

YORK MEDICAL PRACTICE PATIENT GROUP MEETING

Thursday 15th April 2021

1pm via Zoom

Chair: Peter Henderson (PH)

Minute-taker: Joyce Jacobs (JJ)

PRESENT: Penny Alexander (PA), Stephen Alexander (SA), Richard Bedwell (RB), John Crook (JC), Maggie Ennis (ME), Lauren Hoadley (LH), Paul Leonard (PL)

This was meeting postponed from 25th March due to the absence of LH on Covid duties

1 **Apologies:** John Crook

2 **Minutes of the last meetings 28th January:** Agreed

3 **Covid vaccinations update:** LH said that the past three months had been particularly difficult because of the C19 vaccination programme. It had affected the day-to-day dealings with patients as the entire Practice was out of action on mass-vaccination days. She also said that the other three Practices in the PCN had been working well in collaboration with each other.

LH was proud to say that the Practice had not wasted a single drop of vaccine even though the Pfizer vaccine was very difficult to deal with generally and was very difficult to mix and is time-sensitive. The Practice is now not using the Pfizer or Moderna vaccines but patients have had to be re-assured about the Astra-Zeneca vaccine.

Everyone who is entitled to it has had their first dose. But the opening up of mass vaccination centres has caused problems as they are fishing in the same pool as GP practices. People in the younger cohorts prefer to go to mass vaccination centres as they are more convenient in respect of

timing and at the moment people over 45 are being encouraged to go to these centres. Most of April and May will be spent giving second doses. The Practice will not be doing jabs for people under 40.

PH said that the Practice staff had done a brilliant job in these peculiar times and wanted to thank them on behalf of the PG.

4 Staffing changes following Dr Parson's retirement: LH said the Practice was very sad to see Dr Parsons leave and it was very tough for the Practice. She reported that Dr Chris Watts was now the senior partner. Dr Sindhu Pathmabaskaran has replaced Dr Parsons' sessions but not taken over his patients. The patients have been distributed equally amongst the partners. At the moment there are eight GPs, one of whom works full-time and the rest part-time each doing six sessions.

5 Patients' consultant letters to Practice: Following an email from PH, LH said that there was some responsibility on patients to follow up results. But a lot depended on who asked for the test.

LH said that it would be better for the patient to book a follow-up appointment as the patient usually get their letter from the hospital before the Practice has been able to deal with their copy. This is because the Practice gets a huge number of documents about patients from hospitals every day and each has to be dealt with individually.

LH said that it would be better if Dr Watts, Glyndwr Whitworth, senior nurse and Gillian Gibbs, medical secretary should come to the next meeting to talk about this complicated subject.

PH asked whose responsibility it was to make an appointment for an annual blood test. LH said if a patient had a long-term condition they would be called by the Practice.

6 Complaints and compliments (LH): There had been hundreds of compliments to the Practice on the smooth roll-out of the vaccine.

There have been a few complaints from patients who wanted a specific vaccine and from people wanting to speak to a specific practitioner. This

is not always possible because the practitioner may not have any free slots and so the individual must talk to the duty doctor. Some patients think this means there is no continuity as the majority of GPs work part-time.

7 **AOB:** ME said she was unable to get onto the new NAPP website. Others had managed to and said it looked useful.

8 **Date of next meeting :** This would normally be Thursday 27th May. LH will find out if this is a suitable date for Dr Watts and if not she will advise the PG when he is available. (Subsequently LH advised that Dr Watts and Gillian Gibbs (Senior Medical Secretary) would be available on Tuesday 18th May at 1pm)

Chair : PH

Minute taker: TBA

PG item: ME pointed out that in her view the Patient Access (PAcc) terms of Reference are slanted to them and seemed to be passive on behalf of patients. SA and MH said they had both given up on PAcc and order their prescription items direct from their pharmacies.

ME wondered if other patients on other practices have experienced the same problems as there would be more pressure on PAcc if many more people didn't or couldn't use their service. ME suggested putting a note on the website. PA said she would talk to Healthwatch about it and it was suggested that LH might contact, on our behalf, the new patients who had signed up to receiving emails from the PG

It was agreed that members of the PG, if they want, should join the PAcc panel to see what happens. JJ suggested that if there is no or little response we should contact the National Association of Patient Groups (NAPP). PH suggested that we tell the NAPP what we are proposing.

PL said the sensory community garden in York House is now open and he would encourage to go. He also said that because of the loosening of the Covid rules he had been able hug his son for the first time in many months.