

**Claremont Clinic PPG**  
**MINUTES & AGENDA**

**Date:** Monday 7th August

**Time:** 4-5pm

**Location:** Claremont Clinic

**Chair/ CO- Chair:** Michael / Tarsem

**Minute taker and Support:** Chanel/ Shamina (Social Prescriber)

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**Attendees:**

<b>Present</b>	
<b>Staff</b> Chanel Radford (CR) Shamina Akhtar (SA) Dr Joyce	<b>Patients</b> (MS) (ML) (TL) (CK) (BS) (JB)
<b>Apologies:</b>	(VP)

	<b>Agenda Items:</b>	<b>Action:</b>
<b>1</b>	<b>Introduction</b> New attendees:  The practice building works have been pushed back again. This will now start 18 <sup>th</sup> of September 2023.	None
<b>2</b>	We reviewed the GPs list of expectations/ experiences from patients: <ol style="list-style-type: none"><li>1. Lateness and giving a full list of concerns. This causes a knock-on effect which impacts the next person's time.</li><li>2. Expectation of patient to be on time or within the 15-minute window.</li><li>3. Spending time complaining about how hard it is to get an appointment which wastes time.</li><li>4. Turning up when symptoms have gone. Wasted the appointment. Patients should cancel unwanted appointments.</li><li>5. Asking GP to interpret hospital tests and scans and provide give specialist opinions. This puts GPs in a difficult position as we are not trained for this. Also complaining about delays in</li></ol>	

	<p>secondary care. Patients should discuss these concerns with the right departments.</p> <ol style="list-style-type: none"> <li>6. Unrealistic expectation. Patients save their priority concern for the last minute of the appointment.</li> <li>7. GPs advised making a list of priorities before turning up. This is also the same with social prescriber's appointments.</li> </ol> <p>TL: If a nurse in the community clinic can make an urgent referral with high priority, why can't GPs send referral as high priority?</p> <p>CJ: It's the GPs responsibility to make a clinical decision. If everyone is a priority no one would be seen.</p> <p>ML: Can we get a pie chart to show data for 3 months of missed appointments, late, cancelled, and seen appointment. This could be shown on the screen.</p> <p>CR: Ill raise it with management. Also how the data can be displayed and we can have a vote.</p> <p>MS: I have seen this and think it will be a good idea.</p> <p>CJ: After covid one GP practice went all face to face appointments and the DNA rate was 25% in 1 week.</p> <p>BS: I get a lot of reminders for my appointments.</p> <p>CJ: The reception are the front line and receives a lot abuse about this and we have to be careful. It is very hard recruiting receptionists. We have red panic button if patients are aggressive which not used often.</p> <p>MI: Do patients forget that you're a GP?</p> <p>CJ: We can use advice and guidance and receive a message in a couple of weeks. I'm confident to say if don't no.</p> <p>JB: I don't know who my name GP is</p> <p>CJ: You have one but you will never see them. Information/care is shared.</p> <p>MS: We should discuss the reception expectations' next. (all agree)</p> <p>Michael: Can we have a receptionist attend and discuss their 10list of expectations/experience</p>	<p>Ill check with management.</p> <p><b>Update:</b> The practice building works will start on 18<sup>th</sup> this will be the priority focus. The data can be shared after this.</p> <p>Advice and guidance waiting time frame has increased</p>
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	<p>Newham has less GPs than Tower Hamlets</p> <p>TL: How will we know if it's a junior or senior doctor? I was told by reception that a Jr doctor only sees f2f.</p> <p>CJ: We have 4 GP partners 3 salary partners. PAs report back to GPs to help build up experience.</p> <p>ML: Why do we have to come to collect blood test forms JC: A system should be in place soon.</p> <p>Ashia's question: Can we reduce the waiting call time to a 2hours window?</p> <p>CJ: If this is key theme we can raise with management. Further discussion needed.</p>	<p>Agreed as next agenda point. Invite to next meeting.</p>
3	<p><b>Pros/ Cons of PPG</b></p> <ul style="list-style-type: none"> <li>• Face to face meetings work very well</li> <li>• It has improved the patient's relationship with GP/practice.</li> <li>• We feel confident to share are concerns and opinions.</li> <li>• GPs feel's it's important to hear patients' views so we can improve.</li> </ul> <p>Con:</p> <ul style="list-style-type: none"> <li>• We haven't completed one set task yet</li> </ul> <p>We discussed sharing email. All participants are happy with this.</p>	

	<p><b>Next month's meeting</b></p>	<p> <b>Date:</b> Monday 13<sup>th</sup> of November  <b>Time:</b> 4-5pm  <b>Location:</b> Online  <b>Chair/ CO- Chair:</b> Michael / Tarsem  <b>Minute taker :</b> Chanel Radford (Social Prescriber)  <b>Support:</b> Shamina Akhtar (Social Prescriber) </p> <p><b>Agreed agenda:</b></p> <ul style="list-style-type: none"> <li>• Practice updates (5mins)</li> <li>• Receptionist to join the meeting to share expectations/ experiences. (20mins)</li> <li>• Garden (10mins)</li> <li>• Patient survey friends &amp; family (10mins)</li> <li>• Close (5mins)</li> </ul>
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