

Patient Participation Group (PPG) Meeting – Wednesday 15th June 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)
Sheila Rogers (SR) – Registration Clerk at East Lynne Medical Centre
Lynsey Bessent (LB) – PPG Member Elizabeth Boyle (EB) – PPG Member
Janice Brierley (JB) – PPG Member Sara Foster (SF) – PPG Member
Eunice Hayes (EH) – PPG Member Roy Hayes (RH) – PPG Member
James Hooker (JH) – PPG Member Sally Hooker (SH) – PPG Member
Gillian Lingwood (GL) – PPG Member Jacqueline Lyons (JL) – PPG Member
Brian McKeown (BM) – PPG Chair 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
Pat Chamberlain (PC) – Patient Rose Goodwin (RG) – Patient
Elaine Symonds (ES) - Patient
Apologies: Frank Dowdall (FD) – PPG Member

Chair BM opened the meeting by thanking all parties for attending. He gave his apologies for inadvertently attending the wrong café after arranging to meet with some members of the group to draft a letter.

BM asked the group if they had all received the minutes from the meeting on 16th April 2016 and if they had any queries to raise from them.

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

BM explained how he had hoped to have had Nigel Grinstead from Open Junction attend the meeting to answer questions about the future of the surgery, however in his absence BM asked for a surgery update from Dr SS.

Dr SS said that firstly he would like to say a big thank you for all the patients support and that without it he could not have coped. He stated following the resignations the surgery had been promised help by Open Junction. He advised the group this was 10 weeks ago and that there had been an expression of interest from an external party but nothing in writing as yet and no concrete offer of jobs for the doctors.

Dr SS explained how staff had worked very hard to progress the transaction but that the external parties had made very little input so far. He confirmed to the group he would be leaving in 2 weeks and that instead of offers of help, there had been incessant criticism. He stated he was unsure of the grand plan and felt disillusioned that after working 100 hour weeks and asking for help, none had been given and he felt he was effectively being removed from post.

AP asked if there may be any chance of recruitment from the Barracks.

Dr SS advised the group that £20,000 had been spent on advertising, with no applicants. He stated that whilst the plans had not been declared to him, that does not mean they will be no good.

Dr SS stated the levels of personal attacks had been noticed both nationally and internationally and advised the group he was very sorry it had worked out this way but his health had suffered as a result. He assured the group that the service provided had been very safe and that no one was as cautious as he was. He stated access may have been worse as he was now seeing 40 patients a day, rather than 60 previously. He advised the group that most GP's see 30 patients a day.

AP voiced support and thanked the surgery for 16 years of fantastic service.

The group applauded in support.

BM asked if Dr Tien and Dr Halstead were leaving too.

Dr SS stated there were no clear plans yet but the other doctors had been looking for an early exit, although he could not speak for them. He thanked the group again and wished all patients the very best for the future before retiring from the meeting.

Further applause from the group as he left.

BM moved on to discuss how the surgery had been on the agenda at the Health Forum after BM had spoken with Dr SS, PM and DL last week. He stated immense surprise that for the first time ever, Dr Gary Sweeney had attended and BM was shocked that he knew nothing about Open Junction or Nigel Grinstead. BM advised the group that he needed to do a report before the next meeting but he felt he was none the wiser.

PM explained to the group that the proposal is that a new partnership is coming in, however it is progressing slower than first hoped. She clarified to the group that the surgery was currently in a period of due diligence, which was a legal process where prospective partners are investigating every aspect of the practice. She explained this was the reason Nigel Grinstead had been unable to attend and that PM and DL were avidly gathering paperwork regarding staff, assets and many other documents requested to progress the matter.

PM advised the group that Nigel had been commissioned by Pam Green at North East Essex CCG and that she was heading a transformation bid to provide Clacton with a purpose built primary care centre to enable patients to obtain care closer to home. She explained how passionate she was for Clacton and the surgery wants to be a part of these plans. She advised the group that as the doctors have resigned, the CCG are using this surgery as an opportunity to provide their vision.

PM confirmed that after the due diligence period, there would be formal documents issued.

PPG member asked if they were waiting for the current doctors to leave.

PM advised the group they wanted a smooth transition into the new partnership.

AP asked for an update regarding the CQC report as at the last meeting the practice was appealing against the ratings given.

PM explained how the CQC report is now accessible online and that as a result of the surgery appeal; one category had been upgraded from 'requires improvements' to 'good'. She stated it was still inadequate but had been softened to take into account reasons for the rating.

BM advised the group that the majority of understaffed surgeries will show the same results and that even if £100k was invested, surgeries still cannot get doctors. He acknowledged the staff all work so hard and help patients understand the problems. He felt they deserved better than the report.

BM asked what would happen if the new doctors decided not to come after the due diligence.

PM advised the group it could happen but the surgery feels they do want to and their intent is genuine. PM explained how she and DL enlightened local surgeries and Pam Green from CCG on the surgery situation and this has come as a result. She stated nothing else was put on the table and explained that Nigel had done a lot of similar work elsewhere.

PPG member asked who the new doctors were and how many would there be.

PM said the surgery did not know at this stage and there could be further Advanced Nurse Practitioners as Sister Zoe is the only one at present.

JH asked if Open Junction was an NHS company or privately owned.

PM said it was a private company.

SF asked how long before the period of due diligence finished.

PM explained that the documents need to be sent by Friday, then the practice will receive a partnership agreement allowing new partners to come on board and the exiting partners to leave. She advised the group that Dr Halstead and Dr Tien may go before their end date but that Dr Halstead may come back in the future.

BM asked what is happening with the premises, if Dr Halstead leaves, as she is a part owner.

PM stated the new partners have negotiated a lease they are happy to sign.

BM asked where the new partners are coming from.

PM said South Essex.

PPG member asked how it all fits in with the transformation bid.

PM explained that Primary Care has not moved with the times and that it may be possible to use mobile phone apps to make appointments or see healthcare records. She stated the vision is perhaps a Skype type system being rolled out.

SF asked if the Tendring hub would be in a new area.

PM said it would definitely be in Clacton and would possibly be a purpose built building. She reminded the group how Clacton Hospital and how best to us it had been talked about for many years.

BM stated there is talk of closing the Ivy Benson ward but still holding specialist sessions as they do now. He suggested there would be enough room for East Lynne, Ranworth, Old Road and Wash Lane.

AP said there was no parking though.

PM and BM agreed and confirmed this had been highlighted as a problem everywhere.

PM advised the group that there had been discussions around running a shuttle bus service. She stated some practices do not want to move surgery premises but could provide satellite premises for specialist services or perhaps an Advanced Nurse Practitioner service.

AP asked if this model was working elsewhere.

BM talked about how they were trying to move practices to Kennedy Way years ago and that now Epping Close are there and that North Road and Holland surgery are moving there.

PM explained how the consensus of opinion is that GP's coming through want to do diverse jobs, such as Minor surgery one day, clinic one day, other services another day as they want to do more than daily surgeries. She stated new builds and new ways of working are popular and there may be a training suite to regenerate GP's.

EB said it would be good to keep services in Clacton to prevent travel.

PM stated there is a list of services suggested for Clacton, for example a children's assessment mental health unit where children can be observed for a day in a natural environment – currently parents wait years for a diagnosis.

SF asked at what point patients will know. She voiced concerns that she may phone up and experience problems getting a prescription.

PM reassured the group that would not happen and that the surgery would not close, however there may be more locums for the interim period. She stated stress levels for Dr Halstead and Dr Tien may increase.

SF wanted to know that patients will be safe in the interim after Dr SS lease and she does not believe there is anything in place.

BM agreed there will be a shortage of doctors and stated he does not believe Nigel can get doctors out of thin air.

PM advised the group that ACE had taken locums to run their practices but that the surgery have been loyal to one agency who are now providing some locums on a regular basis. She stated we still cannot get as many as we want but are getting some.

SF asked if ACE have not shown any interest in the practice.

PM stated that was not what she wanted for the practice.

SF questioned if ACE would want to take over the practice.

PM advised the group that NHS England would put the surgery out to procurement and ACE may put in a tender for it.

AP suggested it would be privatised through the back door.

PM specified that the proposed partners coming in would be NHS but ACE could be a back up plan.

SF voiced concerns that the service is barely meeting requirements and is worried if it worsens.

PM confirmed that Dr Halstead and Dr Tien plan to stay until transfer is complete.

BM said there are some very good locums out there, with patient care primary, so the surgery will aim to keep that care as high as possible.

PPG member asked how new partners are going to cope better.

BM suggested there may be more GP's coming on board and Advanced Nurse Practitioners.

JB asked how many patients know how good Nurse Practitioners are

PM stated the surgery takes every opportunity to advise patients, for example a response is sent if comments are left on NHS Choices regarding a Nurse Practitioner. She stated it is on the website and practice leaflet as well as communicated via reception as much as possible.

BM asked the group if they will open an invitation for Nigel Grinstead and/or a Doctor or Practice Manager partner to attend a further meeting.

The group agreed and would welcome such a meeting.

AP asked if Mr Patel would be staying.

PM confirmed he would be.

KP stated Nigel needed to provide answers.

BM agreed it was a shame that Nigel could not attend and he was disappointed not to ask questions. He clarified that the new Practice Manager can request a meeting but they cannot dictate to the group, as the group is independent.

PP asked why there would be a new Practice Manager as new faces would not help the transition. He asked if PM was retiring.

PM stated she hoped not and explained how most organisations worked like the surgery does, with a Practice Manager and Business Manager or money lady. She reinforced how she hoped to be here through the transition but once the new partners get a foothold they are likely to look at staffing levels and performance which often results in changes in people at the top.

PP suggested external bodies were more interested in statistics than easing the pressure. He asked if the new doctors were going to be paid as locums as locums have no paperwork.

PM advised the group they would be partners and would be working to a new model of care, using more (Advanced) Nurse Practitioners or triage more to enable the doctors to concentrate on patients that can only be treated by a GP.

PPG member stated this was ok so long as the person triaging has the right training to do so.

SF asked how many GP there are in the group coming in.

PM advised the group there are more than 1 practice and are part of a hub.

BM thanked PR for the letter to the Telegraph and stated Dr Gary Sweeney had congratulated him on it being printed.

BM asked the group if they had any points to carry forward to the forum meeting that they be emailed to him. He explained how he had been to PPG group meeting and that there was a big forum meeting in July for all Tendring PPG's and some from Colchester.

BM said problems with hearing aids had been addressed and improvements had been made.

SF agreed the service had become much better.

BM commented on patient transport from ambulance service was down to 62%, but should be 88%. He discussed holding End of Life forms to register a patients doctor informed choice with the surgery. BM advised the group that Dr Jonathan Geldard was pushing to get PPG members on Health forum or CCG board to aid progression for PPG's. He suggested talking to James Whale at Radio Essex.

PR offered to write another letter.

BM stated if, in the small chance the deal may fall through, NHS England will step in.

PM advised the group information will be shared as soon as the surgery can.

BM thanked DL for the minutes and PM for hosting the evening.

LB explained that due diligence can be very positive but needs to be done.

SF asked for the group's thanks to be passed on to all staff for everything they are doing, stating it is very much appreciated by the patients.

BM advised the group they will next meet on Thursday 11th August 2016 at 6:30pm at the surgery.

BM thanked the group for the very good attendance.

Meeting closed at 7:45pm.

Members can contact BM by his telephone number: 01255 436977 or email address: mckeownjb@yahoo.co.uk

Useful Links:

http://www.cqc.org.uk/sites/default/files/new_reports/AAAE3185.pdf

<http://openjunction.co.uk/>