**Mid Essex CCG**

**PPG: *Mohanty Douglas & Co Patient Participation Group***

**Date:** Tuesday 14th March 2017 @ 18.00-19.00pm

**Held at:** Douglas Grove surgery in the conference room

**Present**

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| **Neil Coughlan-NC** | **Chairman/Patient – Dr Mohanty & Partner** |
| **M. Venkatasawmy-MV** | **Practice Manager – Dr Mohanty & Partner** |
| **Toni Hull-TH** | **Practice Manager-Douglas Grove Surgery** |
| **Tracey Uden-TU** | **Finance – Douglas Grove Surgery** |
| **Anne Charles-AC** | **Patient – Dr Mohanty & Partner** |
| **Phil Barlow-PB** | **Patient –Douglas Grove Surgery** |
| **Janet Butler-JB** | **Patient –Douglas Grove Surgery** |
| **Bill Rose-BR** | **Patient – Douglas Grove Surgery** |
| **David Wales-DW** | **Patient –Douglas Grove Surgery** |

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| **1.** | **Apologies** |
|  | Olive Bryan, Andrew Cooper, Simon Dove, Rachel Evans, David Field, Jackie Hutchins, Emma Hodgson, Tracey Jobson, Jeanette Johnson, Ian Mcpherson, Jenny Newton, , Morris Timberlake, Tina Townsend, Patrick Webb, David & Pauline Wren, Jagvit Tumber, Paul wray |
| **2.** | **Welcome and Introductions** |
|  | **Minute Taker:** MV  Hello and welcomes given and thank you all for attending the PPG group today.  Welcome to two new joiners this month, Phil Barlow and Bill Rose  Most of the participates of this group had sent their apologies  NC went through the agenda and chaired the meeting |
| **3.** | **Minutes of the meeting (Previous)** |
|  | Minutes of previous meeting (14.02.17) agreed.  **Phil Barlow & Bill Rose:** Signed PPG confidentiality form |
| **4.** | **Update on Friday Surgery with DW** |
|  | DW is still on the list to see/speak with someone from Priti Patel’s office to make an appointment to see Priti Patel.  A discussion took place around the NHS England and their people behind the super surgery and where or which land that this building would be built on  The NHS Building in Collingwood Road surgery would not be an option as would not be cost effective in the long run to use and upgrade building for the use of GP services.  There were other areas of land that had been sold in the Witham area that may be the options for this new super surgery build. NHS England will need to decide where they want to build and where this new build will go.  Query the New River retail area, is an option  The County Council do not wish to invest in an old building but rather a new build to be able to foresee any other problem’s which could occur compare to that of an old building and its foundations.  Discussed the fact that this building could be on a PFI basis, private monies invested into this building, how would this be funded and where would the monies come from.  **DW:** brought up the issues of travelling form Witham to Braintree/Chelmsford with no transport  **Hospital cars:** There is a service that ambulance runs for patients but to qualify for this particular service; patients have to reach a certain criteria or have certain criteria about to be able to use this service.  There is the DRT (direct response services) ran by Arrow services/taxis which pick up patient’s form door to door. Need to find out the charge for this and put in the final minutes.  Bus routes available and using these buses for access to our health services/facilities. (Ebenezer close being one of these areas) maybe we need to lobby for much needed bus route form Witham into other areas. Currently to get into Chelmsford you have to catch the bus form Witham to Braintree, then Braintree to Great Dunmow, then Great Dunmow to Rayne and so on with so many bus changes is this really adequate and safe for the members of public that are senior, vulnerable and on their own.  **NC:** Said that there are genuine issues and access problems regarding transport to health services (hospitals) and this has always been an issue in Witham. John Goodman is the passenger transport person. From Broomfield Hospital there are busses to all other routes but not Witham to Broomfield and Vice versa. Essex County Council will not fund this option to and from Witham re: Broomfield Hospital, due to this being a commercial service and if over £ 5 per head per passenger for the journey. It all boils down to the monies and the costing as usual, cost effectiveness and keeping costs down as low as possible.  Again then went back the discussion as above on the transport for vulnerable people.  Query transport petitions are maybe an idea.  **MV:** pointed the fact out that with the new developments and patients on the increase in GP practices would this new build have the capacity for the figures as they are now and the phenomenal increase that Witham will be expecting in the next few years. Could and will this new build cope with the increasing footfall through the door and was there scope for all this expected increase as well as the current patient figures now.  Yes the build will cater for 40% spare expansion, extra capacity + the extra GP’s and workforce currently needed within GP primary care services. The infrastructure is in before the new build happens so that GP’s are trained and in to be able to run and cater for this patient expansion and change in how are GP services are ran.  **MV:** Said well Beaulieu Park is onto Phase two build now and the Mid Essex CCG had sent a letter out to all GP practices outlining the options and inviting expressions of Interest for the new Health Development at Beaulieu Park. So does this mean that they are now not able to cope with the current capacity /increase from phase one of this development to phase two. This development at Beaulieu Park is on-going and there is now an agreement with the developers that a health facility will be provided as part of the neighbourhood development.  In order to ensure that optimum use is made of this health facility and that adequate and appropriate primary medical services are provided to local residents, Mid Essex CCG and NHS England are currently considering a number of options, which include the following opportunities for local practices to provide the necessary services from the health facility:   Commission a single branch surgery   Commission multiple branches within shared space of same building   Relocate an existing practice  The letter sent to all GP practices was to make us aware of the above information and to invite expressions of interest from GP Practices as to whether they wish to be included for consideration against any of the options above.  As all the new patients from the phase one development had to register with the already existing surgeries within Chelmsford, does this not make you think that there should be GP’s already in place to put into this site when the plans were being developed and to cater for the demand. (e.g. look at the health centre next to Sainsbury’s in Chelmsford) the walk in centre closed down which is very needed in such areas and now everyone goes to the walk in centre in Colchester. Do we think before doing such big projects and spending monies, when there are already up and running services which could be improved and utilised!  **NC:** Bought up the issues of the pharmacies which are looked at and cut down. There will be closures of pharmacies and should this be the case? Are we catering for the supply and demand for the services that are needed to cater for this and does minimising the services that are out there help the cause.  **Points raised and discussed regarding all the above:**  We need to cater for the immense growing demand in Witham. Is the new Health centre which will relocate all GP services into one area or point of access the right way to go about catering for such demand (even though it will have 40% capacity left to cater for this demand including the present surgeries and their growing list sizes!  To bring this to the attention of the Witham MP: PP decrease and closure of these public services, pharmacies, transport(buses), the NHS services in general and where it is likely to head in the future, what does the future hold for the NHS and the closure of pharmacies, bringing together all GP practices into one super surgery.  Put the ball in the NHS England court for all the above issues, at the Braintree town council meeting regarding Witham and the new developments.  **AC:** Said that there is a Health Overview and Scrutiny Committee which is often about public health, they undertake project task work (Essex County Council + Public Health England PHE) for health and wellbeing issues.  The agendas for these are on their website. |
| **5.** | **PPG Meetings** |
|  | **MV:** Bought to the attention of the PPG if the meeting’s being held monthly were too much or viable, maybe need to do bi- monthly instead of every month.  **AC:** Asked the question as to if we downgraded to bi- monthly meetings how this would affect the PPG group and the practice. Dates of all the next meetings please see embedded in this document as a word document- PPG yearly dates  **NC:** Said that the meetings would be better to next month in April as was going to the Witham Town council meeting on the 29th March 2017 and so next month’s meeting in April would be necessary to cascade down any information about the super surgery project.  All were in agreement that the meetings would be held either monthly or bi- monthly depending on what the next meetings features were on the agenda and we would all decide at the meetings there and then as to whether to hold the meetings either the next month or the month after that so we will all be attending the meeting to be held in April on the 18th 2017.  As discussed at the meeting please see embedded in the meetings the dates of the next meetings: |
| **6.** | **Standing Agenda Items** |
|  | **No updates from the:**  Witham Sub- Locality Meeting or the Mid Essex Clinical Commissioning group  TH/MV did not attend  **HAPIA-** (Health watch & public involvement association) MV to inform AC of any events happening in and around Essex that would be of interest to our PPG members.  No updates but AC would like to go to any events if any around Essex or this locality  MV to find out more and AC to be our Essex Health watch person  Essex Carer’s network was there. |
| **7.** | **A.O.B** |
|  | **MV:** cascaded down information on:   * You have been referred to see a hospital specialist and what does it mean * Advice on vulnerable patient groups and how to register with a GP. These groups are for asylum seekers, refugees, homeless people and Gypsy/Roma/traveller groups. * Dr Gerald Clesham is doing a public lecture on Mon 20th March at Anglia Ruskin University, Chelmsford at 7.30pm. It is entitled ‘How to avoid a heart attack’     Please see and refer to all documentation embedded:    **AC:** bought up the issue of missed patient appointments and how many there were. Had seen something in the news about this. Maybe we could text patients 24 – 48 hours before their appointments as a reminder and if they cannot make it then they can cancel on time. Need to do something about this as it seems there are a lot of patients that do not cancel their appointments and then waste necessary GP appointments.  **TH/TU:** Said that at Douglas Grove surgery they do actually send text messages to patients the day before as well as the appointment text they receive when booking their initial appointment. This does help with alleviating patient missed appointments.  MV agreed to review the issue for possible action at the Witham Health Centre surgery  **BR:** Said that there were some patients that had come up to him to ask as to why the Douglas Grove surgery looked empty around the afternoon/lunchtime period and why there were no clinics.  **TH:** Said that after the GP’s have finished their morning surgeries from 8.30-13.30, they then make patient telephone calls regarding queries and questions, do administrative work such as patient letters and documentation coming in and also do home visits in this time with no time for lunch. Clinics start again from 15.00/15.30 onwards. So in effect the GP’s are still working but just not holding clinics until the afternoon clinic starts, they are doing catch work and any other added queries to their workload. They do sessions/home visits/triaging  **MV:** Agreed that in this time or duration of this time the GP’s haven’t stopped working they are just dealing with other general administrative/queries/adhoc GP work. They start from the moment they come in to work to the time they leave the work place is non- stop. In fact Dr Mohanty and Partner start from 8ish onwards till 19.30 in the evening.  **BR:** Said that they is a Local action group meeting at the Roundwood Garden centre- ELC( the care and wellbeing company) which are on a Monday 13.00-15.00pm held bi- monthly.  Roundwood Garden Centre, Church Street, Braintree, **Tel:** 01376 551728  **Outcome:**  To await NC to attend the:  ***IMPROVING HEALTHCARE FACILITIES IN WITHAM WORKING GROUP***  Which will be held on Wednesday 29th March 2017 at 2:30pm    **DW:** To do an interview on BBC Essex radio and let us know how it went and what happened regarding the questions that he will be asking. |
| **8.** | **Date of next meeting will be:**  Tuesday 16th May (TBC) at 18.00pm –19.00pm look forward to seeing you!  Nibbles and refreshments will be provided.  **Dates of the next meetings to be decided on ad-hoc basis and depending on the agenda:**  Tues, 19th June at Douglas Grove surgery, at 18.00pm  Tues, 17th July at Douglas Grove Surgery, at 18.00pm  Tues, 14th Aug at Douglas Grove Surgery at 18.00pm  Tues, 18th Sept at Douglas Grove Surgery at 18.00pm |