

Patient Participation Group (PPG) Meeting – Thursday 20th August 2015 18:30 – 19:45

Present: Dr Simon Sherwood (Dr SS) – GP at East Lynne Medical Centre
Dawn Lambert (DL) – Finance Officer at East Lynne Medical Centre (Minutes)
Stephen Osborne – IT Manager at East Lynne Medical Centre
Lynsey Bessent (LB) – PPG Member Elizabeth Boyle (EB) – PPG Member
Janice Brierley (JB) – PPG Member Frank Dowdall – PPG Member
Maria Garrett (MG) – 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 Member
Tina Porter (TP) – PPG Member Penelope Read (PR) – PPG Member
Elizabeth Thomas (ET) – PPG Member

Apologies: Pauline MacKenzie – Practice Manager at East Lynne Medical Centre
Eunice Hayes – PPG Member Roy Hayes – PPG Member
Kaushik Patel – PPG Member

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

All present in the meeting introduced themselves.

DL gave apologies.

BM asked the group if they had all received the minutes from the meeting on 25th June and if they had any queries to raise from them.

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

BM began with the chairman's report, explaining he had attended many meetings since the group last met, including the PPG Forum which had a representative from every surgery in Colchester. BM explained the meeting was very fruitful and that the constitution of each group was individual. He advised the group that councillors are interesting in attending PPG meetings and it was a PPG decision whether to allow them to attend, as they are not patients or members of the group.

BM asked the group if they had received a Guide to Patient Experience and requested they asked DL for a copy if they had not.

BM advised the group he had attended a meeting, regarding cuts, at Clacton Town Hall to which only 3 people had turned up to, all of which had been patients of East Lynne Medical Centre. All the issues raised at the meeting were regarding the non-prescribing of gluten-free food. BM stated that no issues were raised regarding cuts to IVF, vasectomies or hayfever. BM advised the group a letter stating reasons for objecting to these cuts should be made before the next meeting. BM stated it was mainly people on a low income who are affected by being penalised as they cannot afford to buy gluten-free food. BM asked if the group disagreed and wanted BM to take a letter to the next meeting.

The group was in favour of a protest letter.

BM asked Dr SS for the surgery update report.

Dr SS reminded the group that the surgery had been trialling a new appointment system, where patients were able to book appointments throughout the day and how this system had been working particularly well.

JB stated the system had worked extremely well for her on 3 separate occasions in the last month she had experienced a vast improvement.

Dr SS explained how GP recruitment was a big worry with the cuts expected. He stated GP's were not prepared to work for the amount of money currently being paid.

JB asked if it was the same everywhere.

Dr SS advised the group it was much worse in this area and that Doctors can earn more as a locum or by working abroad. He explained how the surgery in Frinton was now being run by ACE using full time locums, which is drawing all the available locums in the area. He stated even though the surgery pays £800 per day, they are finding it extremely difficult to cover holidays. Dr SS stated this was a big challenge and they risked paying locums more than the GP's. He explained how the surgery had a good Nurse Practitioner team but that they do need GP's and this was the biggest threat they'd ever seen.

BM asked if Tendring had a shortage of locums.

Dr SS confirmed this and advised the group most locums travel a long distance. He stated the furthest travelled locum had come from Italy and the practice had paid for her flight and hotel.

EB asked if surgeries were being pushed towards video consultations.

Dr SS advised the group video consultations were difficult as the doctor would often need to see something closer or examine the patient. He also declared information governance concerns with using a laptop or Skype type programs. He also explained how indemnity would be affected drastically by using video consultations. He stated he currently pays £800 per month but this would rise considerably if video links were added.

BM moved on to ask the group if they had read the PPG Constitution document and if they were happy it. He asked for a member to volunteer to be deputy chair, in case of BM's absence.

PR volunteered and the group agreed.

BM acknowledged a vote of thanks from the group to KP for offering to be secretary for the group, however he advised the group KP has now regrettably resigned. BM explained it is the responsibility of the group to undertake this role and asked for somebody to volunteer.

At this point there were no volunteers; therefore BM said he would leave the group to consider it.

BM moved on to talk about goals and the possibility of appointing a financial officer to raise funds to help with the cost of printing and time. He explained how some PPG's have contacted chemists to request a donation and that Boots had contributed £100 each to 2 PPG's. He opened this up for discussion.

PR said she thought this was a good idea and would encourage it.

Dr SS stated the surgery would have no objection as long as they were not seen to be favouring any one chemist.

BM asked the group for a volunteer for finance officer.

FD suggested there were not enough members in attendance today and that the whole group should be given the opportunity to volunteer.

JB stated they need to find the right person with the skills to do the job.

BM explained most people have experience with their own life skills and he asked the group to consider this role.

PR asked if the group if they were looking for someone to do accounts or a press officer as she considers them 2 different roles.

BM confirmed finance officer would be accounts and fund raising.

BM advised the group that some PPG's bake cakes to raise money.

FD suggested a quiz night.

BM advised the group there was a similar problem as Gluten-free foods with hayfever medication. He stated how it is cheaper to buy hayfever medication over the counter.

Dr SS explained that chemist add a dispensing fee which would increase the cost of Aspirin, for example, from 22p to £3-£4.

PR asked if many people request a prescription for hayfever.

Dr SS stated not so many but some just get it because it is free. He explained the CCG has an £8Million overspend and that they have to save £14Million every year. He advised the group it would be very difficult, they would need to cut this or something else. He stated it is good to try and protect these services but there will be cuts somewhere.

BM said he had been surprised no one had mentioned IVF, which he considers has no contribution to society, only to the individual. He stated the smallest saving would be on the Gluten free food yet although a family may not be able to afford to buy it, they cannot stop the need for gluten free food.

Dr SS declared concern regarding rationing and explained how East Lynne Medical Centre provides thorough testing but there was a new enhanced service aimed at reducing referrals. He advised the group the surgery had refused this enhanced service as it was voluntary at present. He stated NHS England / CCG want to see improvements in early cancer diagnosis but this will not be possible to achieve without referrals.

BM moved on to talk about when he went for a blood test and how there had been 13 patients waiting but only 1 phlebotomist as 2 had been ill and 1 was on holiday.

PR and JB also stated they had experienced this.

BM advised the group this issue had been raised by a PPG and as a result 2 extra staff had been sent in.

BM stated another example where a PPG had helped is Hospital Transport. He explained the PPG had complained that it was often difficult for patients to travel to an initial consultation, then return another day for an operation or follow up. As a result of the PPG's complaint, patients are now able to request hospital transport. BM advised the group there is a lot happening behind the scenes.

BM advised the group the issues with bloods needing to be re-taken due to arriving too late and deteriorating on their way to Ipswich has now been resolved.

Dr SS explained how TPP had made a bid for phlebotomy services in this area to provide a centralised hub, even though they had said for years it would not work. TPP is national and their idea is to close Colchester Pathology. Ipswich Hospital had won the procurement contract.

BM asked the group to advise him if they know of any little problems with hospitals.

JB reinforced how disruptive it can be, having to have bloods redone, particularly if fasting.

PR commented on how much more positive her recent experience had been at Colchester Hospital, compare to a few years ago.

Dr SS explained how they are in special measures and although 6 out of 12 consultants' jobs are currently vacant, there are some very good people holding it together.

BM advised the group of an End of Life committee, which look at Hospices and Hospitals and have stated a noticeable improvement over the last 12 months.

BM asked the group to consider joining the Clacton Health Forum. They meet every two months and it is a good experience, highly recommended by BM.

Dr SS agreed it is a good meeting to promote as reports go to the CCG.

BM confirmed sections from the minutes are taken to other forums and again he asked the group if they could join.

JH asked that, bearing in mind the difficulties in recruitment of GP's, would it be a mistake to build up to 1200 more homes in the area.

Dr SS stated at present there was no way of providing for these homes. He advised the group East Lynne Medical Centre is doing as much as possible but could offer no more. He explained they are the lowest funded of the 42 practices in North East Essex. He stated the surgery in Frinton is paid twice as much, which is enough to fund their locums.

JB asked why this was the case.

Dr SS advised the group it was historical based on old style GMS Contracts. He explained that some practices changed their contract and one local surgery has received over £1Million over the last 10 years.

JB said she felt Tendring PCT used to bail out Colchester, however it has been reversed.

GL agreed and stated Colchester seems to receive more money than Tendring now.

BM stated it was a similar system with school funding.

SH asked if the surgery applies for funding from the same budget as dentists.

Dr SS advised the group dentists are employed completely separately by NHS England.

LB asked if there would be a link for the care adviser on the website.

SO explained the care adviser was new and information would soon be available.

BM asked the group to consider when to schedule the next meeting. 29th October at 6:30 in the surgery was agreed by the group.

BM thanked the members for attending and asked them all to think about helping to fill the vacant positions of secretary or treasurer. He asked DL to remind members they can contact BM by his telephone number: 01255 436977 or email address: mckeownjb@yahoo.co.uk

Meeting closed at 7:45pm.