**PRIORY ROAD SURGERY**

**PATIENT PARTICIPATION GROUP (PPG)**

**MEETING ON 20 SEPTEMBER 2023**

**Date:** Wednesday 20 September 2023

**Meeting Commenced:** 5.30 pm

**Members Present:** LV

 HW

 GM

 Dr RP

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

**Surgery telephone system:** Dr RP asked how members had experienced the new telephone system, referred to at the previous meeting? Members reported that they had not had any particular problems, but had only had limited involvement. HW suggested that it would be worth hearing from reception staff. Dr RP went directly to enquire. Staff advised that there were problems, the system was not working properly. An engineer from the provider had been out to inspect and the system had functioned for a while and then persistent proplems had developed.

Dr RP was surprised the problems had not been brought up in staff meetings. The system was costly with significant monthly charges as well as installation costs. He would discuss with the practice manager and seek a remedy with the providers.

**Building work:** Dr RP said that he was still in discussion with ICB personnel about the plan for a new ground floor consultation room. A new issue had arisen about the provision of IT facilities in the room. There were active discussions with the ICB's IT department. Matters were complicated to an extent by the NHS wide move away from desk top computers (mentioned at the last meeting). There would still be a need for the new consulting room to have a docking station and monitor. The ICB had been notified of the surgery's requirements.

Members were dismayed that it was taking so long to get the consulting room project started. Dr RP said the ICB were anticipated to provide 70% of the costs, but it was not clear how the final costs would be divided. The contractor had still not been appointed. The quotes which had been obtained – now quite some time ago – would need to be revisited because of inflationary costs. The ICB had accepted the principle of that.

Members appreciated the urgent need for a ground floor consulting room. The stairs to the upstairs consulting room were steep and a clear hazard for patients with mobility issues. Dr RP said the ICB had been made aware of this. The surgery made every effort to see patients for whom the stairs posed a dificulty downstairs, but there were obvious problems when the doctor's room and nurses's room were being fully utilised.

Members hoped that the bureaucratic hurdles could be overcome and that work on the ground floor consulting room could be done in this financial year, But, as Dr RP explained, winter was not the best time for building work because of higher patient demands and cold weather,

Members suggested that the surgery should consider bringing the problems with the project to the attention of senior figures within the ICB. Surely the ICB should have structures in place to facilitate essential projects such as this within a reasonable time frame and not – as it appeared – create endless 'red tape'?

**Patient access to notes:** At the last meeting it had been reported that patients could access information, order repeat prescriptions and so on through the NHS app and that further developments were underway to allow patients fuller access to their records.

Dr RP said the upgrade would go live from 1 November. Only 'new' records (from the upgrade date) would be available for patienjt access, initially at least.

There would be obvious benefits for patients who would be able to see at a glance blood test results, scan results, confirmation that the surgery had made a referral to a consultant and so on. However, the changes did throw up potential confidentiality and security issues, to which the surgery had to be alert. One such area related to children, where one parent might be providing information about the child or home circumstances which needed to be kept confidential from the other parent. HW said she was aware from her own experience that schools had systems in place to deal with such situations. Dr RP said the surgery would look to address the issues which the changes would inevitably throw up as they developed.

**Flu vaccination:** Dr RP said the surgery would be holding a 'no booking required' flu jab clinic between 9.30 and 12.00 on Saturday 23rd September and again on on Saturday 30th September. Those eligible had been invited by text to attend or, alternatively, to make a booking for another day.

**Covid vaccinations:** Dr RP said the Primary Care Network (PCN) had come together again to make arrangements for an autumn covid vaccination round. The venue had not yet been decided – possibly the Town Hall, as had been used in the past, or another community facility in the town centre. Those eligible for vaccination would be the over 65's, the clinically vulnerable immuno suppressed and those in a household with someone who is clinically vulnerable / immuno suppressed..

**Next Meeting:** The next meeting was agreed for Wednesday 13th December at 5.30 pm at the surgery.

The meeting concluded at approximately 6.15

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