

Patient Participation Group (PPG) Meeting – Wednesday 6th April 2016 18:30 – 19:45

Present: Dr Simon Sherwood (Dr SS) – GP at East Lynne Medical Centre
Pauline Mackenzie (PM) – Practice Manager at East Lynne Medical Centre
Dawn Lambert (DL) – Finance Officer at East Lynne Medical Centre (Minutes)
Lynsey Bessent (LB) – PPG Member Elizabeth Boyle (EB) – PPG Member
Janice Brierley (JB) – PPG Member Frank Dowdall (FD) – PPG Member
Eunice Hayes (EH) – PPG Member Roy Hayes (RH) – PPG Member
Gillian Lingwood (GL) – PPG Member Jacqueline Lyons (JL) – PPG Member
Brian McKeown (BM) – PPG Member Kaushik Patel (KP) – PPG Member
Alan Penney (AP) – PPG Member Peter Phillips (PP) – PPG Member
Sylvia Phillips (SP) – PPG Member Penelope Read (PR) – PPG Member
Kristine Stacey (KS) – PPG Member

Apologies: James Hooker (JH) – PPG Member Sally Hooker (SH) – PPG Member
Tina Porter (TP) – PPG Member

Chair BM opened the meeting by thanking all parties for attending.

BM asked the group if they had all received the minutes from the meeting on 21st January 2016 and if they had any queries to raise from them.

No queries were raised; therefore BM stated the minutes had been passed.

PM commenced by explaining to the group, we had received our draft CQC report but that it had been very disappointing, bearing in mind Dr SS works 18-24 hours every weekend in an attempt to maintain the workload. She stated the report had factual inaccuracies and some areas had been judged unfairly. PM reported that the draft CQC report states the surgery's adverse incident reporting system was poor, however she assured the group that there were robust systems in place but these did not meet CQC expectations.

PM advised the group that some problems highlighted had been actioned straight away.

The draft report criticises the surgery for not producing minutes and agendas for meetings and for not having a legionella risk assessment in the format they would like. The surgery has now paid for another legionella risk assessment, which has shown the same results.

PM stated the draft report states we have no PPG and that we do not listen to feedback!

PM reinforced how quickly the surgery had acted to put things right and action many of the points. She advised the group that CQC were meeting with the surgery on Wednesday 13th April to go through the report and that we had engaged a professional team of helpers to assist us.

SS stated one point raised in the draft report was GP of choice, which he stated was unrealistic when we had been unable to recruit. He said this was an essential problem which had taken a great toll of staff.

EH asked if the group could write to CQC.

PM said that would be appreciated.

AP asked what would happen if the surgery doesn't turn it around.

PM explained how CQC would be satisfied if we could evidence improvements on the next inspection. She stated the surgery is likely to be placed into special measures if no signs of improvements were seen, they could take away the registration.

SS stated we would not be closed but procured out to an alternative provider, which is likely to be locum lead. He stated the surgery is currently offering £875 per day for locums but has had no takers.

BM advised the group that ACE had taken over the surgery in Frinton and had commissioned locums from the area.

SS explained how the surgery can sometimes obtain a locum from Southampton and one has even been flown over from Italy, which the surgery paid accommodation and travel expenses for. He stated the doctors at East Lynne were working twice as hard for little recognition. He stated morale at Colchester Hospital was very low and that CQC had been very destructive, affecting the mental health of some colleagues. He explained to the group that he had done everything possible to protect the surgery but that he could not do any more.

BM suggested CQC had to justify their existence and finds faults in order to justify the service. He wondered if their agenda was to destroy morale for staff. He questioned who hold CQC to account or who judges the judges? He suggested writing to CQC either as a group, a group of PPG's or individuals.

AP asked if it was just Clacton affected by CQC.

SS stated there were 2 in Clacton and 1 in Harwich, but that is was not possible to have the same outcomes as comparable nationally. National standards do not take into account recruitment or other non-consistencies across the country. He advised the group the surgery had been talking to specialists regarding pulling in a new partner or organisation.

PPG member asked if they have to wait for the report before responding to it.

SS stated the report was so inaccurate it could not be shared at present and that the level of criticism on a system you have no control over has been unexpected.

EH stated if you do not fit an agenda, you are forced out.

BM stated no one knows what the agenda is.

AP suggested privatisation via the back door.

PPG member stated how much of an eye opener is was to be a part of the group and how the general perception is that most patients are unaware of the situation.

SS advised the group another local GP had resigned under significant stress and that there were thoughts of mass resignation as the service was untenable. He explained that being put in special measures attracts money and the new organisation could create a stronger service.

PP asked if locums have to do the same as regular GP's and if not will he come back as a locum.

SS said locums can pick and choose the jobs they want to do due to supply and demand and that he was considering some time out urgently but there were glimmers of hope and possible move of premises. He stated he may be part of the plan but it was too early to know yet.

AP stated there were many rumours out there and the Gazette has been asking for a report.

PM explained to the group there had been many hurtful comments following the press release. Comments raised on NHS Choices are responded to but reception staff are subject to verbal abuse. PM said it was interesting to read the article above ours, whereby Thorpe surgery have just begun receiving verbal abuse. She said it made her realise how complacent we are and accept it as part of everyday life.

BM advised the group he had sent letters to the Gazette but none had been printed. He asked the group if they wanted to send a group letter or get the secretary to draft a letter.

PM stated following CQC recommendations, the surgery had put a lot of things in place already and that CQC are likely to re-inspect before 6 months.

BM asked who was paying for the help.

PM explained how the CCG had made money available to help us. She stated we were previously considered gold star and that other surgeries had been shocked we had a bad report as we had been used to pilot new services.

BM asked for members of the group to meet with him over coffee to discuss drafting a letter.

PPG member agreed to get something in the media however asked the group to consider other methods instead of the Gazette.

BM suggested James Whale at Radio 4.

PR voiced concern over what would happen if no GP's were there in 6 months.

PM explained how passionate we all are about the practice and how we had spent days preparing a response to CQC. She stated we will have GP's but may be known by a different title.

PP asked which MP's are involved.

PM explained how Dr SS met with Douglas Carswell regularly.

BM thought whilst it is good to have support from our local MP, Douglas Carwell may not be strong enough to achieve a great deal. BM stated we should not talk solely to the Gazette and should contact the Daily Mail or Telegraph.

BM stated he felt CQC were undermining surgeries and there was a meeting on 20th April at 2pm in Weeley Village Hall, to discuss genuine CQC concerns. BM explained to the group that he had met with Gary Sweeney but that it had been a waste of time, however he will mention an emergency report on the surgery at the next Health Forum meeting, which will then go directly to the CCG board.

DL stated there are many good areas mentioned in the CQC report if you read past the initial negative sections.

FD asked where new Doctors will come from.

PM stated there are likely to be doctors out there willing to help struggling surgeries.

BM advised the group they were discussing moving 3 Clacton practices to Clacton Hospital to form a hub, which in a way may be a good idea as there would be more doctors and services close together.

PM confirmed this was one possibility and that the CCG was keen to help us in order to help their bid for Central Clacton. She stated the reality was that there were not many doctors left therefore we would need to centralise what we have. The plan they are suggesting would enable surgeries to keep their individuality and could work, services being on hand if at the hospital.

JL suggested Clacton Hospital would not be big enough.

PM explained how they plan to flatten part of the hospital and rebuild it, the whole project needs to be complete in 5 years.

BM voiced concern that Gary Sweeney may retire in 18 months and the new chair of the CCG may change the plans completely. Currently there had been campaigns for 2 years to centralise to Kennedy House. Frinton Road Surgery and North Road Surgery are currently denying moving to Kennedy House despite the CCG stated they are.

LB asked if there was something the group could do to boost staff morale, as they work tirelessly.

PM said she would report it back to staff and some staff may attend future PPG meetings to meet the group.

PM advised the group she had received a telephone call from Specsavers requesting to attend a PPG meeting to do a half hour presentation regarding hearing loss and the possible link with Dementia. She asked the group to email Dawn if interested in this.

AP stated the service he has recently received from the surgery cannot be better, it has been fast and efficient.

BM suggested ACE were over stretched and had experienced computer faults and telephone calls in excess of 7,000.

JL stated patients want consistency and continuation of care.

PM said if we can establish some new doctors into the practice it will enable the existing doctors to recover. She advised the group the doctors may not be there every day.

BM suggested keeping trainees in the area.

PM advised the group that Dr Porter at Frinton Road Surgery trains and encourages trainees to remain locally. She stated it had been unfortunate people, by nature, want drama and spice and tend to focus on bad areas, however we will be trying to lift spirits by picking up on all positive areas such as the beautiful coastline and villages.

BM advised the group they will next meet on Wednesday 15th June 2016.

BM thanked the members for attending and asked anyone able to help draft a letter to stay behind to arrange a meeting over coffee to progress that. Member can contact BM by his telephone number: 01255 436977 or email address: mckeownjb@yahoo.co.uk

Meeting closed at 7:45pm.