

**NHS Warwickshire North Clinical Commissioning Group
Patient Group Forum
7 March 2016, 6:30pm - 8:30pm
George Eliot Hospital, GETEC, Raveloe Conference Room.**

Minutes

Attendees:

Terry Spicer (TS)	Arbury Medical Centre	Bill Nicklin (BN)	Manor Court Surgery
Adrian Edgington (AE)	Chapel End Surgery	Alan Nicholls (AN)	Dr Reily & Partners Surgery
Peter Eltringham (PE)	Bulkington Surgery & GEH MAP	Maurice Charley (MC)	GEH Advocate
John Beaumont (JB)	Rugby Road Surgery	Kenneth Newborough (KN)	Whitestone Surgery
David Simkin (DS) Deputy Chair	Coleshill Surgery	Joan & Peter Baber (JPB)	Old Cole House Surgery
Jeff Higgs (JH)	Old Mill Surgery	Ken Pritchard (KP)	Bulkington Road Surgery
Len Makin (LM)	Healthwatch Warwickshire	Elizabeth Pfute (EP)	Making Space Warks
Christine Pfeiffer (CP)	Grange Medical Centre	Karen Ashby (KA)	NHS Warwickshire North CCG
Gill Davis (GD)	Atherstone Surgery	Rebecca Bartholmew (RB)	NHS Warwickshire North CCG
Hilda Gledhill (HG)	Pear Tree Surgery	Jenni Northcote (JN)	NHS Warwickshire North CCG
Sheila Hinds (SH)	Chancery Lane Surgery	Andrea Clarke (AC)	NHS Arden & GEM CSU
Stan Orton (SO)	PGF Chair and Dordon Surgery	Nadine Pearson (NP)	NHS Arden & GEM CSU
Kalbinder Dayal (KD)	NHS Arden & GEM CSU		

Apologies: Andrea Green, NHS Warwickshire North CCG
Dan Ibeziako, NHS Arden & GEM CSU
Margaret Bell, Camp Hill Surgery
Di Kent, Whitestone Surgery
Hay Sharma, Whitestone Surgery
Paul Bonner, Manor Court Surgery

Item No:	Agenda item & discussion	Action	Lead officer
1.	Welcome and apologies SO welcomed everyone to the meeting and gave apologies received.		
2.	Minutes of the last meeting		
2.1	The minutes of the last meeting were agreed. It was noted that there was one amendment to be made.	<i>DI to place a copy on the website</i>	<i>DI</i>
	Matters arising		
2.2	Children Services - RB reported that there was still no further information on this, therefore still on going.	<i>AG to report back to group when info available</i>	<i>AG</i>
2.3	MSK and diabetes programmes – JN updated on both programmes. There are two pieces of work with a time line in place and communications and engagement has been identified. JN advised both programmes are going forward.		
2.4	NHS 111 visit- CP advised she had sent the presentation to DI to place on the website. NP offered to check on the members area and discuss with DI . DI will report back to CP who offered to send again if needed.	<i>NP to check members area and discuss with DI</i>	
2.5	Members of the group are to send their details to DI if they would like to be involved in VoiceAbility, a mental health advocacy group.	<i>PGF members to send details to DI</i>	<i>ALL</i>
2.6	Following an issue at previous meetings re PE's mother. PE advised he still hadn't had a copy of the letter from AG. KA suggested DI to take this up with AG and contact PE directly.	<i>DI to contact PE directly</i>	<i>DI</i>
2.7	Keep calm and be prepared. KA advised no feedback was reported from any PPG on this. EP advised their events were very well attended. JN advised the CCG had really good feedback.		
2.8	Healthwatch are inviting people to talk about what makes a good experience around health and social care, to understand from across the county what people see as being really good, and what is the opposite. Healthwatch will hold further similar events over the coming months, and there will be a report in May 2016.	<i>Members of PGF invited to attend</i> <i>LM will report back at May 2016 mtg.</i>	<i>ALL</i>
2.9	DS had an issue trying to get an appointment for his daughter in law for a mental health need. They were told they couldn't do		<i>JN</i>

<p>2.10</p> <p>2.11</p> <p>2.12</p>	<p>anything for her and they should approach the Samaritans. DI has passed this to the Partnership Trust and will chase for a response. DS passed the NHS No involved to JN in confidence to pass to DI as requested.</p> <p>Previously SH had stated that text messages from outpatients department saying that people have an appointment don't tell the patient who the appointment is with, and this is difficult for people who use more than one department for their health needs. Even if phoned to confirm an appointment but then the patient doesn't know who it is with. It was suggested that at the end of the text they should state which department it is with. JN will pick this up.</p> <p>If members do not know their website password they should email DI. PE reported he was having difficulty actually loading information onto the website. NP to ask DI to help PE.</p> <p>AE reported a new Dementia Café drop in at St Michaels, on Wednesdays, 3pm to 4pm.</p>	<p><i>JN to discuss with DI and report back to DS</i></p> <p><i>JN will report back to PGF at May2016mtg</i></p> <p><i>DI to contact PE</i></p>	<p><i>JN</i></p> <p><i>DI</i></p>
<p>3.</p> <p>3.1</p>	<p>CCG Update</p> <p>CCG year-end position</p> <p>RB reported that the CCG do have financial issues.</p> <ul style="list-style-type: none"> • Financial issued had been overlooked. • Budgeting and planning for the year has been based on this year's budget. • After the implementation of remaining deficit £9.8m for next year making efficiency savings of £9.7million. • QUIPP plans / Financial recovery plans • Quality impact assessments will be done • The recovery may take up to 24 months <p>The previous Financial Officer has left the organisation and an Interim Financial officer is in place - Adrian Stokes</p> <p>The CCG will be interviewing for Chief Operating Officer and a Financial Officer over the coming weeks.</p> <p>JF asked what were the financial issues which had been overlooked. RB advised there has been an external review for CHC.</p> <p>BN reported his concerns on how the CCG had got the figure down from £10m to the figure mentioned of £8.5m today. How</p>		

	<p>will the service continue for patients and transparency is needed.</p> <p>RB reported that all practices had been invited to meetings on the position. RB asked BN to be part of a group to give scrutiny to the CCG.</p> <p>RB is confident that schemes will happen without affecting patients.</p> <p>AE asked if this deficit had anything to do with the decision to change the walk in centre at Camphill. JN advised this had nothing to do with this decision.</p> <p>RB reported two of the lay members roles are out for advert. The CCG is looking to strengthen these posts with someone with a financial background.</p> <p>3.2 Urgent Care and walk in update JN reported on the consultation which was carried out over Nov and Dec 2015. Over 650 responses were collected and over 1000 conversations took place.</p> <p>A copy of the consultation report can be found on the WNCCG website. The outcome of the consultation indicated an option to relocate services to GEH.</p> <p>The CCG is working on timeline to transfer the service to the GEH site.</p>		

	<p>The PGF members were asked their thoughts on the leaflet and how it could be improved.</p> <p>Kalbinder recorded all views given and will report and send the revised copy back to group and practice managers with all changes via Dan Ibeziako for the next meeting. Kalbinder asked members if they have any other feedback that hadn't been covered to email her directly Kalbinder.dayal@ardengemcsu.nhs.uk</p> <p>Kalbinder thanked the group for their time and help.</p>		
5.	Issues Log and update from local PPG groups and Healthwatch		
5.1	2013.001 – Patients records missing at outpatient appointment. It was agreed that MC will update at the May 2016. The Quality Review Committee are now involved. Issue left open.	<i>MC to feed back to PGF at May 2016 mtg</i>	
5.2	2014.11 – Medication on discharge – MC reported there is action being taken on this issue. MC will update at July 2016 meeting. Issue left open.	<i>MC to feed back at July 2016 mtg</i>	
5.3	2015.15 – MRI Scans results. Issue closed. JN will pick this issue separately with practice managers as this issue was a personal experience.		
5.4	2015.17- Chiropody- Issue closed. Dan Ibeziako to pick up example that AN had sent and get back to him directly		
5.5	No new issues were raised		
6	Chairperson's report/GEH Patient Advocacy Forum update		
6.1	SO had a meeting with Head of Nursing at GEH re Lidgate House. RB advised CQC are involved in this matter.		
6.2	SO also reported the Patient Advocacy meeting problems are that the Senior Management do not turn up to these meetings which has been escalated higher . JN offered to raise this with GEH patient engagement lead when she next meets with them as this is not acceptable.	<i>JN to report back at May 2016 PGF mtg</i>	<i>JN</i>
7	Any other business		
7.1	GD reported she had received two reports of problems with parking at UHCW and worried this could result in more DNA's. Car parks are showing there are spaces but patients find the opposite		

7.2	BN reported that the landlords of Manor Court Surgery are to charge for parking. JN advised she will contact CWPT (landlords) and report back.	<i>JN to report back at May 2016 mtg.</i>	
7.3	DS has received news of the Medicine Waste Campaign in Pharmacies. He has concerns that no events are being done in the north area again JN advised this matter has also been raised by a practice manager in the area. JN will raise the issue with Dan Ibeziako and look at a way forward with this.	<i>JN to take this issue back and report back.</i>	
7.4	PE asked if WNCCG could fund a Admiral Nurse for North Warwickshire. Information was circulated. And also a newsletter on the Friday Friends was circulated.		
7.5	AE advised he had forwarded information re Admiral nurses to Dan Ibeziako and was expecting this to be available at this PGF meeting. It was agreed that NP take this up with DI to update the group.	<i>DI to update the group.</i>	<i>DI</i>
7.6	Following the news of WNCCG lay members term ending, KA thanked the PGF for the support shown and hard work as this may be her last PGF meeting. RB thanked KA on behalf of the WNCCG for all her support and effort over the past two years.		
7.7	EP raised problems reported re the CRISIS team and asked where complaints should be sent. JN asked EP to write to her directly with the complaints as evidence to take forward .	<i>EP to send evidence to JN</i>	<i>JN</i>
8.	Close		
9.	Date of next meeting: Monday 9th****May – 6:30pm-8:30pm in Raveloe Conference Room, GETEC building at George Eliot Hospital		<i>ALL</i>