

## Patient Participation Group (PPG) Meeting–Thursday 21<sup>st</sup> January 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 Sara Foster (SF) – 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 Penelope Read (PR) – PPG Member  
Apologies: Frank Dowdall (FD) – PPG Member Eunice Hayes (EH) – PPG Member  
Roy Hayes (RH) – PPG Member James Hooker (JH) – PPG Member  
Sally Hooker (SH) – PPG Member Tina Porter (TP) – PPG Member

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

DL gave apologies.

BM began by asking Dr SS for an update from the surgery.

Dr SS reminded the group about the inspection by Care Quality Commission (CQC) in October. He stated initial feedback had not been good and he felt there was a significant level of threat. CQC had stated the report would be available in 6 to 8 weeks, however as Dr SS stated, 12 weeks later we have still not received the report.

Dr SS stated CQC have harshly criticised many surgeries in the area, often regarding problems that cannot be helped, such as Doctor of choice or recruitment.

Dr SS explained how there were no personal circumstances taken into account and practices were judged on a national level. He stated several practices were being placed into special measures, many losing their senior doctors. He stated the situation was quickly moving from dire to critical.

Dr SS advised the group he had been on local radio declaring his concern over areas like Clacton being left without any NHS care. He stated St. James has closed their branch surgery and Ranworth was on the news saying recruitment was abysmal. Concern was raised that this area would be the first to have total system failure and that Primary Care would cease to exist in the future.

Clinical Commissioning Group (CCG) has responded by arranging a meeting on 28<sup>th</sup> January to discuss different models of care.

Dr SS explained that there is still a need for providers, but that an alternative model is to use Nurse Practitioners on one site and Doctors on another. He stated when considering amalgamation, he would only be interested in a takeover.

Dr SS advised the group that Colchester Hospital had just received another inadequate inspection which makes recruitment worse. He stated 48% of medical graduates go abroad and only one third of the rest go into general practice, therefore there was no way Jeremy Hunt would achieve 5000 new GPs in the next 7 years.

Dr SS explained how GP's are receiving pressure from every angle to improve services without the resource to do it.

Dr SS stated that the practice list was still closed, as is Ranworth and St. James, leaving only Old Road accepting new patients which could overload them. He explained that as practices fail, other providers like ACE (Anglian Community Enterprise) takeover and employ locums previously used by other practices. He stated we are using a different team with Nurse Practitioners and Pharmacist and that Ranworth declared a proposal that had been written by him.

Dr SS advised the group that 3 senior partners have left and gone and that 1 more will mean collapse.

PR asked if we are able to advertise overseas.

Dr SS stated we had flown a locum in from Italy previously. He advised the group that a Doctors qualification from abroad are not to the same standard as the UK. He stated Australia and Canada are common places for doctors to go to and that the LMC are in talks with CCG. Dr SS advised the group that CCG were experiencing financial difficulties and putting pressure on providers to provide cheaper services. An example he gave was that Deprivation had been taken out of the prescribing budgets, which means all local practices appear over budget.

Dr SS explained how the Frinton practice is being run by ACE and is functioning by cross subsidising from other operations. He stated they are also receiving higher funding.

Dr SS confirmed East Lynne was running a very efficient operation despite being the lowest funded in North East Essex but he also stated there is a local crisis which politicians are unlikely to resolve.

Dr SS suggested more Nurse Practitioners to see minor illnesses but voiced his long term worry for NHS contracts.

BM advised the group that there was a recruitment campaign abroad years ago, whereby 10 Italian Doctors were recruited, 7 of which were non English speakers and needed intensive English lessons. Following the English lessons 3 Doctors returned to Italy and only 2 stayed in the UK to take up hospital posts.

BM referred to the press release from Sam Hepplewhite regarding the shortage of GP's. He stated she had written about things that was already happening and simply relaying the current position.

BM suggested individual surgeries should move forward with their own plans.

BM stated he had met with Dr Gary Sweeney for 2 ½ hours to listen to him talking about amalgamating the Health Forum with the CCG. BM felt this was not a good use of time.

BM advised the group of an important date coming up – 17<sup>th</sup> February 2pm at Weeley Village Hall. He stated this meeting was intended for as many PPG members from every PPG as possible along with ACE.

BM explained how the Ambulance service has won the contract for Hospital Transport for the East of England, therefore only 1 supplier will be paid instead of 4-5. They will offer a new service to take anyone with medical needs to Hospital.

JB confirmed it was only patients with a real need and that it was no longer money based.

Dr SS stated they tried this in Cambridge but only lasted 11 months, when emergency measures were put in place, failure partly due to low tenders being accepted and budgets being too tight.

BM advised the group he felt ACE were trying to replace the NHS, although Frinton were set to close anyway.

Dr SS explained that ACE offer a lesser service and cut everything that is not a contractual requirement.

BM stated ACE was originally set up by a group of employees from the Hospital but had become too big to cope.

Dr SS stated since locums have been employed at Frinton, it has stopped other surgeries obtaining locums.

BM stated there were still problems in the Phlebotomy department who have staff on long term sick leave and cannot be covered.

Dr SS advised the group the Phlebotomy contract is held by GPPC, who are a conglomerate of GP's. He stated no money is made by them and that they make a loss every day.

BM advised the group he had attended an informative meeting with Hospital PALS regarding how they can help.

BM moved on to discuss the CCG document he had previously circulated regarding looking after your mental health during the winter months. He stated PALS, ACE or CCG issue press releases but are not tackling the main problem any diverting attention.

PM advised the group that Dr SS has done everything he possibly could to draw people's attention to all the problems over the years and that he had been a great ambassador to the surgery and NHS.

AP said he felt it had been a good idea to close the practice list.

Dr SS declared concern over whether Old Road could cope with the overload.

JB asked what happens to members of the family of registered patients.

PM confirmed they can be registered.

Dr SS stated patients would be allocated if all practices close their list but there are talks of some GP's handing back their contracts.

BM advised the group he had written a letter of objection regarding the Urology department moving from Colchester to Southend.

SF asked what they could do as a PPG to help support the surgery. She suggested publicity via a press release.

Dr SS suggested the publicity needs to be that the situation is critical and there can be no more cuts to funding.

SF agreed that people need to understand the severity.

Dr SS reinforced that if one clinician goes off sick it is feasible to fail. He explained that Douglas Carswell knows about the situation but he has not met with him for a few weeks, therefore he is not completely up to date.

SF suggested getting PPG's together.

BM stated the 17<sup>th</sup> February, 2pm at Weeley Village Hall might be the opportunity we need as all Chairs and Deputy Chairs from PPGs have been invited

Dr SS explained how the North Road CQC Report had been damning, with no account for the area or funding. He stated Steve Fields from CQC said GP's should be ashamed of themselves. He said practices were being pressurised from all angles and that Steve Fields and Jeremy Hunt know about this area.

Dr SS stated CQC does not consider it their problem if they close practices down. He suggested a realistic need for 15,000 GPs.

Dr SS advised the group the youngest member of the CQC inspection team spent time promoting their own company aimed to prepare practices for their CQC inspection. He reinforced letting the local population know NHS services are in crisis.

BM suggested an interview and large spread with the Gazette.

SF stated she could help set that up but she would need an article.

AP suggested doing a press release as a group.

PM advised the group the NHS Choices website is a very powerful tool that CQC and NHS England monitor and take note of. She requested the group go online and post their positive comments of support.

KP suggested writing to Jeremy Hunt and Douglas Carswell requesting a meeting with a group. He suggested meeting in a group would add pressure.

GL agreed that an open letter to the press was a good idea.

BM suggested national papers, not just local but to start with the Gazette then follow up every week.

AP suggested sending it everywhere on the same day.

Dr SS advised the group that BBC has been very interested and that he did an article previously however he had decline the recent invitation therefore they had attending Ranworth Surgery. He felt it can put people off the more you do.

GL suggested we were already past the bad reputation stage.

SF advised the group to be wary when dealing with the BBC.

JB stated many people will not care until it affects them.

Dr SS reinforced that we could not cope if a neighbouring practice fails.

GL stated patients are completely unaware and are still busy complaining about appointments.

JL asked why it was just Clacton.

Dr SS explained it was not just Clacton, there are other areas such as in London a practice has shut with no notice and 4 Partners in Essex have just handed back their contract. He stated no-one wants to become a GP.

JB asked why we pay to train them.

Dr SS stated trainees pay £90,000 themselves to train and they are relied upon to prop up the service while training. He said the problem is in retention and that people are unable to sustain the high pressure. As to why Clacton is an affected area, Dr SS stated there are 10% more patient capitation, more visits and less money.

BM advised the group it is a more deprived area in the country and that the Jaywick surgery had been given to a private company who had run it into the ground.

Dr SS stated half a million pounds had been given to sort the Jaywick surgery out.

SF asked which other surgeries were run by ACE.

Dr SS answered Frinton Road, Epping Close, Caradoc and Green Elms (Jaywick). He explained how ACE had recently one a large contract to provide Care closer to Home, which was a massive project that no one had been able to make work yet.

PM explained that funding is a problem. She stated GP's are passionate about their patients but partners are leaving under pressure.

Dr SS reinforced this saying now there are only 3 partners, they still have the same number of complaints as when there was 6 but there are fewer partners to deal with them. He stated it is a default from every NHS organisation to attack.

BM stated they could incorporate this in the news release.

SF offered to arrange this.

BM moved on to discuss the letterhead and asked the group which telephone number they think should go on it.

PM stated she had no preference or concerns if surgery telephone number used.

AP asked about email address.

BM stated his email can go on along with the surgery telephone number.

JL asked if she was allowed to write tweets on Twitter.

BM said yes, this was no problem.

AP requested a letter from BM to distribute to the Diabetes Forum.

JL voiced concern as to where to find the time for planning ahead.

Dr SS advised the group of a meeting on 28<sup>th</sup> January to discuss forward planning. He stated we need a strong base of people wanting to work and if the shortage of GPs remains an issue, he would be looking at a nurse based surgery.

JL asked who the forward plans are presented.

Dr SS stated NHS England and CCG although they have very limited power. He stated the CCG are a small unit that also attack GPs but they feel the pressure when practices are threatened by closure. He voice concern that senior partners are under extreme pressures.

BM asked the group if there were any other points to raise. He suggested all PPGs do a similar news release and stated he is happy for the group to distribute a press release before he returns from holiday. BM suggested contacting ACE to provide funding for the PPG.

Dr SS stated Colchester practices are considering a 'nuclear option' whereby they are preparing to hand back their lists then offer services back for £25 per consultation.

AP suggested contacting the TCVS to enquire if they have a secretary who is also a patient that me be interested in joining the group to help with secretarial duties.

BM advised the group the next meeting was scheduled for 17<sup>th</sup> March at 6:30pm in the surgery.

BM thanked the members for attending. You can contact Brian by his telephone number: 01255 436977 or email address: [mckeownjb@yahoo.co.uk](mailto:mckeownjb@yahoo.co.uk)

Meeting closed at 7:45pm.