**PRIORY ROAD SURGERY**

**PATIENT PARTICIPATION GROUP (PPG)**

**MEETING ON 13th APRIL 2022**

**Date:** Wednesday 13th April 2022

**Meeting Commenced:** 5.00 pm

**Members Present:** LV

 GM

 BW

 HW

NP

 Dr RP

**Introduction:** To comply with the restrictions on social contact necessitated by the Covid emergency, this was once again a 'virtual' meeting conducted via Zoom.

LV chaired the meeting. He asked, and it was agreed, that the minutes of the last meeting should be accepted. GM passed on apologies from JM. GM gave a brief resume of the previous meeting; matters then proceeded to hear an update on Covid related issues from Dr RP.

**Current Covid situation:** Dr RP said, despite the easing of restrictions and the success of the vaccination programme, the Covid pandemic was still on-going nationally. The current rate of infection was high although, fortunately, few of those infected were seriously ill. Health services remained under severe pressure. At our surgery, three staff had recently been off work for two weeks. Flu infections were at a high level for the time of the year and that was adding to the pressure on health service providers. For those reasons, it was important, in surgeries etc, that social distancing and mask wearing continued.

Dr RP said the main 'booster' phase of the vaccination programme was almost at an end. The current focus was on reaching those who, for whatever reason, had not had their booster (or perhaps previous) injections. Additionally, 5 to 11 year old children were now eligible for vaccination; their parents were being advised accordingly by letter from NHS England.

Dr RP said that the use of The Hastings Centre for vaccination was ceasing. Vaccinations which might previously have been administered there were now taking place in the Town Hall building in central Hastings. The 2022 /23 flu vaccination programme would start in September. Arrangements for that would become clearer in July / August.

Dr RP said the good news was that the vaccinnation programme had been successful nationally and locally. That was demonstrated by the relatively low number of current hospital admissions of patients with Covid (635 for all of East Sussex, including Brighton) at a time when infections were still high. (Earlier in the pandemic, there had been over 2000 admissions.)

HW asked whether the figures for hospital admissions were for those admitted 'because of ' Covid or 'with' Covid? Doctor RP said the figures were for all those who tested positive whilst in hospital. There were relatively few in hospital currently with severe Covid related breathing difficulties. Unfortunately, depite best efforts at infection control, some patients - whilst in hospital for other reasons - did catch Covid. The continuing need to segregate Covid infected patients in hospital was a significant factor in the on-going pressure on hospital trusts.

Dr RP said that anti-viral treatments had now been authorised for use by the NHS in limited circumstances for those who were severely immuno compromised, etc. The treatments were very expensive and were not and would not be available for general use. A referral system was in operation for those most at risk who had been identified by the CCG in liasion with surgeries. Treatment would either be in hospital or at home. Those who were identified as being at the most severe risk from Covid would be offered a fourth vaccination. However, there were no current plans for fourth vaccinnations to be offered immediately to all over 75 year olds (as had been suggested at one time in the media). Dr RP said the current thinking was that a fourth dose of vaccine would be offered to people progressively by age groups in the autumn. How that would be done remained to be decided.

**CQC inspection:** Dr RP said the CQC had conducted an inspection of the surgery by telephone on 24 February. That was part of their current normal arrangements for monitoring surgeries. Face to face inspections would only take place where analysis of online data, the telephone conversation, or some other matter, indicated that something might be unsatisfactory. Dr RP was pleased to report that the CQC had been satisfied with their telephone conversation and, unless some new matter arose, the next inspection would be in January / February 2023. The CQC had been satisfied that the surgery had all necessary policies and protocols in place and that arrangements for staff training, safeguarding, etc were proceeding as they should. The CQC had been satisfied that the surgery had improved its infection prevention procedures and had been following national guidance. The CQC continued to be concerned nationally about the extent of opiod prescription, but were satisfied with what the surgery had been doing on that matter. A review was current into anti coagulants and their monitoring.

The CQC had welcomed the surgery's successful work on both the Covid and flu vaccination programmes. Targets had been met or exceeded; as had targets for cervical and bowel cancer screening take up. The CQC had been satisfied that the national screening prgrammes had been promoted by the surgery by notices in the waiting room, by on-line posting and by direct contact, where that was required.The CQC had noted that the surgery actively sought feedback from patients – forms were available in reception and a box where completed forms could be submitted was in the reception area. The CQC had welcomed that the PPG had continued to meet regularly and was contributing to the surgery's success.

Members were very pleased to learn of the CQC's satisfaction.

**Surgery arrangements:** Dr RP said the surgery doors were now open for people to come in to book an appointment, make enquiries, etc. It was preferred, however, for appointment bookings to be made by telephone. Many appointments were being conducted over the telephone and the feedback had been positive. In many circumstances a telephone consultation met everyone's needs more efficiently than waiting for a face to face appointment. Dr RP emphasised though that face to face appointments had continued right through the pandemic and would continue where those had been requested and were needed. The booking system was working well. Morning appointment bookings were being offered. (Not though 'walk in' face face appointments as the surgery had offered pre pandemic.)

The nurse presciber, Sarah Birch, was taking telephone consultations all days, apart from Thursdays, between 8.50 and 6.00 pm. Another nurse prescriber was available on Monday mornings, 9.00 until 1.00; and two more half days Wednesday and Friday, and under the 'extended access' arrangements between 8.00 and 1.30 during the winter. Additionally appointments were available every Monday evening between 6.30 and 8.00.

Members were very pleased that the surgery had been able to make these very welcome additional arrangements.

**Next meeting:** Wednesday 22nd June 2022 at 5.00pm was agreed. After discussion it was agreed that this would be again a virtual meeting conducted via 'Zoom'; but the possibility of reverting to face to face meetings subsequently would then be discussed.

The meeting concluded at around 5.40 pm