfacing with patients eg questionnaires, link with clinics, mystery shopper • Succession planning – developing new members, fill demographic gaps • Rewrite the constitution, new chair to move the group forward • Present information on activity eg newsletters <p>3.Do you see any challenges in developing your PPG?</p> <ul style="list-style-type: none"> • Volunteers • How to engage with the younger population • How to get to healthy people • How do we get information to them? • Get membership up • Get people involved, more than just a meeting, get active <p>Summary of what was heard</p> <p>The feedback showed that the pandemic had resulted in the majority of PPGs not being able to meet on a regular basis. It was evident through the conversations that members were passionate to continue in their role and continue the good work.</p>	
<p>8.</p>	<p>Feedback from each group – highlight one key point from discussions</p> <p>Breakout Room 1</p> <ul style="list-style-type: none"> • PPGs have adapted to technology – suggest hybrid meetings • Ways to retain younger people to groups <p>Breakout Room 2</p> <ul style="list-style-type: none"> • Encouraging membership across a broader demographic particularly young people and young parents is challenging • Influence - need to identify ways to demonstrate that the PPGs have influence and can bring about change • Post-pandemic holding information 'open days' to explain roles in primary care and be open and transparent about the challenges might be a way to communicate with patients <p>Breakout Room 3 Key point Disparity of the approach to and management of a PPG from practices across North Yorkshire</p> <p>Breakout Room 4 Key Point PPGs to have rules of engagement – group not to be used as a sounding board</p> <p>Align hospital services, Health and Social Care within the community</p> <p>Breakout Room 5 Key Point Continuity of members and key to influence practice</p> <p>Breakout Room 6 Key Point</p>	

	<p>Groups to be a true representation - not just the young, need to think how we work with other groups too.</p>	
<p>9.</p>	<p>Closing Summary Helen thanked members for attending, for their continued support representing their local GP practice as we look forward to the next adventure, working as part of the Integrated Care System.</p> <p>Kate expressed her thanks to Helen for Chairing the event and to Jeanette and Mo for their supporting in putting the agenda together. We will continue to engage and keep you updated particularly in line with the changes ahead and we will meet again in our local meetings:</p> <p>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</p>	
<p>10.</p>	<p>Meeting Closed</p>	
<p>11.</p>	<p>An evaluation survey was shared with members who attended, to gain feedback on how the event was received based on the content and format.</p> <p>Feedback from participants was very positive and 90% of members would be happy to be involved in future virtual events.</p> <p>(Please see Appendix 1)</p> <div data-bbox="719 925 1410 1352" style="border: 1px solid black; border-radius: 50%; padding: 10px; background-color: #f9e7d3; margin-left: 40px;"> <p>"An excellent most informative and well worthwhile Event delivered in a very professional manner."</p> <p>The hard work of everybody involved in contributing to such a successful occasion was very much appreciated - thank you",</p> </div>	

Feedback following Patient Partner Annual Event - 19 October 2021




1. Please tell us how satisfied you are with the following							
Answer Choices	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Not applicable	Response Total
The information I received to access the event was helpful?	57.89% 11	36.84% 7	5.26% 1	0.00% 0	0.00% 0	0.00% 0	19
The topics discussed were relevant to me	27.78% 5	66.67% 12	5.56% 1	0.00% 0	0.00% 0	0.00% 0	18
The NHS Reforms - The presentation was delivered appropriately	47.37% 9	42.11% 8	5.26% 1	5.26% 1	0.00% 0	0.00% 0	19
The NHS Reforms - I have a better understanding of the reforms	26.32% 5	63.16% 12	10.53% 2	0.00% 0	0.00% 0	0.00% 0	19
My local practice - The presentation was delivered appropriately	15.79% 3	57.89% 11	15.79% 3	0.00% 0	0.00% 0	10.53% 2	19
My local practice - I have a better understanding of my local practice	10.53% 2	42.11% 8	36.84% 7	0.00% 0	0.00% 0	10.53% 2	19
Healthwatch North Yorkshire - The presentation was delivered appropriately	22.22% 4	72.22% 13	5.56% 1	0.00% 0	0.00% 0	0.00% 0	18
Healthwatch North Yorkshire - I have a better understanding of Healthwatch	26.32% 5	57.89% 11	15.79% 3	0.00% 0	0.00% 0	0.00% 0	19
I was satisfied in how I was able to interact in the breakout sessions	33.33% 6	61.11% 11	0.00% 0	0.00% 0	0.00% 0	5.56% 1	18
I was satisfied in how I was able to ask questions throughout the event	31.58% 6	52.63% 10	10.53% 2	0.00% 0	0.00% 0	5.26% 1	19
I have made contact with other patient partners	5.56% 1	44.44% 8	27.78% 5	0.00% 0	0.00% 0	22.22% 4	18
The length of the event was about right	5.26% 1	73.68% 14	15.79% 3	5.26% 1	0.00% 0	0.00% 0	19
The event was what I was expecting	15.79% 3	68.42% 13	15.79% 3	0.00% 0	0.00% 0	0.00% 0	19
I would be happy to be involved in future virtual events	57.89% 11	31.58% 6	10.53% 2	0.00% 0	0.00% 0	0.00% 0	19
						answered	19
						skipped	0

1. Please tell us how satisfied you are with the following






Any further comments: (11)

1	21/10/2021 14:40 PM ID: 177117535	Very useful. I would be interested to hear more about other participants experience of their PPG's.
2	21/10/2021 14:51 PM ID: 177118616	An excellent most informative and well worthwhile Event delivered in a very professional manner. The hard work of everybody involved in contributing to such a successful occasion was very much appreciated - thank you -
3	21/10/2021 15:05 PM ID: 177120235	The breakout sessions could have been a little longer. Healthwatch NY was not all that interesting.
4	21/10/2021 16:33 PM ID: 177130978	Even with the 10min comfort break I felt that 3 hours was a long time to be sat paying attention to Zoom. It was the longest virtual event that I have ever attended. Maybe future events could be staged over 2 (not necessarily consecutive) days?
5	21/10/2021 16:52 PM ID: 177133480	Thank you for the organisation of the meeting which ran very smoothly
6	22/10/2021 14:48 PM ID: 177268410	Health Watch NY, missed most of the presentation because of computer malfunction so I was pleased to get the slides to understand it. I have not had any contact with any patient partners at this stage as this was my first involvement in the group
7	23/10/2021 09:24 AM ID: 177390140	It is always better to meet face to face so that you can interact with others and pick up different ideas. I think zoom is very is a poor substitute but necessary in current times.
8	24/10/2021 17:04 PM ID: 177514033	A little more time for questions would be good.
9	26/10/2021 11:23 AM ID: 177664638	I found breakout sessions most useful especially using the advance questions. I find translating acronyms, abbreviations and admin speak very hard work. (First presentation). So much so that I tend to turn off. Any chance of using plain English?
10	27/10/2021 11:02 AM ID: 177745105	More work needs to be done on how the proposed ICS will interact with PPGs. Some survey work needed on how many practices have a PPG and at what level they operate. Overall the event was very good. Many thanks.
11	27/10/2021 17:09 PM ID: 177778171	Very well-structured event. It would have been useful to get a doctor and nurse to give their perspective of the changes and perceived benefits.



2. In which locality do you live?

Answer Choices			Response Percent	Response Total
1	Hambleton, Richmondshire and Whitby		15.79%	3
2	Harrogate and District		31.58%	6
3	Scarborough and Ryedale		52.63%	10
			answered	19
			skipped	0

3. What is your age?

Answer Choices			Response Percent	Response Total
1	16-24		0.00%	0
2	25-44		0.00%	0
3	45-64		21.05%	4
4	65-74		31.58%	6
5	75-80		21.05%	4
6	81+		21.05%	4
7	Prefer not to say		5.26%	1
			answered	19
			skipped	0

4. What is your gender?

Answer Choices			Response Percent	Response Total
1	Male		57.89%	11
2	Female		42.11%	8
3	Transgender		0.00%	0
4	Other		0.00%	0
5	Prefer not to say		0.00%	0
			answered	19
			skipped	0