

COLCHESTER PATIENT PARTICIPATION GROUP (PPG) LIAISON MEETING

Monday 17th October 2016

Ash Meeting Room, Aspen House, Stephenson Road, Severalls Business Park,
 Colchester, CO4 9QR

2:00 pm to 4:00 pm

MINUTES

PRESENT:

Ray Hardisty (Chair)	RH	Chair NEE CCG Health Forum Committee & Colchester Representative, Chair, HFC Communications Working Group, Ambrose Avenue PPG
Peter Barfield	PB	Mill Road PPG
Maura Broad	MB	NEE CCG Health Forum Committee (Colchester Representative), Winstree Road PPG
Jenny Chalklin	JC	West Mersea PPG
Robert Harrington	RHrr	Tiptree PPG
Don Manhire	DM	Vice-Chair, NEE CCG Health Forum Committee, Ambulance & Urgent Care Representative
Paula Martin (Minutes)	PM	Patient Engagement Officer, NEE CCG
Simon Morgan	SM	Head of Communications & Public Involvement, NEE CCG
Robin Rennie	RR	NEE CCG Health Forum Committee, Resilient Communities Programme Board (RCPB) Representative

Item		Action
118.0	Welcome: The Chair welcomed everyone to the meeting.	
119.0	Apologies: Joan Emerson (Shrub End PPG), Hazel Law (Creffield Road PPG), Neil Lodge (Wivenhoe PPG), & Kevin Sines (Ranworth PPG).	
120.0	Introductions: The attendees all introduced themselves and explained the capacity in which they were attending the meeting.	
121.0	Minutes of Meeting held on 17th July 2016: The minutes of the above meeting were approved.	
122.0	Matters Arising: None.	
123.0	Presentation: Podiatry: As Kevin Sines had been unable to attend the meeting, the presentation on podiatry did not take place. The Chair asked that PM invite KS to present at the January 2017 meeting.	PM
124.0	Group Concerns, Issues & Matters to Share:	
124.1	GP List Cleaning: The Chair drew attention to the report previously circulated and explained that he had produced this for the Health Forum Committee and PPG Liaison groups following national publicity on this topic which had occurred in July 2016. He then asked for any comments on the issue. RHrr felt that it was, in principle, a good idea, although he understood that some people may have concerns. The Chair commented that there would be an appeal procedure for people who were removed from lists.	
124.2	PPG Publicity: The Chair reported that this had been raised in relation to general publicity of PPGs and what could be done over and above the current PPG Liaison meetings and PPG Summits to	

raise public awareness. There was a suggestion to arrange a meeting with some Health Forum and patient representatives to discuss what could be done, with the assistance of the NEE CCG Communications Team, to spread the word further and get more people involved.

RHrr stated that he had been the person that had raised the issue originally. He was quite surprised, having attended the PPG Liaison meetings, that lots of people questioned what a PPG was, as well as what made a good PPG. He referred to the last PPG Summit, saying that a representative from a South Woodham Ferrers PPG had presented and had spoken about "cluster" groups. RHrr went on to say that he felt there was a need to clarify what a PPG should look like. Although he understood that it was up to the members of each individual PPG to make these decisions he felt some guidance from the Health Forum or NEE CCG would be extremely useful. He stated that he met lots of people who wanted to get involved but did not know how to.

RHrr then reported that he had done some research and looked on the internet and had found that CCGs in other areas did publish guidance on PPGs, as well as the National Association for Patient Participation (NAPP) which gave good advice on what to expect from a good PPG. He felt that the PPG Liaison groups should have been made aware of this organisation. The Chair replied that previous meetings had mentioned the existence of NAPP. The Chair then mentioned that it may be a good idea to draw up a list of good practice points for PPGs from a number of different groups.

SM commented that the sharing of best practice ideas was one thing the PPG Summit was designed to do. He also mentioned that a link to NAPP could be set up on the new NEE CCG website and the NEE CCG was also looking to create more PPG engagement in the future. SM also mentioned that a further PPG Summit was being planned for November 2016.

DM felt that a check list of things that other PPGs did, in regard to publicity, would be a good idea. RHrr felt that information on the website would be useful. RR commented that South Woodham Ferrers PPG worked in conjunction with other PPGs. RHrr replied that this may not suit all. The Chair stated that the PPG Liaison meetings, were in effect "cluster" groups. They were basically various PPGs coming together to discuss common issues and concerns as well as picking up ideas from each other. He then clarified that the initial contact on this topic, from RHrr, had been related to spreading the message about PPGs to the general public.

DM asked whether Tiptree PPG meetings were attended by the Practice Manager and/or other practice staff. RHrr replied that they did. DM then asked whether issues were brought to light by interaction with the practice staff. RHrr replied that they were.

PB commented that Mill Road PPG was chaired by a patient representative and the Practice Manager and other practice staff attended meetings. They were currently updating their terms of reference. In relation to terms of reference, the Chair commented that these varied greatly from one PPG to another. JC agreed, she commented that the West Mersea PPG had originally been chaired by the Practice Manager, but after listening to others, they had felt it should be organised differently. The Chair and Secretary were now patients and the Practice Manager attended meetings to give reports.

SM commented that there was already quite a bit of information on the NEE CCG website for PPGs and the organisation also supported PPG Awareness Week. DM asked RHrr whether Tiptree PPG had conducted any outreach sessions at the practice. MB commented that the practice could tell them the busiest day of the week for the practice and that would be the best day to carry out an outreach exercise. PB commented that Mill Road held a regular awareness week. The Chair mentioned TV screens in waiting rooms and suggested that information could be uploaded to these. He also stated that Ambrose Avenue PPG held awareness days as well as producing a newsletter for patients, jointly with the practice.

The Chair suggested that he draw up a list of ideas and circulate it amongst the group for comment. Everyone agreed that he should do this.

RH

	<p>RHrr commented that he was surprised that the PPG Liaison meetings and Summits were not better attended. SM commented that the Summits were designed for current PPG members but the organisation did issue press releases about PPGs and how the public could become involved. The Health Forum also promoted PPGs. He felt that some responsibility also lay with the practices themselves. RHrr felt that some practices did not welcome patient involvement as much as others.</p> <p>Referring to the presentation by Creffield Road PPG at the last liaison meeting, RR commented that this was a good thing for PPGs to become involved in as it showed how effective they could be. The Chair suggested that this sort of activity could be included on the ideas list.</p> <p>124.3 Walk-In Appointments: The Chair stated that this was one of a number of questions raised at a Local Health Matters meeting by an attendee who suggested that practices should have a walk-in service in the mornings and run an appointment system for afternoon surgeries. RR commented that his practice often had a queue outside in the morning for appointments. The Chair clarified that this would be more like the Walk-In Centre at Colchester where patients came along and waited until seen. However, he had heard of another system where patients were given time slots to come along. This helped to avoid large numbers of people having to wait all at once. RR commented that some patients could be seen by the practice nurse rather than a GP.</p> <p>MB reported that receptionists offered appointments with a nurse as an alternative but if a patient wanted to see a doctor they were put on a waiting list and non-urgent cases would see a doctor within 48 hours. The Chair asked whether any surgeries actually offered a walk-in service at present. JC commented that Shrub End used to run one some time ago and patients who arrived before 10.30 am were guaranteed to see a GP.</p> <p>Members agreed to note in the Local Health Matters minutes that the suggestion had been passed to PPGs to discuss with their practices.</p> <p>124.4 Ratio of GPs to Patients: The Chair stated that this was another of the issues raised at a Local Health Matters meeting due to difficulty in obtaining timely appointments. He went on to say that he had looked into this and had found that there was no such ratio. NHS Choices website indicated that there were 0.58 GPs per 1,000 patients across the country but, in reality, this varied considerably according to location. There was not an overall recognised ratio. He then asked attendees what their thoughts were on whether there should be.</p> <p>JC said it was a difficult situation as there was a shortage of people training to become GPs. PB felt the situation was very area dependent. JC mentioned that Mersea was due to have an additional 350 new houses built but would not be getting another GP surgery so the existing one would have to accommodate the increased population. She also mentioned that the surgery had just started to tell people not living on the Island that they would have to leave the surgery and register with a mainland one. PB commented that an additional 1,000 houses were being built in the Mill Road surgery catchment area. The Chair asked whether there would be a new surgery. RR replied that it had been in the original development plan but building one was very different to actually opening a new surgery. The Chair mentioned that parking was also a big issue for Mill Road surgery. RR agreed saying the situation was rather ridiculous as there was spare land by the surgery that was owned by Colchester Hospital.</p> <p>DM felt that there should be a national ratio which should be set according to housing plans. RHrr commented that some practices would cope with increases in population better than others. RR felt that age levels of local populations needed to be taken into account as well. DM asked how discussion on these type of issues could be fed back to the individuals who raised them originally. The Chair replied that, in this case, it would be via the Local Health Matters minutes. He also thought there was nothing wrong in passing comments back through the system but, as it is a national issue, it would need to be taken up through different channels. He suggested that the Health Forum Committee be asked to write to the North Essex MPs regarding this. DM felt this was a good idea and members agreed.</p>	<p>PM</p> <p>RH</p>
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<p>124.5</p>	<p>Appointment Waiting Times: The Chair stated that, again, this had been raised at the last Local Health Matters meeting and reported that the individual concerned had mentioned that there was often a 3 week wait for an appointment to see a GP. RHrr stated that there had been improvements to this. A walk-in service was now being offered but the bottom line was that there were not enough GPs. The Chair asked RHrr to report back at a future meeting on whether the walk-in facility eased the situation. He also commented that another way to help was through the recruitment and use of prescribing nurse practitioners. RHrr commented that there was, however, a loss of continuity through both these facilities. MB replied that patient records were kept electronically so this should not happen. RR agreed and said that these records could also be accessed by the hospital. DM thought that patients may not feel there was continuity and often preferred to see the same doctor. RR said that, in addition to the shortage, GPs ages needed to be considered as well. Many are in their 60's and would be retiring in the next few years and there were not enough in the system to replace them.</p> <p>The update will be added to Colchester Local Health Matters minutes.</p>	<p>PM</p>
<p>124.6</p>	<p>Mental Health: The Chair reported that a mental health form had been chaired by MP Will Quince (WQ) in order to discuss greater parity of esteem for mental health patients. He reported that WQ has a particular interest in mental health and is concerned that it takes second place to physical healthcare. The Chair attended this forum in his capacity as Chair of a voluntary organisation. He reported that the Health Forum did not receive an invitation but the NEE CCG Chief Officer Sam Hepplewhite had attended as had the heads of a number of other organisations.</p> <p>The Chair went on to say that the meeting had basically been a table discussion on working toward fairer treatment for mental health patients. Findings were still be compiled and the Chair will report back on this as soon as he is able. DM asked whether the organisations present would receive extra money from the Government. The Chair replied that there would not be any extra money but the idea was to see if more could be done locally and whether money could be moved around. RR stated that a report from NHS England had been issued in regard to mental health and there was a drive to provide earlier intervention. The Chair mentioned the Improving Access to Psychological Therapies (IAPT) services which had not been in existence two years ago as well as the Children's and Young Persons mental health service</p> <p>DM wondered, how, in real terms more money could be diverted into mental health when the Government had indicated that no more funding would be available. SM felt that it was good that such discussions were taking place. RHrr questioned where current funding was being spent because he did not feel that there had been improvements to the service.</p>	
<p>124.7</p>	<p>Restricted Services: What services have the NEE CCG removed or reduced its support for since 2014 & what additional service removals or amendments is the NEE CCG currently considering: The Chair felt that this was a difficult question to answer. He said that such services could be many and varied. JC asked whether it covered GPs no longer being able to perform minor surgical procedures. The Chair replied it referred to things such as the withdrawal of prescriptions for gluten-free food and pharmacy managed repeat prescriptions. Referring to the latter, SM commented that it was widely recognised that there was a high level of wastage around this. JC agreed with this and RHrr felt that this had been a good outcome from the Big Care Debate.</p> <p>RHrr went on to say that he was, however, concerned about the restriction of surgery for patients who were smokers and/or obese. The Chair stated that this had been brought into effect due to the fact that there were health risks associated with elective surgeries on obese patients or those who smoked and, in addition, their recovery from surgery may not be as good. RHrr disagreed, and felt it was wrong to refuse treatment. MB agreed with the Chair saying that risks were increased for such patients. The Chair commented that individuals needed to care for their own health and emphasised that elective procedures were not being refused, but delayed until the patient had managed to lose some weight and/or stopped smoking.</p>	

	<p>In regard to future plans, the Chair advised those present to keep an eye on Health Forum Committee and NEE CCG Board minutes where any such issues would be detailed. RHrr asked whether they were on the website. SM replied that all policies could be found on the website.</p> <p>JC raised a concern about ear syringing and asked whether the change at Mersea was a policy change across the North East Essex area or something that the Mersea practice had instigated. PM is to investigate.</p>	PM
124.8	<p>PPG Organisation: My PPG is not active: This item has been discussed under 7.2.</p>	
125.0	<p>NEE CCG & Health Forum Activities:</p>	
125.1	<p>Self-Care Week: SM reported that this would run between 14th & 20th November 2016 and the NEE CCG and Health Forum representatives would be out and about across North East Essex promoting self-care. He asked for any other ideas to be passed on to him and reported that there would also be initiatives on social media.</p>	
	<p>RR suggested that information be put on practice waiting room TV screens.</p>	
125.2	<p>PPG Summit: As mentioned earlier the next PPG Summit will be held in November 2016 and SM asked those present for any ideas for topics to be covered. He hoped that there would also be an early preview of the new NEE CCG website.</p>	
125.3	<p>Lunch & Learn at CCVS – 7th November 2016: The Chair reported that the Health Forum Committee would be presenting at this at the CCVS offices in Colchester.</p>	
125.4	<p>Mental Health Governors Public Meeting – 9th November 2016: The Chair reported that this would be held at Colchester Town Hall from 2pm and the main topic would be around help provided to ex-service men in the town. There would also be discussion about the possible merger with the trust in the south of the County.</p>	
126.0	<p>PPG Activity Initiatives – What’s Happening Where?</p>	
	<p>Winstree Road: MB reported the next PPG meeting is being held on 18th October 2016.</p>	
	<p>Mill Road: PB reported that the next PPG meeting would be held on 18th October 2016 and the new terms of reference would be discussed.</p>	
	<p>West Mersea: JC reported that the PPG was trying to recruit more members and had been doing lots of leaflet drops. They still did not have a permanent Chair.</p>	
	<p>Tiptree: RHrr reported increased positivity about the PPG. The surgery had begun a walk-in service and employed a pharmacist. They were trying to address the shortage of doctors. The PPG was holding more regular meetings.</p>	
	<p>Ambrose Avenue: The Chair reported the PPG was meeting monthly. Virtual members were now referred to as support members as it was felt that there had been some confusion as to the meaning of “virtual”. Outreach sessions were planned for 18th October 2016 at both surgeries as well as activities during self-care week.</p>	
	<p>Discussions were also underway with the practice about providing a form of engagement similar to that at Creffield Road for individuals identified by the practice. £641 had been raised at the annual flu day and this money would be used towards funding a suitable room. Age Concern would also be assisting with this.</p>	
	<p>There were also discussions taking place with the practice about potentially changing the layout at one surgery as it was not considered to be particularly user-friendly.</p>	
127.0	<p>Any Other Topics: RHrr voiced a concern regarding a rumour that the Walk-In Centre at Colchester would be closing. The Chair replied that the Walk-In Centre was included in the Urgent Care Review but this was still in the process of being formulated at present. SM confirmed that there was</p>	

	<p>no formal plan at present. However, there were engagement exercises underway to find out how people use Urgent Care services but there had been no talk about closures. He asked RHrr where he had heard this? RHrr replied that there were lots of rumours particularly as a review was due to take place.</p> <p>The Chair drew attention to two current questionnaires on GP services and the re-design of the NEE CCG website and asked attendees to take copies back to their PPGs.</p> <p>The Chair then thanked everyone for attending and closed the meeting.</p>	
128.0	<p>Date of Next Meeting: This was set for Monday 16th January 2017 at 2:00 pm and would be held in Elm Meeting Room at Aspen House, Stephenson Road, Colchester, CO4 9QR.</p>	