

# MINUTES OF THE GREAT BENTLEY PATIENT PARTICIPATION MEETING

HELD ON THURSDAY 21 MAY 2015

AT 6.30PM IN THE MITCHELL ROOM, GREAT BENTLEY VILLAGE HALL

Chaired by Melvyn Cox

Present: Barry Spake, Communications Officer  
Charles Brown, Vice Chair/Treasurer  
Judy Ward, Secretary  
Richard Miller, Practice Manager  
Dr F Bhatti, Senior Partner  
+ 22 Members

## 1. Welcome and Apologies for Absence

The Chairman welcomed everyone to the meeting and said that unfortunately our speaker, David Linghorn Baker, Lead Governor at Colchester General Hospital, is ill and therefore unable to attend this evening.

## 2. Minutes of the last Meeting

No points were raised and approval for the Minutes was given.

Two members said that they had not received the Minutes.

Action: Barry to check email addresses with these members.

## 3. CCG Board Meeting Report – Alan and Judy Bishop

Judy and Alan said there was little to report but they had asked the questions raised by the PPG regarding smoking and the taking out of equipment in the hospital grounds. The Board indicated that incidents of smoking will be looked at. With regard to the taking out of equipment it was stated that the hospital cannot stop the freedom of patients' movements.

Judy said this will be pursued.

Melvyn asked Lynda McWilliams if she had asked David Linghorn Baker these questions (an action point from our last meeting). Lynda said she had and was expecting the answers tonight but, with David's absence due to illness, we would have to wait.

Judy went on to advise that there are three new non executive directors on the CCG Board, and one lady member is leaving. Alan Rose, the new Chair, seems very efficient and communicative. The date of the next CCG Meeting is Thursday 28 May 2015.

Judy then gave a very informative and emotional account of the Care of the Elderly in relation to their dear friend Audrey who was a patient at Colchester Hospital and who has since sadly died. Judy stated that this written account is to raise awareness of issues that are happening in the hospital. There are carers and patients who are not able or well enough to publicise these issues. Judy stated that this account of what happened is not a formal complaint. She described her account as "a wake up call".

Judy and Alan's friend Audrey, in her 80s, was a resident in a local care home and suffered from dementia. She had a fall and broke her hip. Judy and Alan went with her to the hospital and their experiences "left a lot to be desired".

In A&E the situation was chronic. There was a lack of pillows – staff were using rolled up bedcovers. The clinicians seemed to have problems with the stats. Audrey was eventually moved to Fordham Ward (orthopaedics) and she was operated on for her broken hip.

Judy was very frustrated as some of the nurses did not seem to appreciate Audrey's condition of dementia and were shouting at her as if she was deaf. Audrey became very distressed, especially when procedures were carried out.

Audrey contracted MSRA and was moved to a side room without notifying Judy and Alan which was another distressing situation.

Audrey's dementia worsened. The physiotherapy left Audrey exhausted, so much so that she had no energy to eat despite Judy trying to encourage her. Menu sheets had been placed on Audrey's table and food left on green trays. Judy said this was totally unacceptable for a patient with dementia being unable to read the sheet or feed herself.

Judy described Audrey as becoming frailer and tiny. She was very distressed and Judy and Alan would often find her with very little on, apart from the hospital gown, sat on an incontinence pad and no blanket. On one occasion Audrey had wet hair which was unexplained. When Judy asked questions to the nursing staff she was told that they had run out of clean gowns. Judy said this was no excuse. Audrey became morose and comatosed.

Eventually Audrey was discharged from the hospital and was taken back to The Oaks by ambulance. Audrey appeared alert but was incoherent. She was ravenous too. Her weight loss was extremely apparent – she had lost a stone. She also had a bed blister and a raw bottom. The Oaks contacted the Matron. The Oaks was unaware of the MSRA until they received the discharge notes. Judy and Alan said The Oaks had been misled by the hospital as to Audrey's condition. Upon her return to the home Audrey had to be moved to another room as she was attempting to move around and there was a marked change in her condition

To conclude, Judy observed in the hospital a lack of the necessary skill, care and empathy needed for Dementia Care. She questions the training of nurses with regard to "the needs of the patient".

Judy has raised her observations and experiences in writing with the hospital but states that the written response is unacceptable. She has since requested a further meeting with Barbara Stuttle, Director of Nursing, together with the Matron and Sister who wrote and signed the written response.

Judy stated that Bernard Jenkin, MP, was shocked at Judy's account. He offered his support and Judy has since requested a meeting with him.

On concluding her account, Judy gave several suggestions to ensure elderly patients with dementia are cared for with humanity:

- Introduction of rounds in the wards to ensure patients have water and are not slumped in their chairs.
- Ensure patients are changed when needed
- Ensure nursing staff are trained to care for the elderly with compassion, empathy, humility, kindness and patience.
- Ensure patients' dignity is prioritised by keeping the patients clean, dressed, shaved and hair brushed
- Ensure dementia patients are not given instructions they cannot follow such as "press the red button".
- Ensure dementia patients are not asked questions about their condition as they cannot remember.

Dr Bhatti asked Judy if she had considered submitting her account to a Journal as it is very well written and insightful. A suggestion of a submission to the Dementia Society was made.

Discussion took place.

Judy said she had been in touch with many people at a high level in society but her plea had not been taken up. The contact with Barbara Stuttle was highlighted – Barbara had said she would bring Judy's letter to the attention of other senior members of staff but to date this had not happened. Judy had telephoned Barbara again.

The nursing staff in the hospital and those of Elmstead Day Centre were discussed. Dr Bhatti said that you cannot compare the nursing in the Day Centre with nursing on the wards as the work and hours are very different; it is non-comparable. Dr Bhatti also said that there is a definite effect from the Government's lack of funding which will get worse.

Melvyn thanked Judy for her very moving account and for sharing her experiences and observations.

The meeting broke for refreshments. Tea, coffee and cakes kindly provided by Judy and Alan Bishop.

The meeting resumed at 7:25pm

#### 4. **PPG Awareness Week 1-7 June 2015**

Melvyn circulated the printed PPG leaflet for members to peruse. Melvyn explained that members of the Committee will go into the surgery each morning, hand out the PPG leaflets and talk to patients about the PPG. Patients will be encouraged to attend the PPG Meetings.

#### 5. **Hollies Surgery News**

Richard reported the following:

- The Government has decided that everybody under the age of 75 should have a named GP. He feels this is only an administrative stamp and makes absolutely no difference to the services provided. It is not needed and is unnecessary.

A comment was made that patients should see the same GP.

Richard said that a patient can book an appointment with a GP of your choice. It is more important to get an appointment, rather than who with. If it is an appointment booked on the day, then it will probably be with a different GP.

- News: up to date news will be included in the next newsletter.

Discussion took place:

A comment was made regarding NHS targets and said "looking after the patient" should be the number one target.

Melvyn asked about current waiting times.

Dr Bhatti replied: about three weeks to see me for a non-urgent appointment.

Richard said that there are no plans to get more doctors – there is still a shortage of doctors. The Government quoted an extra 5000 doctors but from where?

A comment was made about the 150 local houses being built and how we could cope with the doctor shortage.

Richard said the patient numbers will have to increase dramatically to get funding. There is no more room to accommodate another doctor nor NHS funding.

Dr Bhatti said any extension would be funded by the partners. There is no money in the NHS (and, if you did apply for this, the answer would be "no"). Resources will be cut.

The Labour Party was the only party to invest in the NHS and, consequently, there is a huge problem with the NHS with worries about its future.

"Care Closer to Home" was mentioned and the fact that it will be led by an organisation outside the NHS.

Comment was made about the Government's intention of an £8 billion investment in the NHS but Dr Bhatti and Richard said there that was no depth in this statement as the Government was taking away £22 billion. Older GPs will leave the NHS as will some of the younger GP trainees.

#### 6. **AOB**

Melvyn thanked Judy and Alan Bishop for the wonderful cakes and said they had generously paid for the tea and coffee.

#### 7. **Date and Time of Next Meeting:** Thursday 18 June 2015 at 6:30pm in the Mitchell Room.

The meeting closed at 19:40.

Judy Ward