

## MINUTES

### ESSEX AND SOUTHEND LINK: WEST ESSEX LOCALITY MEETING

**Date and Time** Wednesday 12<sup>th</sup> May 7pm – 9pm  
**Location** Budworth Hall, High Street, Ongar CM5 9JG  
**Organiser** Julie Harkus (minute taker)

**Attendees:** John Carr, Ken Hearn, Margaret Fitch, Roy Howland, David Jackman, Joy Das, John Thompson, GF Edwards, TA Edwards, Mary Roles, Peter Fitch, Dorreen Gilmour, Edwyn Gilmour, Tony Hunter, Public Governors NEPFT – Andrew Smith and Sheila Jackman.

**Guest speaker:** Dr Rory McCrea – Special Medical Advisor, NHS West Essex

	Topic	Discussion	Action by who/ when
1	Welcome, Introductions & house-keeping	John Carr, Chairman, welcomed everyone to the meeting and gave a brief overview of LINK and the locality group. Julie ran through the housekeeping arrangements for the venue.	
2	Declarations of Interest	Andrew Smith and Sheila Jackman declared they are public governors of North Essex Partnership NHS Foundation Trust (NEPFT) – a provider trust.	
3	Managing healthcare in hard financial times – Dr Rory McCrea (NHS West Essex)	<p>John introduced Dr Rory McCrea – GP and Special Medical Advisor for NHS West Essex.</p> <p>Rory explained that he is a practicing GP based in Waltham Abbey. The health service has seen unprecedented growth over the past 10 years and this continued growth cannot be sustained. In order to reduce costs a whole system approach is needed that identifies duplicated management costs. There may be a threat to front line services but if there is a change to how care is delivered, it will make a difference and be protective of front line services. A real eye on quality is needed in these difficult times.</p> <p>The Primary Care Trust (PCT) needs to invest in community services and the provider arm so that services are delivered closer to home. There has been a cultural change within the PCT which has enabled a new way of working – more project management experience is reaping benefits. Outpatient activity is being directed into the community and A&amp;E attendances are being redirected so that hospital resources are reduced.</p>	

Prescribing of drugs is also being carefully monitored. Rory commented that access to good treatment was not being denied but clinicians are being open and honest when difficult decisions need to be made. More control is taking place locally for specialised commissioning, allowing money to be spent more wisely.

The following questions were asked by attendees:

**Why are surgeons carrying out unnecessary procedures?**

As an example, there is no financial benefit for an orthopaedic surgeon to carry out a knee replacement. It is evident world wide that where doctors are involved financially with budgets there is better management of that budget and of the patient.

**In some parts of the country doctors are still providing the out of hour's service. Wouldn't the money be better spent on local GPs?**

GPs are contracted to work from 8am to 6.30pm. The government's out of hour's service costs a lot more than the GP one did. Most of the work is being repatriated to local GPs but the BMA does not see GPs providing the out of hours service but being involved in the commissioning of it.

**When my daughter was 4 months old she was diagnosed with severe eczema and needed to be hospitalised (she is now 4 years old). She was under the care of a specialist at Holly House Hospital and now we see the GP. Various medications have been prescribed to cope with the condition. Cheaper alternatives are being imposed on us and we have raised this issue with the help of PALS. These NHS cutbacks are affecting health care.**

Under the NHS Constitution, patients have a right to know why the PCT will not prescribe certain medications. There is a list of restricted products but there is a right to appeal.

Rory offered to talk to the gentleman further after the meeting.

**Before the election, the health service knew there would be less money available. Now we have a new government and we are being told there will be cuts – is this a double whammy?**

The global financial crisis started about 2 years ago. It took the PCT about 6 months to understand the impact of this so for the past 18 months we've been prepared for it. The NHS nationwide will need to have cost efficiencies in the region of £20bn.

**Hasn't the PCT always lived within its means?**

Yes – for the past 9 years it has managed its annual budget well – this is currently £420m.

**Wasn't money loaned to the SHA (Strategic Health Authority) and weren't we due to get it back?**

That's correct and the money has been paid back.

**Do you anticipate that the number of PCT's is going to reduce?**

The East of England SHA has imposed management savings on the PCT's. The reduction from 5 to 2 in Essex is not an inevitability.

		<p><b>The NHS budget has increased 3 fold in the last 10 years but there are never enough nurses on the wards to help with feeding and personal care. If the budget has increased and that has not achieved adequate care of patients, what hope is there to improve the patient experience in hospital? If it hasn't been done with extra money, how will it happen with funding cuts?</b></p> <p>Patients and carers need to voice their concerns about the lack of help for bathing and feeding patients and make complaints. It's clear that reforming how the service worked was not achieved with the extra funding.</p> <p>John stated that patient consultation needs to improve and referred to a recent news article in the Hertfordshire Mercury. The number of therapists at PAH has hit an all time high as 56 are now employed by PAH after responsibility was transferred from NHS West Essex. How are patients going to get to the therapists – has any consideration been made to transport services?</p> <p>John also posed the question of whether outsourcing care is a way of privatising the NHS.</p> <p>John thanked Rory for attending the meeting and for his frank and honest answers to the questions posed.</p>	
4	Project update – development of social care booklet	<p>Julie projected the draft social care booklet so that attendees could see what had been achieved so far. Claire Greenhill has been commissioned to produce this for the locality and it will be produced in other formats (CD, large font). Julie explained that 1500 copies would be printed though this figure could increase if funding allowed. The final version will be posted on the LINK website.</p> <p>Members commended the locality group for the idea and some members were keen to have a copy of the final document. Julie will inform members when it is available.</p> <p>A consultation is currently taking place on the document – the NHS West Essex reader's panel are helping with this. Mary Roles and Dorreen Gilmour offered to respond to the questionnaire.</p>	JH  MR & DG
5	Approval of minutes for previous meeting – 13 <sup>th</sup> April 2010	The minutes were approved by Andrew Smith.	
6	Matters arising	<ul style="list-style-type: none"> <li>• <b>Page 5 item 9 – AOB</b></li> </ul> <p>A request has been made to the PCT for an update on the provision of a new GP surgery at Stansted Mountfitchet. Michelle Bassett, senior contracts manager, has informed the LINK that discussions have taken place between the developer's agent and the District Valuer. A rental figure is yet to be agreed as the type of lease is also being negotiated.</p>	

		As soon as a decision is made regarding the lease, the PCT should be able to go to planning stage. The PCT would anticipate that planning stage to completion of build is approx. 18 months and would hope for occupation in autumn/winter 2012.	
7	Election process 8 <sup>th</sup> June 2010	Julie explained that the election of officers for the locality group would take place at the AGM on 8 <sup>th</sup> June. Self nomination forms were available at the meeting for locality Chairman, Vice Chairman – Epping Forest, Harlow, Uttlesford and countywide coordinating group representative.	
8	Any other business	<ul style="list-style-type: none"> <li>The west Essex locality is planning an older people's conference on 16<sup>th</sup> July at Monks Barn, Harlow Study Centre to find out what services older people want. Essex County Council (ECC) are planning a new community wellbeing centre in the town (a one stop shop for health and social care advice) and the consultant appointed to lead on this will be attending. This will give local people an opportunity to influence what services are needed.</li> <li>On 11<sup>th</sup> May, John Carr and Julie Harkus met with Hertfordshire LINK to talk about joint involvement with PAH and cross border issues. Regular meetings between the two LINKs will take place.</li> <li>It was agreed that the locality would submit a response to the Department of Health consultation: "Your GP, your choice, your say: A consultation on how to enable people to register with the GP practice of their choice." Joy Das, Margaret Fitch and Dorreen Gilmour offered to collaborate on a response. Julie will arrange a convenient date and venue.</li> </ul>	JD, MF DG & JH
9	Dates of future meetings	<p>Tuesday 8th June 2010 – AGM at Park Inn Hotel, Southern Way, Harlow 7pm – 9pm (refreshments from 6.15pm)</p> <p>Wednesday 14th July – Foakes Hall, Great Dunmow 2pm – 4pm</p> <p>Wednesday 15th September – Epping Forest area</p> <p>Tuesday 12th October – Harlow</p> <p>Tuesday 9th November – Uttlesford area</p> <p>Tuesday 7th December – Epping Forest area</p>	

