MINUTES OF CROSS KEYS SURGERY PATIENTS PARTICIPATION GROUP (PPG) ZOOM MEETING HELD ON FRIDAY 30 OCTOBER 2020

In attendance: Denys Williams Chair. Peter Yoxall. (Practice Manager (PM)). Dr, Alli Wilson (Partner). Judith Young. Nick Oakley. Anita Templar. Jane Padwick. Stephen Reading. Marian Purdy.

Apologies. John Speller. Rose Williams. Shelley Jennings. Maggie Kaye.

1. **Minutes of last meeting**. Agreed.
2. **Matters Arising**. Appointments. The Chair asked if there had been any further staff discussion on the possibility of returning to some sort of appointments system. With people back at work and children back at school it was not so easy for some patients to wait all day for a phone back. The PM said there had been some discussion but did not see any change in the near future, particularly as COVID was increasing again. The patient can tell the receptionist when they make an appointment when they are not available and this information is passed on to the doctor. Dr Wilson said the doctors are being flexible and try to meet the patient’s wishes and prioritise where they think necessary. Doctors will ring back 2 or 3 times if there is no reply. If a face to face appointment is necessary, then the doctor will arrange a suitable day or time with the patient. She mentioned patients are texting or using emails to request info and this is proving useful. For those who are not tech savvy, arrangements are made to ensure the patient is dealt with appropriately. She agreed the PM and Chair could get together to develop appointment protocols. Marian said she thought the system was working well and Nick supported Dr Wilson’s comments and said there needs to be flexibility. Anita mentioned her own experience and has now requested only calls to her landline. Stephen commented on his experience and suggested a time frame for a call back would have been useful but the matter was resolve. Chair commented that it is clear that patients are being dealt with on the day, unlike some press reports of other surgeries, the Practice continues to provide an excellent service. **Action.** PM and Chair to get together to develop protocols so patients have a better understanding of the current appointment system
3. **Routine Practice Matters.**
   1. **Staff Changes.** Dr. Lo working from home as she is pregnant and shielding. There is a vacancy for a receptionist. All other staff working as usual.
   2. **ASK NHS App Roll Out**. The ASK NHS App has not been rolled out to the practice as the CCG has restricted access to the Surgery web site. Hopefully this will be resolve soon.
   3. **Flu Letters.** NHS England have sent out letters advising people of their eligibility for a flu jab. Due to a coding error some patients have been advised incorrectly that they are entitled to a flu jab. Those who have phoned in have been advised accordingly
4. **Chinnor Matters** Marian asked if the middle bench was ever going to come out to make the room bigger and it would be nice to have a little bit of paint around the new structure. She was also worried about the confidentiality now that the receptionist has a speaker system. Whilst there are not many in the surgery at present this could prove a problem when more patients return to the surgery. The PM said there were no current plans to remove the central island at present and it is hoped that when things return to some form of normality it would be possible to slide open the protective window allowing a more confidential conversation with the receptionist. She also raised the continuing problem with Chinnor Lloyds Chemist which delivers a very poor service. Some prescriptions had ended up in Risborough and there was sometimes a wait of 2 or 3 days to get a prescription. Nick said he had no prescription after a 7 day wait and their organisation has gone back to what it was over a year ago. The PM explained that the Practice ask patients to give them 3 days’ notice for a repeat prescription and the chemists have indicated that they may need a further 7 days to fill a script. Whilst this is fine for a repeat, when the doctor has just issued a script the patient wants to start treatment soonest. Nick commented that the scripts are sent to a central source and then forwarded to the chemist. He felt the organisation of the chemist needs sorting. This contrasted with patients experience on Risborough where by the time you had walked out from the surgery to the chemist your script is ready. **Action. The Chair and PM undertook to look at this problem and see if they could write to someone to help improve the service at the Chinnor Lloyds Chemist****.** Nick highlighted a problem with social distancing in the surgery when his wife went for an appointment. The doctor was running late and there were many people waiting for a flu jab and it was not possible to remain socially distance form others. The PM said that there is normally an admin person directing patients when there are more than one clinic operating and Nick gave the PM the date and time to follow up. **Action. The PM undertook to look into the circumstances of this event.**
5. **Flu Vaccinations.**  The Chair reported that his experience and those who he had spoken to was the good in getting a jab. Stephen and Judy concurred. Judy said that some people had said they could not book a flu jab. PM reported that they had set up a 3-week intensive flu jab programme and some 3242 people had been vaccinated. There was a planned 2-week break to allow nursing staff etc to catch up with routine surgery matters. Another flu vaccine programme will start on 16 Nov and some 500 appointments have now been put on the system. There are about 1000 eligible patients left to have a jab from the current flu vaccine allocation. The surgery has no more information about the 50 to 64 age group flu programme. The Gov web site says that providers will be informed!
6. **Primary Care Network (PCN) and Social Prescribing.** The Chair said that he had forwarded an update from the PCN Clinical Lead (Dr. Martin Thornton) which showed the additional specialities that the PCN will be recruiting next year. This includes: first contact physiotherapist, occupational therapist, community paramedic, dietician, care coordinators, mental health practioner and physician associates. This will allow the practices to offer a wider range of coordinated services at the primary level. The mental health practioner along with the social prescribers will help in dealing with the growing mental health crisis. Anita welcomed these changes and commented that as a volunteer for MIND she has seen the explosion in demand for their services. Dr Wilson commented that feedback on patients was useful but to be aware of the patient confidentiality rules.
7. **AOB.**
   1. Nick asked if arrangements had been made at the Risborough surgery to prevent patients waiting out tin the cold. The PM said there was no change to the present system and patients should not turn up early for the appointment. If the clinician was running late then the patient would be allowed access. He pointed out the face to face appointments are spread out and that is an unlikely scenario, Nick asked how the patient could let the surgery know they were there. PM said they could use the intercom and this triggers the receptionist to notify the clinician of the patient’s arrival.
   2. Anita wanted to pass on thanks to all the staff for the hard work supporting patients over the past6 months.
8. **Date for next meeting.** Friday 8 Jan 2021.