## <u>Claremont Clinic PPG</u> <u>MINUTES & AGENDA</u>

Date: 14<sup>th</sup> of May 2022 Time 4pm- 5pm Location: Microsoft Teams Chair: Chanel Radford (Social Prescriber) Minute taker and Support: Shamina Akhtar (Social Prescriber)

Attendees:

Present	
Staff	Patients
Chanel Radford (CR)	(MS) (BS)
Shamina Akhtar (SA)	(TL) (YB)
Dr Joyce (CJ)	
Apologies:	(PM) (CK)

	Agenda Items:	Action:
1	Introduction	
	New attendees:	None
2	Review of previous minutes	
	Update on staff waiting time apps and percentage	
	Waiting time: varies as appointments come via telephone and online.	
	GP: 3-5 days	
	Nurse: 2- 3 days	
	GP appointments : 30% + f2f vs 70 telephone	
	Nurse/HAC appointments : 100% f2f	

3	Short discussion about flexible working with telephone and face to face appointments. TL: I'm still upset about not being informed about the changes to appointments. CJ: Things are changing very quickly so it can been hard to keep up with things. Everyone understands and agrees that	
	<ul> <li>this is the new normal way of working.</li> <li>TL: I would like to meet new GPs.</li> <li>CJ: This will be hard as most New GP registrars stay for 6months. We can see if a video consultation would be preferred when a new staff member will be contacting you.</li> <li>MS: I understand the PPG to be a place for patient's voice.</li> </ul>	Discuss with management if video consults can be used for new GPs/ Staff? <b>Update:</b> Video consultation take longer and there can be issues with connection, so this will be unlikely for every new member of staff. If the GP feels its suitable then they will consider this option.
4	BS: agrees Updates:	
	CJ: Dr DeSliva will be leaving in August 2022 and Dr Ahmed will be stepping up to join as a partner. CR: It will be sad to lose Dr DeSliva, this is good news for Dr Ahmed.	
5	Update from Deepika Shergill	
	PCN Clinical Pharmacist Community pharmacist consultation service	Ill feedback notes to Deepika
	CR explained how the service works. " The reception team can refer patient's to their local community pharmacist of their choice and be consulted with the	

pharmacist for any minor ailments. The pharmacist then contacts them within 24 hours for a consultation and will advise on next steps e.g. self-care advice, a product to buy, or referral to GP or other service like 111 or A and E, where appropriate. There is no fee for the consultation, but if patients choose to buy the product recommended by the pharmacist, they will have to pay for it regardless of age and prescription exemptions." Has anyone used these services feedback? MS: What is the point of this service? CR: The idea is that patient who present with minor ailments can be seen quickly	
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balance of relevant information.	
No one has used this service	
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AUD:	
	Discuss idea with management
MS- Can we improve the outside of the	
	Update:
plants or anything else?	It sounds like a good idea however we have
	had flowers at the front previously which kept
CJ- That's a good idea, It will be nice to get	
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snould discourage litter.	so this would difficult to manage.
MS. I will check if it will qualify for the	We are happy to have volunteers to do any
	fundraising projects outside or assist with
know.	rundraising projects outside of assist with
some plants and nature at the front and it should discourage litter. MS: I will check if it will qualify for the	getting stolen. The front gate was also stolen so this would difficult to manage. We are happy to have volunteers to do any
	<ul> <li>without needing input from a GP/Nurse.</li> <li>TL: I would like my medication to be on my records. I'm not a doctor so I don't want to take anything that I'm not sure of.</li> <li>CJ: The pharmacist are well trained and skilled to support all patients. They are often underutilised. Not all medication needs to be on patient's record, it will be a balance of relevant information.</li> <li>No one has used this service</li> <li>AOB:</li> <li>CJ- That's a good idea, It will be nice to get some plants and nature at the front and it should discourage litter.</li> <li>MS: I will check if it will qualify for the community assembly funding and let us</li> </ul>

<ul> <li>CJ: I will run it by the partners. It sound like a nice idea to get some plants and nature at the front.</li> <li>CR: Great idea, I'll be happy to support with recruiting volunteers if were successful.</li> <li>CR: I wanted to inform you all about a recruitment event this week Friday, run by NHC at Stratford Townhall from Friday 10am -5.30pm. It's for different job opportunities in general practice.</li> <li>I'll send the details via email, please share</li> </ul>	organising leaflets in the reception or do some weeding. Email flyer
<ul> <li>If it send the details via email, please share with friend, family and across your networks.</li> <li>Next month's meeting</li> </ul>	Date: Monday 11 <sup>th</sup> July 2022 Time: 4-5pm Location: Microsoft Teams Chair: Chanel Radford (Social Prescriber) Minute taker and Support: Shamina Akhtar (Social Prescriber)
<ul> <li>TL: I would like to meet F2F. This would also be a nice change to say bye to Dr Desliva.</li> <li>CR: Ill discuss with management. This might not be likely due to space.</li> <li>MS: I would like an email reminder on the day as I almost forgot about today's meeting.</li> <li>CR: Moving forward Il send out a reminder email and text on the day and continue to send the invite link two weeks before.</li> </ul>	<ul> <li>Agreed agenda:</li> <li>1. Review previous minutes and new updates</li> <li>2. National data opt out</li> <li>3. Gardening update</li> <li>4. AOB</li> </ul> Update: Unfortunately, due to space we will not be able to plan face to face sessions yet. Desliva does not want to plan any gathering but feels very grateful and supported.