**Dr.D.Colvin Dr.B.Isinkaye**

**Abridge Surgery PPG Meeting**

**Wednesday 20th April, 2022 1.30-2.45**

**Place: Abridge Cricket Club**

**37 Ongar Road,**

**Abridge,**

**Essex.**

**RM4 1UH**

**Tel: 01992 812961**

**Minutes**

1. **Introduction**
2. **AOB**

**Representing Surgery; Monika Smith, Jacqueline Pover, Angela Vane**

**Patients:**

**J. Dear,C.Mulchrone,D.Weir,B.AdmonDson,A.Middleton,S.Wise,T.Marns,K.Clark,W.Collins,D.Day,**

**M.Knight,S.Simpson, D.Gaynor, M.Frankfurt, L.Dekeyzer,C.Dekeyzer, R.Russel,M.Austin-Pugh,**

1. ***Introduction****-*

* *Monika introduced herself, starting with joining Surgery in February and achievements to date(a). Monika discussed surgery protocols and running of surgery(b) and future plans for surgery (c).*

***A****, Winter pressure appointments have been introduced during the months of January to March (333 appointments have been fulfilled in comparison to last year’s figures) and there are further appointments being introduced through April until end of June (39)*

***B,*** *Surgery currently operates on appointments being released at 8 am, these appointments are telephone appointments at present. They start at 9 am till 11;10 am, from there there is an hour of F2F slots which are filled by the GPs for examinations for patients that need it. Between 12:00 and 13:00 there is a lunch when lucky, most of the time GPs use this time to go on home visits as our practice boundary is vast and it is very lengthy to get from one patient to another. These normally finish at 14:00 pm. Then the GPs deal with repeat prescriptions, which is not just signing prescriptions, they need some reviews and to make sure that patient has had BP, Bloods and necessary checks which could affect taking certain drugs and to provide the care we have signed up for with NHS England. Afternoon appointments are released at 2 pm at present. These start from 4 pm until 5 pm with an hour of F2F slots thereafter for patients needing examinations. We have half an hour to clean the surgery before closing to abide by the CCG infection control protocols. (open to discussing at later point about going ahead with appointments)*

*Repeat prescriptions are requested in writing, Monika gave an example of why that would be:*

*(elderly patients phones in for morphine tablets but means warfarin tablets, both sounds similar and are for different things entirely. We will carry on with requesting prescriptions in writing but, are also discussing options of emailing requests over, so patients do not need to make a journey to the surgery with the bit of paper. Patients can request prescriptions on the SYSTEM ONE app. However, it can be difficult for patients to request on behalf of their elderly relatives. Hence the discussion about emailing requests in.*

*C, the surgery has applied for funding to introduce another clinical room in the end room, which at the current state is not sufficient to use as clinical room. It needs a sink installed. We need 3 quotes which need to be submitted to CCG. Monika has applied for funds from CCG but still needs two more quotes to proceed. (suggestion of PPG members could find local firms to do this for us?) We also tried to apply for funding for a sign for the surgery with no success and for a defibrillator to be installed with no success.*

***2.AOB***

* ***Patients discussed:***
* *Question has been raised about appointments, as to what has happened to the surgery as the appointments are not sufficient for the population needs. Reply: surgery has grown in population as the village is growing, we also cover Staplefords Abbots and surrounding area, not only Abridge Village. The surgery is the same size without being able to expand. However, we are trying to solve some issues with room hopping and changing our admin room to clinical room. On Wednesday we are introducing another GP, so there will be further 20 appointments a week.*
* *F2F appointments, pre-bookable appointments, on-line appointments, and Medical appointments question has been raised- The surgery is reviewing these, as we still have no clearance from public health about social distancing in the waiting room, it is very difficult to oblige with these as the waiting room is very small. Once we have the all clear that we no longer have to social distance in our waiting rooms, we will probably open for F2F appointments. However, we are in discussion with GPs about having afternoon appointments being pre-bookable, so the patients will not be ringing in the afternoon at 2 pm for appointments as the capacity will be the same, however the availability will be pre-bookable. These appointments could be made available on-line. But we are processing the steps and trying to cover the demand. Hopefully we will introduce these changes in May. Medical slots will be introduced in May but a very limited amount as it could affect our appointments availability.*
* *Patients have raised issue about availability to get through on the phone at 8 am and 2 pm- in our opinion these show the demands which the surgery is facing, we are in process of changing our telephone system at the end of May, where patients will be able to join the queue system, it will not solve the issue with the number of appointments, but it will hopefully give patients better chance of booking appointments.*
* *Is there special measures for patients with special needs re hearing etc.-yes, we do have notes on patients records as to, housebound (for prescription requests) or hard of hearing (needs F2F appts only) if the patient presents to us their needs, we do generally try to oblige. Patient needs to speak to the surgery and see what we can do. We cannot oblige with all requests but generally are helpful withing our capacity.*
* *Comment has been made that surgery is “dated looking”- as the building is set in a style, we do make sure that we update our surgery as much as possible, we are limited by the structure. Patients were informed that all the staff are trained to give the best available advice and up to date training is given. The service is provided by an individual who is highly trained and pride themselves in their work, not by the building. Our surgery is lucky that we have stable GPs which know the patients as individuals and not as the bigger organisations in which patients are numbers and are seen by a different person every time.*
* *Errors in prescribing (eye drops alternatives for items)- yes, we do make errors, unfortunately these errors are not something we pride ourselves on. We accept that making errors is not very professional. We are generally aware of errors being made and we do discuss these at our meetings, as a learning opportunity for our staff. Please bear with us, as we are doing our best, given the circumstances. Apologies are given to affected individuals and we do try to avoid mistakes.*
* *Monika addressed the Abridge Village on the Facebook Group and it caused offence to residence in Stapleford Abbotts- apologies to those patients, it was not meant with any ill intentions. It was my oversight, and everyone registered at the Abridge Surgery is welcome to join the PPG.*
* *Patients questioned pharmacy help and how much can they offer? Your Health magazine was very helpful which is provided by Theydon Bois Pharmacy - each pharmacy has different services to offer. They do change on a yearly basis depending on which enhanced services are on offer. We do offer a service which is called CPCS- it is a referral to local pharmacies with minor ailment issues. We have been provided with list of ailments the pharmacy can help with and once referral is in place, the pharmacy contacts the patient within 4 hours. We would strongly advise patients to find out which services are available to them by their pharmacy, as it could ease the pressure on the GP appointments.*
* *Why do prescriptions take 5 working days to process?- just to clarify, our Inhouse prescribing policy requires 2 working days for prescriptions to be issued it is pharmacies which state that prescriptions take 5 working days. It is 2 days for the surgery and 3 days for pharmacy. As it has been mentioned earlier, many prescriptions need to be checked before being issued for Blood pressure checks and annual blood tests or any other checks which need to be in-line with West Essex CCG guidelines. It is a lengthy process. We have an inhouse pharmacist who provides medication reviews every Wednesday and Thursday. These appointments are over the telephone. We strongly urge patients to make sure that Medication reviews are done by the practice as it does speed up the prescribing progress. We are currently reviewing how we can speed this service up, by introducing regular recalls for certain medical conditions.*
* *What is happening to Diabetic annual review recalls? – patients queried when are they likely to be called for the diabetic annual reviews as Gina used to send a letter. Gina retired in December and our Nurse Jacqueline has taken up the diabetic care. Jacqueline and Monika are working through the Diabetic list and inviting patients for their reviews. Invitations will be coming out shortly. Just to clarify that diabetic reviews are done annually unless otherwise specified due to result. Patients are invited to see the nurse post blood test appointments. Usually this is F2F appointment.*
* *Spirometry- we are not proceeding with spirometry at present as this is a machine which is used by multiple patients. We are awaiting further guidance as to how do we proceed with this test. Monika will hopefully have an answer in the next meeting.*
* *There is no Bus service from Stapleford Abbotts to the surgery- Mr Russell has pointed out that there is no bus running from Stapleford Abbotts to the surgery. It may be difficult for the patients to attend their appointments due to this issue. Suggestion of using the Samaritan service was put forward.*
* *Monika asked if patient participation group could help with the sign for the surgery as sometimes the ambulance goes past us. Alisson Middleton has volunteered to see if the Parish Council could help. Since the meeting Alison has been in touch and said that Parish council will not be able to help, but we could see if we can get a fund raiser, maybe in June or July’s village gatherings? Maybe do a tent with face painting on behalf of surgery or decorate the surgery for the Queens Jubilee celebrations contact Hazel Moore or Susan Simpson.*
* *Patients asked what the policy’s with telephone appointments as some patients are unable to answer very quickly and patients have been advised of 2 ring policy****-*** *clarification,**our policy**has been discussed in the last clinical meeting****, t****he GP calls for the minimum of four rings half an hour apart. The GP will try to contact the patient twice (2 ring) half an hour apart. Please make sure that your phone accepts private phone calls as some GPs work remotely due to space limitation.*
* *Patient raised an issue that some GPs work differently from others.**Some patients prefer to see the Locum GPs to our Practice Partners. They find that they have more opportunities to be seen F2F.Sometimes the GP maybe be abrupt, or not fully supporting. Everyone has the right to book appointment with the GP of their choice. Hence having the opportunity to book with different individuals. We do try to oblige with patient’s requests however it is very challenging at times.*
* *Patients questioned why some access on on-line services are not available to them on their app- informed different level of access needs to be granted. Please contact the surgery and ask for Laraine or Monika for the level of access to be granted.*
* *Monika has asked the group if we could meet every to or three months and if she could have volunteers to be chairs, for minutes taking and conversations between PPPG and practice. – so far there have been two volunteers.*

**PROVISIONAL DATE OF NEXT MEETING 20TH OF JULY at 13:30 venue to be confirmed**