

Patient Participation Group (PPG) Meeting–Thursday 29th October 2015 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
Eunice Hayes (EH) – PPG Member Roy Hayes (RH) – PPG Member
James Hooker (JH) – PPG Member Jacqueline Lyons (JL) – PPG Member
Brian McKeown (BM) – PPG Member Kaushik Patel (KP) – PPG Member
Alan Penney (AP) – PPG Member

Apologies: Frank Dowdall (FD) – PPG Member Sara Foster (SF) – PPG Member
Maria Garrett (MG) – PPG Member Sally Hooker (SH) – PPG Member
Gillian Lingwood (GL) – PPG Member Tina Porter (TP) – PPG Member
Penelope Read (PR) – PPG Member

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

PM gave apologies.

BM asked the group if they had all read 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 by asking Dr SS for an update from the surgery.

Dr SS explained how the surgery had been inspected by Care Quality Commission (CQC) the previous day and he stated whilst there did not seem anything too major, he expects CQC to recommend a few changes. He stated the report would be available in 6 to 8 weeks.

Dr SS stated the main problem the surgery was experiencing was with obtaining locums to cover staff shortages. He explained how the surgery contacts 5 locum agencies but is often unable to secure a locum. When demand is high, some appointments for the next day are offered. This means occasionally on a Friday, when there are no next day appointments, the surgery is only able to offer emergency appointments. Dr SS explained locums are fulfilling long term contracts so less are available. He stated Sister Zoe would be back on Monday and that booking all day plus overspill for the next day seems to work well every day except Friday, when there is no overspill day.

Dr SS moved on to discuss Flu vaccinations, explaining this was the first year the surgery had been in direct competition with Pharmacies. This means that not only would the surgery not benefit from the income Flu campaign can generate, they could actually suffer a loss of £10k if patients use a Pharmacy, resulting in a horrendous cut in surgery income. A pharmacy receives a higher payment and it severely impacts on the surgery, particularly when the pharmacy does not provide information.

BM began the chairman's report by asking the group if they recalled a report in the news regarding accusations that Colchester Hospital had been fiddling their Cancer statistics. He informed the

group that he had a copy of the police report clearing Colchester Hospital of all charges of fiddling or any issues, inviting the group to view the report if they wished to.

BM advised the group of a serious issue which will affect all practices in Essex. Discussions are currently underway which could move Colchester Urology Department to Southend. The group agreed this was not a straight forward journey and would be a long journey for initial consultant appointment, before any possible treatment. BM said it had been suggested that consultants attend surgeries but this was refused. BM offered to write a letter of group protest to keep Urology in Colchester. The group agreed this was a good idea and asked BM to proceed with this.

BM moved on to explain how the restricted prescribing of gluten free products is still going ahead, however it has been altered slightly so that single mothers with a child needing gluten free products, can still obtain them.

BM confirmed bloods were no longer being sent to Ipswich Pathology department but explained some problems with the Reckitts House Phlebotomy service recently, whereby he was unable to get through on the telephone to make an appointment so called into the Blood Clinic. He found they had 4 members of staff off sick, which left them with 1 phlebotomist and a manager from Colchester helping with administration. BM was turned away, as were 7 patients he interviewed, including one elderly patient who travelled to the clinic in a taxi.

BM moved on to advise the group of a new concept, Threshold of Procedure, whereby patients waiting for an operation who smoke or are overweight would have to attend a smoking cessation or diet course for 12 weeks and prove their success or they may be refused their operation. BM explained how this appeared unfair for overweight patients as often their problem is for clinical reasons, rather than a lifestyle choice.

SS stated patients BMI should be down to 30 and that the view of orthopaedic surgeons is that weight affects the success rates of knee and hip replacements. He explained how the CCG was in debt by £16Million and the Hospital by £30Million and they have to prove savings from somewhere.

PM explained how it might be considered a failure if for example a knee replacement operation does not vastly improve mobility but if the pain threshold is less, the patients' quality of life will improve, therefore the patient will still benefit.

AP stated it was a vicious circle but that he agreed with the smoking part.

BM suggested as a group they send a letter of protest regarding threshold of procedure for obese patients, stating it should not be imposed if clinical reasons for obesity.

JL said she had been on a ward where people had been smoking or had to walk through a smoking area to get to an appointment at Colchester Hospital.

BM agreed smoking should be banned from whole site, like at Clacton, to stop nurses sitting down smoking then returning to their patients with smoke smell on their clothing.

KP stated many of these rules are not national but local, only for this area. He suggested the Health Forum asks why patients cannot get gluten free in this area but can go to Chelmsford to get it. He stated Gluten free products are not black listed products.

Dr SS stated the CCG can order gluten free but surgeries do not have to apply and 3-4 surgeries are not applying the order.

BM said he would bring this up at the Health Forum.

BM moved on to discuss a document from Sam Hepplewhite regarding female sterilisation and vasectomies being available for complex needs patients only, not for any other reason.

AP asked if a family had 6 children, can they not have a vasectomy.

Dr SS and BM stated no.

LB stated there could be an emotional aspect to obesity and they should bear in mind patient history.

BM stated the restrictions will be reviewed in 12 months' time, although they have to save money so may not change their minds.

BM stated the Medicines Management Team is telling surgeries to use cheaper Medication.

Dr SS explained it is horrendously difficult to rationalise medication and that very similar medication can range from £108 to £3. Statins are an on-going problem, however are now cheaper so can be changed back.

AP advised the group he had spoken to Mary Tompkins years ago regarding Chemists over prescribing. He stated Boots prescribe everything, whether the patient needs it or not. AP stated Mary Tompkins did not believe this was the case so several members of the Tendring Diabetes Forum took photographs of masses of boxes of unopened medication and provided this evidence to the Medicine Management Team.

BM said the Chemists do not like to take medication back but if you have not left the Pharmacy, they can take it back for re-issue.

AP confirmed he gives back all medication he does not need now.

KP advised the group the Medicines Management Team should concentrate on stopping local pharmacies issuing unwanted medication.

BM stated he would take minutes to the CCG board.

PM advised that for patients on 28 day prescribing on managed repeats, the pharmacies request everything as routine.

LB confirmed she has heard Pharmacists say to patients that they automatically order everything.

BM states Medicines Management Team were not given an easy time by the Health Forum and have 23 things to report back on. He also mentioned chemists decide to give different drugs to the ones ordered by the Doctor.

EH said she kept being given pain killers, even after she had recovered and didn't want them.

KP explained this is fraud to the Health Service and should be written in a letter.

BM advised the group he will write to Medicines Management.

Dr SS stated if the Doctor puts a brand on the prescription, you should get the brand but if the generic name is used you will get a cheaper brand.

BM stated it had been the same for many years. He said he used to discuss re-cycling unopened and in date medication with Paul Breame, who used to say it was a waste of time but keep trying.

BM moved on to discuss newsletters.

PM advised the group the surgery had a newsletter for many years but it has tailed off recently.

EB stated she used to like reading it.

JL said she had looked for one recently but found the last one talking about Dr MacMillan retiring.

PM suggested the PPG could have one of their own.

KP agreed someone from the group should do a 3 monthly newsletter.

BM agreed the surgery can contribute and also PPG members can input. He asked JH if he would be interested in helping with this.

JH agreed to give it a try, with help from the surgery and PPG members. Please email any ideas or suggestions to James at james.hooker93@hotmail.co.uk

BM advised the group he would like to send correspondence with a letterhead specific to the PPG, and thanked those who had offered suggestions. He showed the group the suggestions and PM offered for the surgery to help by looking for a logo and help produce letterheads.

BM read comments from SF regarding claiming a grant to help pay for stationary, stamps or other costs, which would go through the surgery. He explained how he would like to arrange a venue for an afternoon meeting to accommodate members unable to attend in the evening.

AP suggested contacting Tendring Community Voluntary Services (TCVS) who may be able to negotiate a cheap rate. He stated the Diabetes Forum meets there, in a room paid for by the CCG, therefore there are paper trails for all transactions and no cash changing hands.

BM suggested combining group with Ranworth Surgery or another PPG group.

BM read another comment that patients have not been able to obtain online appointment for Specialist Nurse.

JL stated she had found several online appointments for Louise Mulford.

PM said she had been on holiday recently but she would check there were some available.

BM moved on to discuss the problem of medication not being ready to collect in a timely manner.

PM confirmed this causes big problems and that the surgery needs to know how the request was made. She advised the group if a prescription had been requested electronically the surgery can check the audit trail and prove it sits with the Pharmacy for days.

BM experienced a problem with Boots Pharmacy not opening emails.

Dr SS explained how electronic prescribing is supposed to be instant but does not seem to work. He stated when he is in consultation with a patient; he would default to printing a prescription.

JL asked how long it should take to obtain a repeat prescription via the surgery website. She stated she can see when it gets accepted by the surgery but can sometimes take 2 weeks until ready at Pharmacy.

KP advised the group all repeat prescriptions are processed in a Colchester hub and that it takes 3-7 days to send to a local branch.

JL stated she could see a tick to say the request had been actioned by the surgery but then nothing.

Dr SS confirmed these types of request are not printed at the surgery, signed and sent but processed electronically which causes a problem with some chemists.

Dr SS explained how he signs all routine prescriptions at 6am; therefore prescriptions placed in his box throughout the day will be signed at 6am the following day, aiming for patients to receive paper prescriptions within 24 hours, not immediately.

JL stated the chemist she uses keeps asking her if she wants a flu jab.

BM read more from an email sent by SF which asked if the Doctors and surgery staff could be thanked for their hard work.

The group supported this comment with applause.

SF also wondered if there was anything the PPG can do to help the surgery.

PM and Dr SS said they would give this some thought.

BM explained how he had helped obtain feedback for the CQC Inspectors and that he had been interviewed by CQC discussing the positive influence of the PPG and the severe shortage of Doctors in the area.

Dr SS stated that following the Frinton surgery's struggle, financially, they had been given additional funding to pay for locums. He advised the group he had met with Douglas Carswell, local MP, to discuss the on-going problems and consider ways to attract GP's to the area.

JL asked what had happened regarding the Panorama report.

Dr SS explained that the BBC News team had contacted him and attended the surgery to interview him and a nurse for a report they were running but that he was not expecting a follow up at this stage.

LB asked why she is still unable to leave a message for a doctor if they are not there at that time.

PM explained there are safety issues with leaving a message for a doctor who is not in that day or the following day, therefore messages should not be taken.

Dr SS advised the group he received an average of 20 messages per morning and that he personally would prefer a letter form to reduce the stress.

EB asked if they could send emails.

Dr SS stated this would not be a safe method as he receives on average 100 emails daily, as well as 150 letters, 100 results and 150 prescriptions, including when off as he works remotely on a secure NHS laptop.

LB asked if verbal messages at the desk were not allowed.

PM confirmed not if the Doctor is not due back.

Dr SS advised the group if a Doctor was not there a message could bounce between Doctors and could cause a delay, he stated he prefers patients to write a letter which would be read within 2-4 days.

BM asked the group to consider when to schedule the next meeting. 21st January at 6:30 in the surgery was agreed by the group.

BM thanked the members for attending and reminded them all to consider the vacant positions of secretary or treasurer. Remember, you can contact BM by his telephone number: 01255 436977 or email address: mckeownjb@yahoo.co.uk

Meeting closed at 7:45pm.