

Launceston Medical Centre Patient Participation Group (PPG)

Minutes of the Meeting, 5 October, 2017, at Launceston Medical Centre

1. Chairman's welcome and introductions

Secretary Patty Taylor welcomed new member Paul Ford and members introduced themselves. They were Joan Heaton, Dawn Rogers, Rosemary Bromwich, Les Whaley, Steve Dymond, Jo Keogh, Gill Brown, Patty Taylor, Peter Harper (practice business manager) and Andy Yardley, (deputy practice manager and IT manager).

2. Apologies

There were apologies from Maureen Amy (chairman), Pam Davey (vice chairman), Elizabeth L'Estrange West, and Cym Downing.

In the absence of the chairman, secretary Patty Taylor chaired the meeting.

3. Minutes of last meeting

Matters arising

League of Friends

Patty reported that Maureen had spoken with the secretary of the Launceston Hospital League of Friends and formally invited them to send a representative to our meetings. Peter reported that he had received a phone call from the League of Friends saying that unfortunately no-one would be able to attend our meeting this evening, but inviting us to send a representative to their meeting on Monday, 16 October, at the hospital at 7.30pm. Joan, Les and Steve volunteered to attend.

Action: Joan, Les and Steve

Launceston Hospital – Urgent Care Centre

Patty reported that a letter had been sent to Cornwall Council urging that Launceston Hospital become an Urgent Care Centre. The letter was copied to MP Scott Mann, and to Dr Iain Chorlton, Chair, Kernow CCG and Chair of Clinical Practitioner Cabinet (PC); Phil Confue, Chief Executive, Cornwall Partnership Foundation NHS Trust; Councillor Margaret Young, The Mayor, Launceston Town Council; and Neil Burden, Chair, Launceston Community Network Panel. (Letter circulated with minutes)

The MP had responded with a supportive note and a copy of a letter he had sent to Jackie Pendleton, Interim Chief Officer, Kernow Clinical Commissioning Group, on the same subject.

Neil Burden had also responded positively and our letter had been circulated to members of the Community Network Panel. He also suggested three other contacts to whom our letter should be copied:

Rob.rotchell@cornwallcouncillors.org.uk (Cabinet Member for Adult Care)

Adam.paynter@cornwallcouncillors.org.uk (Cornwall Council Leader and Chair, Health & Wellbeing Board)

Armand.toms@cornwallcouncillors.org.uk (Chair – Health and Adult Social Care Overview and Scrutiny Committee)

The secretary had forwarded our letter to these three councillors.

Joan said the community petition, with over 1,000 names, urging that the hospital become an Urgent Care Centre had been given to Kate Kenally, chief executive Cornwall Council. The petition was still open so people could still sign.

Gill expressed concern that there was no mention of Minor Injuries Units in the Shaping Our Future document. She said that if they all closed, it would cause severe pressure on other areas of the health service.

4. Report from Deputy Practice Manager and IT Manager

Andy reported that both Arrivee machines were now operational for patients to check in. Early teething problems had been resolved. Another function would be added shortly which would allow patients to check that the practice had their correct contact details. The last four digits of their telephone numbers would be displayed and patients would be able to amend them: then and there at the screen or, if they were concerned about privacy, give the updated details to reception.

The process of registering patients with Systmonline was continuing successfully and nearly 1,000 patients were now registered. A Q and A guide had been produced to help patients understand the system and clarify some of the messages.

It was hoped that the patient summary care records would go live later this month. Records from many practices across the country were already live in the national scheme which allows medical practitioners from services like A & E or centres or other parts of the country to access basic records showing what medicines patients were taking and giving details of allergies.

5. Practice Business Manager's report

Update on expansion plans

Peter said the medical centre was still waiting for the publication of the Premises Costs Directions (relating to NHS funding towards the actual build). The publication had been scheduled to appear in December 2016 and it was now suggested that it might be published in December in 2017. At the moment the delay was not critical, he said, because due diligence processes were underway but it would soon become of concern.

The stance of NHS property services over the land purchase was of more immediate concern. The cost of the land for the new build had, according to NHS property services, increased more than three-fold in the five years since the original price was agreed, said Peter, and that was completely unacceptable. Therefore, the medical centre had called in the district valuer to give a professional, external valuation. The report of the district surveyor was awaited.

Members of the PPG expressed their concern over the delays, which were significantly affecting both staff and patients, and discussed ways in which they could increase pressure on the NHS. It was agreed that once the district valuer's valuation had been received, the PPG should invite MP Scott Mann to their next meeting to discuss how best to tackle the NHS. A provisional date of Friday, 17 November, was set for this meeting. In the meantime, the secretary was requested to liaise with the business manager and once the district valuer's report had been received, to contact the MP and arrange the meeting.

Action: secretary to liaise with business manager and MP

There was discussion on how the PPG could increase pressure on the NHS to resolve the issues holding back the expansion of the medical centre. These included both getting significant

community support in and around Launceston and taking our concerns directly to the head of the NHS and/or Jeremy Hunt. It was agreed to discuss possible courses of action at our November meeting, when the district valuer's report had been received.

It was also felt that the PPG should update community groups and other potentially interested parties on the current situation.

Action: secretary to prepare an update for Couns Neil Burden and Armand Toms

Patient numbers

Peter reported that the Medical Centre now had more than 18,000 patients registered.

Staff

A new lady doctor would join the practice in January and would work two days a week. She had already done some locum work and had offered to join the practice because she enjoyed working there.

The two paramedics were now each working four days a week and making a positive contribution to the workload at the medical centre by undertaking home visits as well as seeing patients at the centre. It was hoped to make their role more proactive so they could spend more time with frail or incapacitated patients.

The receptionists would be undertaking training on a Cornwall-wide initiative called Active Signposting so they could ask the right questions to help patients choose their best options.

6. Update on Hospital Transport Situation

Les gave the group a comprehensive update on the current situation regarding the provision and funding for hospital transport. The current arrangements would be in force until the end of the month and the proposed changes would affect users with different conditions in different ways. Implementation of the changes had already been put back a month and Les said that there were so many grey areas relating to the changes that it was possible they would be deferred again. Because of the complexity of the proposals, Les said he would provide a briefing document for the group.

Jo said the proposed changes and the confusion over their implementation was causing unnecessary anxiety for patients.

It was said that the temptation might be for doctors to keep patients in hospital who were receiving a course of treatments involving several visits a week and found the new transport arrangements were too difficult or too stressful.

Action: Les to provide background briefing on transport situation

7. Any other business

E-consultation proposals

Members who had read the documents relating to e-health and e-consultations felt that they contained some ideas that could be beneficial (such as remote advice on blood pressure) and others which required further consideration (such as Skype consultations). It was agreed that all procedures that could help relieve the pressure on the current system should be investigated fully.

Benches

Peter said he needed to follow-up with the chairman a patient suggestion that benches be installed outside the surgery entrance.

Business Manager's retirement

Peter reported that he would be retiring at the beginning of December. Andy would become practice manager while Peter would continue to work for the practice – remotely – on business management matters. In that role, he would continue with the centre expansion plans and it was his intention to see the matter through to completion.

Gill, Jo and Dawn voiced the group's admiration for the patience, expertise and optimism with which Peter had handled the various stages – and many setbacks – of the expansion plan progress.

Launceston Hospital update

Joan said the beds were closed at the hospital during the renovation work. Beds for patients from the Launceston area were temporarily being allocated at Bude (4) and Liskeard (6) which left a shortfall of nine. It was anticipated that the renovation would be completed in November and, in the meantime, all other departments at the hospital were operational.

8. Date of next meeting

The meeting closed at 7.20pm and a provisional date for the next meeting was set for Friday, 17 November, at 6pm