**QUANTOCK MEDICAL CENTRE PATIENT PARTICIPATION GROUP**

# MINUTES OF MEETING HELD AT NETHER STOWEY LIBRARY

# Wednesday 21st June 2023

## PRESENT

Helen Stacey (Practice Manager & Chair), Sarah Bennett (Village Agent), Maggie Harlow, Kate Hope, Elisabeth Woolcock, Bruce Roper, Sally Friend, Sue Hawker, Helen Every, Geoff Every, Kate O’Bryne, Ian Faris (Minutes)

**APOLOGIES**

Diane Faris, Sue Sidery, Terry Binding

## NEWS FROM THE QUANTOCK MEDICAL CENTRE

In Diane’s absence; Helen welcomed the group, and opened with an update of new staff and what’s happening at the Medical Centre.

We are linked with the Bridgwater Bay Primary Care Network (PCN), a recap was given that all new funds to Primary Care i.e. GP practices will now be given to PCNs rather than practices, with the requirements of what these funds are allowed to be spent on. The Practice needs to work with the PCN to meet set targets given by NHS England and then work with what new roles are allowed to be funded.

So far the practice has been able to increase its staffing with a First Contact Physiotherapist (Paul) (Tuesday afternoons) who is able to patients with new problems; musculo, orthopaedic problems that have not been diagnosed by a GP previously. They are able to review and diagnose the patient, offer joint injections, physiotherapy, links into Orthopaedic team, etc rather than going via the GP and having to wait a number of months then for physio and support.

The Mental Health Worker (Sophie) is on Maternity leave now so any patients requiring counselling support or mental health support will be referred to the Somerset Foundation Trust, talking therapies etc there is a 24 hour support line for adults available 01823 276892 support@openmentalhealth.org.uk

Health Coaches are available on a Wednesday morning. Lou has been off recently with a Knee operation but will be seeing patient face to face from July again. He is able to offer motivational support to patients needing to improve mobility, lose weight , improve lifestyles, looking wholistically. We have had positive feedback from patients who this experience has been life changing.

We have recruited a General Practice Assistant (Sharon) to support the GPs in providing Blood tests, ECGs, supporting admin processes for the GPs and Practice.

A Safeguarding / Admin and Dispensary Role (Molly) to support the Practice Team in these areas as the workload is ever increasing.

We have our Treatment room nurse (Sophia) going on maternity leave in July but will hopefully re-join us again afterwards. We will see how we manage for appointments.

**Building issues**: The building is owned by the previous GP Partners wives, so it is very difficult to invest in the building further than we already have over the years. The space is getting very tight with more staff and services, and we are now at full capacity.

Bruce commented that in recent building plans submitted to the parish that the NHS had commented ‘that there was sufficient capacity to cope with additional residents. Helen clarified that the situation is very ‘chicken & egg’, we cannot increase staffing and GP s unless there is additional funding, and that funding does not come in unless you have increased numbers of patient registering at the practice.

The Practice will always grow with its population; as it has expanded over the decades to provide a service. The main issue will be recruiting additional GPs and nurses when needed as there are not many around or many coming into these professions across the country. Helen will be looking at succession planning in the next year with the Somerset Integrated Care Board.

With regards to premises there is a Somerset GP estates review being completed now and it is known that all premises in Bridgwater are to capacity with little room for expansion.

State of the Building was discussed – uneven paving slabs on way in to building are monitored and re-laid as and when required, a quote for tarmac was £5-8 k is not affordable.

Cracks that appeared last year due to drought are still under insurance and currently being surveyed, waiting to hear the outcome and how this will be rectified by the insurers, some concern that the dry weather we currently have will be increasing this problem. Helen to continue to monitor.

Issues with large campervans parked on the entrance to surgery make visibility very difficult coming in and out of the Practice – Helen said she would monitor this and leave notes for campervan owners and politely ask them to park elsewhere.

## FFT FEEDBACK

Helen circulated the Friends & Family Test feedback results for the first half of this year.

The principal issues seem to concern: -

a) Dispensary opening times/contact ability - discussed: it was felt that the dispensary opening collection times were adequate 10-12 & 4 – 6pm and Sat am, patients can always ask at reception if out of these hours.

With regards to patients requesting repeats there are many different ways patients can do this, phone lines are open morning and afternoon, by email, online, in person, etc

The number of scripts requested each month have dramatically increased and staff need the time to put medications together, stock shelves, etc and hence need for dedicated times without interruptions for them to do this. All other pharmacies across Somerset open at set times and have restricted access and availability.

b) privacy at reception - with reception triaging calls makes privacy difficult if patients wish to speak more discreetly, advised to ask to talk in a quiet are. The lay out of the building and waiting area does make this difficult – if anyone has any ideas please talk to Helen.

c) soundproofing for nurses’ consulting/treatment rooms - discussed and various things have been tried in the past but have not always worked, difficult because of the age of the building and layout. Music in waiting area might help this but need a PRS licence – to be considered.

d) telephone waiting times – we have one receptionist on and if they are busy on a call, they are unable to do more. We have decided to keep the telephone system simple rather than a queue system as patients on hold can find this more frustrating.

e) Drinks Machine in waiting area: we would like to avoid this for several reasons as this will be a great expense to the practice in time and funding. Increase waste going to land fill – cups. The general feeling is we should all be aware of hydration and carry a reusable water bottle. If a patient does need a drink this will always be provided for them on request. Patients in general will only send 30 mins to 1 hour in the practice.

f)A Patient had commented that there were no available nurse appointments one week. There was a reminder that whilst sometimes there may be no nurse appointments available in that week, generally patients are seen within a week or 2 weeks and Helen feels that this is exceptional given that in most practices patients may wait 4 – 6 weeks to get an appointment. If someone urgently / clinically needs to be seen, they will always be accommodated; however that may mean patients booked in have to wait to be seen depending on the urgency and complexity of what is required.

It was agreed that patient expectations have increased and will be difficult to maintain and whilst we will try to make changes and accommodate to improve services, we are unable to meet everyone’s expectations.

## ANY OTHER BUSINESS

Bruce asked about safety and contamination of any medication that required split packs, and putting tablets in to bottles. Helen confirmed that this was not ideal, and they try to avoid it, but depends on stock available. All staff have to follow strict protocols, cleanliness, and making up medication, stock rotation and checking shelves regularly for out-of-date stock etc. Quantities of medications to reduce incidence of slit packs could be discussed with the GP if this is a regular issue.

Patients were reminded that they are able to bring any unwanted medication they have previously received from the practice back to Dispensary for safe disposal.

## NEXT MEETING

13th September 2023 10.15 am Library Nether Stowey