

MINUTES OF CROSS KEYS SURGERY PATIENTS PARTICIPATION GROUP (PPG)
ZOOM MEETING HELD ON FRIDAY 3 JULY 2020

In attendance: Denys Williams Chair. Peter Yoxall. (Practice Manager (PM)). Dr, Ally Wilson (Partner). Judith Young. Maggie Kaye. Nick Oakley. Shelley Jennings. Anita Templar. Jane Padwick.

Apologies. . Stephen Reading. John Speller. Rose Williams. Marian Purdy.

1. Minutes of last meeting. Agreed.

2. Matters Arising.

- a. Chinnor Surgery Car Park. The PM updated the meeting the owner intends to take back part of the car park. He has big plans which will include housing but has offered the practice slots in front of the surgery.

3. Routine Practice Matters.

- a. **Staff Changes.** We still have two members of the admin team shielding and working from home. Also, there is one receptionist shielding who cannot work from home and another receptionist who has just returned to work.
- b. **Surgery Layouts.** We are modifying both reception areas. Risborough reception has been turned around by 90 degrees as well as being glassed in. (Photo attached). This is to give better access to wheelchair and mobility scooter users as we have introduced a lower counter section. The moving of reception also improves patient confidentiality as less open. Chinnor is also being glassed in, but otherwise will stay the same. The entry system at Princes Risborough will continue via the car park and exit into the High Street There has to be a one-way system but account will be taken for those with mobility problems.
- c. **Chinnor Surgery.** Chinnor reception going forward will have a receptionist in the morning only. We are planning to remove the 'island' to add a Blood Pressure (BP) room and telephone booth. . Hopefully framing will start in about 5 weeks. Perhaps the PPG could look at supporting the funding for BP Monitor. The cost is approximately £2,000.
ACTION. Chair to consider with PPG proposal to help fund BP Monitor.
- d. **Appointment System.** Patients are being encouraged to book their appointment by phone or via online services as this will help reduce the footfall within the practice. The telephone and online booking messages have been updated. The online system has been 'modified' to allow patients to book an appointment for a clinician phone call back. The time of the appointment will not be the same as the 'booked' appointment time. It is clear that the triage will be carried out by a clinician before the call back. (Note. Chair has checked both systems and the messages are clear and unambiguous). Patients will then receive a call back with; telephone consultation, video conferencing consultation or a face to face consultation. Nurse, HCA and blood check appointments are still booked via a telephone call. Dr Wilson commented how useful on line appointments had been during this time.

4. Appointment Survey.

The Chair informed the meeting about the Healthwatch Bucks survey about both surgery and hospital appointments during COVID. This will allow patients to feedback their thoughts and experiences and help the new normal. He had circulated the survey and would do so again and had asked the PM to distribute it to those on the surgery email list. Some members said they had not seen the survey.

Action. Chair to redistribute survey and write forward for PM. PM to distribute survey.

5. Primary Care Network (PCN) Update.

The Chair commented that we had previously attended PCN meetings and for obvious reasons were no longer had and that the PCN development was at a crucial stage when COVID came along. The PM updated us and there was a virtual PCN meeting yesterday. They are in the process of recruiting a PCN Network manager. CVs have been received and interviews will shortly take place. There is funding to recruit another social prescriber (SP) and this is in hand. Discussions about the best use of the pharmacist role and the recruitment of pharmacist assistants was being considered to help in audits and care home support. There is still a balance of about £300k in the budget which can be allocated to another role and care home support is an area that needs attention. There is a plan for a face to face PCN Board meeting in September. A postponed meeting with Partners could take place in October. There are plans to increase the physio service to allow hands on treatment as well as diagnostic. This would be helpful for care homes but there is only one physio per 44,000 patients! Anita commented on her experience working with Nina, our PCN SD, she has been linked with a client and this has been very successful. Anita also volunteers with MIND and the Charity has had an enormous number of volunteers and has been able to link clients to volunteers. She supports another SP. Peter asked Anita to drop an email so he could share her experiences with the PCN Board. PM commented that the SP has been working from home as has been reactive and they hope the service the SP provides will become more proactive to deal with 'high users' later this year.

Action. Anita to email PM (Note done thanks).

6. AOB.

- a. Blood Testing.** Chair mentioned that at a previous PCN meeting there had been talk about blood testing. No real comment but Dr. Wilson commented that the Practice was trying to rationalise blood testing to reduce the number of tests. This was done by having an annual blood test for those who need routine tests in their birth month to avoid multiple appointments.
- b. FLU Vaccine.** The programme should start in Sept. Practice looking how best to do this safely. It will be via an appointment. Last year each vaccine took 5 mins, but with PPE and queuing restrictions a safer way needs to be found. Judith asked about children vaccines and they should be done via school but 'at risk' children being done at the surgery.

- c. **Surgery COVID Testing.** Nick asked why the surgery was not carrying out COVID testing when patients have a blood test. Dr Wilson explained the 2 tests, have I got it now and have I had it. The surgery was not consulted and have not been given permission to carry out testing. Patients with symptoms can request a home kit via NHS111. She also mentioned that some life assurance companies were reviewing patients who had tested positive as some COVID patients have suffered long term lung damage. She also mentioned that some patients who had tested positive via a swab test later had a negative blood anti body test! Shelley mentioned that she had tested positive through an anti-body test.

- d. **Over 75's Nurse.** PM had mentioned that the funding for this project had ceased and the over 75's nurse post was been finished. On eof the doctors is challenging this as we are encouraged to do more for the elderly.

7. Post COVID, how will the surgery work.

The Chair commented that a lot of this topic had been discussed at Item 3. The PM said the thrust was to make greater use of telephone and on line appointments and reduce the footfall in the surgeries. The layout of reception at Princes Risborough was also designed to allow greater privacy and for it to be less obvious. One of the main reasons for surgery attendance is likely to be blood testing. Video conferring will become more norm; Shelley mentioned she had had a good experience of a video conference.

- 8. **Next Meeting.** The next ZOOM meeting is planned for Fri 28 Aug 2020.

RECEPTION



