



**Patient group Thursday 16<sup>th</sup> November 2017 MINUTES**

6 patients in attendance, plus Sukhi Lall and Camilla Hawkes for St Martins.

<b>Item</b>
<b>Notes from last time</b> - All items are already on today's agenda
<p><b>Staff update</b></p> <p>Dr Field has now left and Dr Sulthana Ahmed has replaced her.          Dr Oxley back at work after her sabbatical, on 18<sup>th</sup> dec 2017.          Grainne and Sara have joined us in admin team, plus Kay starting January – so admin team will be fully staffed for first time since October 2016.          Two new practice nurses joining us in December: Sharon and Shereece. We have done well to recruit ready-trained PNs as they are rare.</p>
<p><b>New Premises patient involvement</b></p> <p>The building work is going to plan /timetable.          Move will be in March 2018 – exact dates tba. We will have possession of the new premises perhaps a fortnight before the move to enable smooth change over and minimum disruption to pts. The move itself will be achieved by running a “skeleton” service for two days – based on clinical need, all pts with a clinical need to see a healthcare professional, will be able to.</p> <p>There is an opportunity for pts to volunteer to support the move and to get the new building up and running. We agreed to put out a patient update re the ove and to ask for volunteers to:</p> <ul style="list-style-type: none"> <li>• Manage the move of the book club / shelf</li> <li>• Liaise with local schools / Inkwell to get art displays in the stairways and corridors – this will need skilful management with careful decision-making</li> <li>• Write patient communications</li> <li>• Act as guides in the first weeks of the building being open</li> <li>• Anything else that they feel may be useful</li> </ul> <p>We also agreed that the move is a good opportunity to attract new members into the patient group – we should give thought as to how we can best do this</p>
<p><b>Extended Access in Leeds North CCG general practices</b></p> <p>St Martins now has a patient-facing pharmacist as part of its team ie we can offer patients an appointment with a pharmacist. (We already have pharmacists working alongside the GPs in the clinical team, but not seeing pts).</p> <p>Admin team has been booking into these appts and only had positive feedback so far. Examples of the reasons for which pts are booked; medication reviews (provided on 1,2 or 3 repeat medications; if on more than 3 meds must see our GP, usually after the Practice Nurse as part of a long term condition review); unable to get hold of a medication &amp; wanting an alternative; wanting an alternative formulation (eg capsules instead of pills) ; general advice about medications or has read media reports about a medicine they are taking .</p> <p>Shortly we will also have a MSK specialist (physiotherapist) working as part of the team, also for admin tem to book pts direct into without having to first wait for a GFP appt.</p>
<b>Dates of future meetings – TBA, Sukhi to send round</b>