

**NOTES OF THE MEETING OF THE**

North Yorkshire Clinical Commissioning Group  
 Harrogate and District Patient Partner Network  
 Tuesday 11 January 2022 16.30 – 18.30pm  
 Video Conference: Zoom

**Chair – Kate Kennady, Lay Governing Body Member Patient and Public Engagement**

Bridget Read (BJR) Engagement Manager NY CCG  
 Jane Marchant (JM) Communications and Engagement Officer NY CCG  
 Georgina Sayers (GS) Engagement Manager NY CCG

**In attendance:**

Rachael Durrett (RD) Head of Communications & Engagement NY CCG  
 Stacey Stanton (SS) Medicines Optimisation Technician NY CCG

**External Invitee:**

Joe Woodvine (JW) Retail & Promotions Support Manager, Medequip

**Practices Representatives:**

Helen Clothier (HC) Beech House  
 Kathy l'Anson (KIA) Dr Akaster  
 Malcolm Bottomley (MB) Dr Moss & Partner  
 Roy Wilson (RW) Park Parade  
 Malcolm Wailes (MW) Leeds Road  
 Sylvia Fox (SF) Kingswood

**Practice apologies:**

Charles Gibson (CG) Nidderdale  
 Joan Glassford (JG) Kingswood  
 Arnold Warneken (AW) Springbank  
 John Williams (JW) Eastgate Medical  
 Freda Roach (FR) Dr Moss & Partner  
 Michael Jarosz (MJ) Nidderdale

Item	Lead
<p><b>1</b></p> <p><b>Welcome and Apologies</b></p> <p>KK welcomed everybody to the meeting via zoom and virtual introductions with everyone were done and thanked everyone for joining in the Zoom Meeting.</p> <p>A total of six practices were represented.</p>	

2.	<p><b>Declarations of Interest</b></p> <p>There were no declarations of interest.</p>	
3	<p><b>Agree Minutes and Action Tracker held on 8 September 2020</b></p> <p>The group agreed the minutes were an accurate record of the meeting on 2 March 2021.</p> <p>The action tracker was reviewed, and KK stated that there were no outstanding actions therefore is closed.</p> <p><b>Action.</b> Minutes approved and item on Action Tracker closed.</p>	JM
4	<p><b>Returning Community Equipment to Medequip</b></p> <p>A presentation was delivered to the group by Joe Woodvine, who explained that Medequip are commissioned providers of the North Yorkshire Integrated Community Equipment Service on behalf of North Yorkshire County Council, NHS Vale of York CCG, NHS North Yorkshire CCG and NHS Bradford &amp; Craven CCG. Medequip work directly with Commissioners and Prescribers to support patients and residents providing vital equipment on loan within the community.</p> <p>Medequip supplies, stores, delivers, installs, maintains, collects, repairs, cleans, refurbishes, and recycles community equipment as part of the service. The core aims are to increase service levels, enhance care delivery and support patient independence and rehabilitation to keep people safe and independent for longer. The main service centre depot is based in Knaresborough and there is also a service hub in Scarborough.</p> <p>Returning of equipment is very important and helps the Local Authority and NHS Services. All equipment is picked up free of charge and on average 75% of equipment returned is re-issued within the community. Any equipment which has a Medequip label attached to it can be returned to any of the six drop off points across North Yorkshire. For Hard CCG this is Manse Lane Knaresborough and Yorwaste Recycling Centre at Penny Pot Lane Harrogate.</p> <p>JW asked if HaRD Patient Partner Network Group could support Medequip's Returning Equipment Campaign by sharing the Campaign with Practice Managers at GP Practices through GP Communications via digital screens, newsletters, notice boards or to update patients via SMS in GP Practices.</p> <p>KK stated that Practice Managers did not attend the Patient Partner Network meetings but asked HaRD Patient Partners to take these messages back to their GP Practices to share.</p> <p><b>Beech House</b> - HC stated that she does the newsletter for her practice and would be happy to include a message and one that is screen digital as well. HC is also a volunteer at Harrogate Hospital and will pass this information on.</p>	JM

	<p><b>KK</b> asked whilst patients are having physiotherapy does the equipment belong to Harrogate Hospital.</p> <p><b>JW</b> responded that when treatment is prescribed by the physiotherapist the equipment belongs to the Local Authority and the NHS. When Medequip takes the equipment back it then belongs to Medequip.</p> <p><b>Dr Moss &amp; Partner</b> – MB stated that Yorwaste NYCC Household Recycling Centre, Penny Post Lane Harrogate is not on a bus route and difficult to get to. Is it possible for the Amnesty Bin to be relocated or add another ie Sainburys Wetherby Road in Harrogate or at Harrogate Hospital.</p> <p><b>JW</b> welcomed the feedback and would take the feedback back and consider other locations where the Amnesty Bin's can be located.</p> <p><b>Leeds Road</b> - MW queried if the wheelchair company was run by Medequip.</p> <p>JW reported that this is run separately. A referral will be done via a GP and assessed by an Occupational Therapist.</p> <p><b>Leeds Road</b> - MW stated the equipment service was very good but the local shop in Harrogate had limited supplies.</p> <p>JW responded that Medequip is working with local retailers and there is 10% discount if the public want to buy their own equipment.</p> <p>KK thanked JW for a very interesting presentation and asked that Patient Partners take messages back to their Practices. JM to share presentation with the Practices.</p> <p><b>Action: JM to circulate presentation to the group and share the details with Practice Manager's.</b></p>	<b>JM</b>
<b>5</b>	<p><b>Feedback on Joint Patient Partner Network Meeting 19 October 2021</b></p> <p>BR stated that feedback from the survey done after the virtual meeting was very positive showing that 90% of the members are happy to be involved in future events.</p> <p><b>Park Parade</b> – RW commented that it was an excellent event and very positive. A lot of concerns were raised in the breakout sessions. Future topics were identified for later discussions with the relevant speakers. Would like to return when possible to face to face meetings.</p> <p>BR reported that Primary Care Networks (PCN) should have been on the agenda today but due to COVID has been rescheduled to the May meeting.</p> <p><b>Beech House</b> - HC commented that as Chair of the event, she had been able to "drop in and out" of the break out sessions via Zoom and possibly would not have been able to do this via a face to face meeting.</p>	

	<p>RD commented that conversations in the breakout sessions were very robust and was very happy to participate.</p> <p><b>Dr Akaster</b> – KIA asked if Practice Managers and GP's had seen the notes from the event on 19 October. If not it would be helpful if they could be circulated out to Practice Managers.</p> <p>BR agreed and JM to circulate to Practice Managers</p> <p><b>Action. JM to circulate the notes with HaRD Practice Managers</b></p> <p><b>Beech House</b> HC commented that she had attended a face to face meeting with Practice Manager/Service Manager who were very complimentary about the content of the meeting.</p> <p><b>Park Parade</b> - KI asked how many Patient Partner Groups were represented at the event.</p> <p><b>BR</b> responded that she will find out.</p> <p><b>Action: BR to update the notes of event to show how many practices involved in the event.</b></p> <p>KK thanked everyone for their contribution to the event.</p>	<p><b>JM</b></p> <p><b>BR</b></p>
<p><b>6</b></p>	<p><b>Integrated Care System (ICS) – NHS Reforms</b></p> <p>RD gave a presentation to the group giving an update on the development of the NHS Integrated Care Board and the foundations for developing the ICS engagement and public involvement strategy.</p> <p>Integrated Care Systems are partnerships of health and care organisation that come together to plan and deliver joined up services and to improve the health of people who live and work in their area. Informal arrangements have been in place for some time locally as Humber Coast and Vale Health and Care Partnership.</p> <p>Based on recommendation of NHS England/Improvement the Government has set out plans to put ICSs on a statutory footing which was expected 1 April 22 but due to COVID will come into existence (pursuant to legislation) 1 July 2022. The new organisation will be NHS Humber and North Yorkshire Integrated Care Board.</p> <p>ICBs are expected to develop a system wide strategy for engaging with people and communities by 1<sup>st</sup> July 2022 using the 10 principles as detailed in the slide deck. The creation of statutory ICB arrangements brings fresh opportunities to look at new ways of working, building on existing relationships and make full use of existing strengths and good practice. This is an opportunity to seek views from our patient partners.</p> <p>General discussion with the group followed:</p>	

	<p><b>Park Parade</b> – RW stated that this was a huge challenge and wondered how will the different systems be managed and will there be a different leadership structure.</p> <p>RD stated that there will be a different leadership structure by design as each ICS will be reflect its own population and health and care needs.</p> <p>RD commented that local meetings are very important especially keeping local connections.</p> <p><b>Park Parade</b> – RW commented that it is important that the voice of the public is still heard.</p> <p><b>Dr Moss &amp; Partner</b> – MB queried if Patient Partner Groups (PPGs) would still exist in the "new world".</p> <p>RD stated that PPGs would still exist providing they are still included in the GP Practices contract.</p> <p><b>Dr Akaster</b> – KIA stated that there had been no community meetings regarding the changes and concerned that the general public were not aware of the changes and difficult for them to have a voice.</p> <p><b>Park Parade</b> – RW queried if there would be changes to Dentistry service</p> <p>RD stated that there were no immediate plans and dentistry remains the responsibility of NHSE.</p> <p>The group acknowledged that there is a strong desire for local engagement at local level to continue and need explanations that are easy for the local population to understand. "Local" is very important and key to the change being a success.</p> <p>KK thanked RD for a very interesting presentation</p>	
7	<p><b>Updates from the CCG</b></p> <p>BR asked the group if there were any questions on the briefing</p> <p>KK stated that she found it very useful.</p> <p>BR gave an update on the vaccination programme. From the middle of December 21 NYCCG commenced the vaccination booster programme, which continued through the Christmas period. There remains a high take up of vaccinations in North Yorkshire: In the younger cohorts the numbers are lower as not all will have become eligible yet due to the requirement for a 3 month interval between second and booster dose There will also be some who are eligible but who have recently had Covid-19 and therefore need to wait 28 days before coming forward for their booster vaccine.</p> <p><b>Dr Moss &amp; Partner</b> - MB asked if there were any figures for current infection rates at Harrogate Hospital.</p>	

	<p>BR commented that the hospitals are very busy and also an increase in staff sickness has had an impact. Number of COVID patients in North Yorkshire hospitals is currently 297, only five below the peak of spring 21 however there are only 9 patients in Intensive Care Unit which is low. There has been an increase in cases and the peak is being modelled for mid January for North Yorkshire.</p> <p><b>Beech House</b> – HC stated that at Harrogate Hospital everywhere is short staffed due to a lot of staff are having to self isolate. Staff have now been issued with FF3 masks to wear which included volunteers. Compulsory vaccination comes into operation in April 22 and all staff have received letters regarding this and a small percentage of staff will be affected by this.</p> <p>KK thanked the group for the feedback.</p>	
<p><b>8</b></p>	<p><b>Member Agenda Items</b> – (eg: feedback from practice groups, sharing best practice, innovative ideas/ideas) If you would like to add anything to the agenda please contact Jane Marchant via email <a href="mailto:janemarchant@nhs.net">janemarchant@nhs.net</a></p> <p><b>Kingswood</b> – SF reported that there have been no meetings so far. The first meeting will be on 31<sup>st</sup> January 22.</p> <p><b>Leeds Road</b> – MW reported that so far there have been no meetings. MW reported that on visiting Harrogate Hospital and due to no spaces in disabled parking he had to park in the multistorey care park. On finding the access to the lift area via a manual door very hard to open manually he presented his case to the Board at Harrogate Hospital regarding making access to open the door via an electronic button. Harrogate Hospital informed MW that his suggestion had been successful and the work should be completed by the end of January 22.</p> <p>KK thanked MW for bringing this to the attention and for his success that the Board at Harrogate Hospital agreed to making changes in the multi-story car park.</p> <p><b>Park Parade</b> – RW reported that no meetings have been held since the pandemic. The surgery have now introduced an E Consult System on line which commenced 5 January 2022. Patient who want a face to face appointment with a GP complete the form on line. A GP will then look at the form and a decision made in 48 hours. For those patients who do not have access to computers etc then this can be done via the telephone.</p> <p><b>Beech House</b> – HC reported that the next PPG meet is on 26 January 22 and it is hoped it will be face to face but if not via Zoom. The chair of the Samaritans has been invited to the meeting.</p> <p>KK thanked everyone for their feedback.</p>	
<p><b>9.</b></p>	<p><b>Any Other Business</b></p> <p><b>GP Community Pharmacy Consultation Service (CPCS) – SS</b></p> <p>The purpose of GP CPCS is to free up general practice of minor problems, allowing reception staff/Care Navigators to refer patients needing advice and treatment for</p>	

	<p>certain low acuity conditions to a community pharmacist. Its aim is to make sure that patients have access to the same levels of care, close to home and with a self-care emphasis.</p> <p>Community pharmacists have been successfully delivering CPCS since 2019, accepting referrals from NHS 111 for face to face or remote consultation providing more convenient treatment closer to patients' homes. This is not a new service.</p> <p>The agreement is for the pharmacy to provide self-care advice and support. This will include information to all people referred by the GP practice to the pharmacy under CPCS. The end points of the consultation may include:</p> <ul style="list-style-type: none"> <li>• Advice given only</li> <li>• Advice and the sale of an OTC medicine</li> <li>• Advice and support to access an appointment with their GP</li> <li>• Advice and signpost on to another service.</li> </ul> <p>All GP practices are encouraged to use this service to ensure patients are able to access the right care, in the right place, with the right person, at the right time. The service aims to reduce the pressure on general practices and A&amp;E departments whilst also offering choice to patients.</p> <p>KK thanked SS for her presentation.</p> <p>BR asked the group if anyone had experienced problems communicating with other members in their PPG via email and if members were prepared to share their emails with the Chair to aid communication.</p> <p><b>Beech House</b> – HC commented that as chair she has access to all members emails and telephone numbers, as they also had a "What's App" group. There is good communication within the group.</p> <p><b>Dr Akaster</b> - KIA stated that there is a secretary who forwards everything onto the members which appears to work well within the group.</p> <p>BR thanked the group for their feedback and agreed that there are all different ways of working and communicating.</p>	
<p><b>10</b></p>	<p><b>Key Messages Taking Away</b></p> <p>KK reported that the ICS is now commencing 1 July 22 and NY CCG remains the statutory body until then.</p> <p>The next HaRD CCG meeting will be held on Tuesday 10 May 22 16.30 – 18.30pm</p> <p>KK thanked everyone for a very enjoyable and interesting meeting.</p>	
	<p><b>Date of future meetings</b></p> <p>Tuesday 10 May 2022 HaRD PPN Meeting</p>	

**PLEASE NOTE ALL PATIENT REPRESENTATIVES ARE WELCOME TO ATTEND –**  
please email [janemarchant@nhs.net](mailto:janemarchant@nhs.net) which GP Practice Group you represent

**Meetings will commence at 16.30hrs and close at 18.30pm unless otherwise stated.**  
**If you are in doubt if you are the nominated Patient Representative of your GP Practice, please check at your next GP Practice Group or discuss with the Practice Manager.**

Circulation of Minutes:  
Practice Managers  
Harrogate & Rural Patient Partner Network