

**NHS Warwickshire North Clinical Commissioning Group
Patient Group Forum
12 May 2014, 6:30- 8:30pm
George Eliot Hospital, GETEC, Seminar Rooms 2/3**

Approved minutes

Attendees:

Lesley Hill (Chair)	Bulkington Surgery	Hilda Gledhill	Pear Tree Surgery
Andrea Green	Warwickshire North CCG	Ken Pritchard	Rugby Road Surgery
Karen Ashby	Warwickshire North CCG	Barbara McNaught	Station Road Surgery
Terry Spicer	Arbury Medical Centre	Kishor Pala	Stockingford Medical Centre
Gill Davis	Atherstone Surgery	Barry Daynes	The Old Cole House Surgery
Antony Biddle	Camp Hill GP Led Health Centre	John Jephcott	Woodlands Surgery
Jane French	Chancery Lane Surgery Nuneaton	Peter Eltringham	George Eliot Hospital MAP
Stan Orton	Dordon and Polesworth Surgery	Maurice Charley	George Eliot Hospital PAF
Sib Mohamed	Dr Chaudhuri's Surgery	Len Mackin	HealthWatch
Betty Rossi	Queens Road Surgery (Dr Henderson)	Cat Ainsworth	Arden CSU
Alan Nicholls	Dr Reily & Partners	Aasiya Morea	NHS England
Christine Pfeiffer	Grange Medical Centre	Jason Pickford	NHS England

Apologies:

Sheila Hinds, Chancery Lane Surgery
 Jeff Higgs, Old Mill Surgery
 David Frankum, Dr Singh and Partners
 Trevor Allan, Spring Hill Medical Centre
 Don Adams, Red Roofs Surgery

Item No:	Agenda Item & Discussion	Action	Lead officer
1.	Welcome and apologies LH welcomed everyone to the meeting and gave apologies received. She offered a warm welcome to new members of the group and introduced representatives from NHS England.		

	She also bid farewell to John Jephcott, who may not be attending further meetings, and thanked him for his contribution to the group.		
2.	Minutes of the last meeting		
2.1	The minutes were agreed as a true record.		
	Matters arising		
2.2	Some members of the group have not completed the contact record sheets so that members can consent to share their details.	Resend contact record form	CA
2.3	Alan Nicholls and Lesley Hill agreed to join the group that CCG and Healthwatch are setting up to help develop a leaflet on the basic standards of care that patients and relatives should expect when going in to hospital.		
2.4	Topics for future forum meetings were discussed. Public Health has been invited to attend the June meeting. It is hoped that a discussion on dementia can be brought to the group in September or November.		
2.5	KP said that the GPs at his practice are concerned that services will be moved away from surgeries with the end of LES contracts. AG advised that the LES contracts ended on 31 March and NHS standard contracts put in place while individual LES contracts are reviewed. AG to write to Dr Bavananthan to explain system and review timetable.	AG to write to Dr Bavananthan	AG
2.6	Some members of the group said that they have not received the presentation on End of Life, given by Dr Singh at the March meeting.	Resend presentation	CA
3.	CCG Update		
3.1	AG advised the group that an event was held on 28 February as part of the development of a five year plan. The CCG has set up a group on cardiovascular disease, which includes representation from GEH; UHCW; public health; patient representative; senior nurse GEH; CCG GP, secondary care doctor and executive nurse and lay member. The group will develop a work programme and report back identified targets to the forum.		
3.2	The CCG is currently working on its annual report. The report and audited annual accounts will be presented to the forum at either the July or September meeting. AG will discuss with LH how the report is presented to the group, in particular which	CCG to send summary of points in annual report	AG

	<p>areas of progress the group would like to know about.</p> <p>AG reported that the CCG has balanced its finances at the end of the year. The group asked if the small surplus achieved could be carried forward.</p>	<i>to PGF</i>	
4.	Issues Log		
4.1	2013.001 – patient records missing at outpatient appointment – GEH PAF to report to group at July meeting.	<i>PAF to update following their audit</i>	<i>MC</i>
4.2	2013.003 - LM advised that there are no more printed copies of the Healthwatch Health and Social Care Support Directory 2013-14 directory for Warwickshire North. He advised the group that a reprint is due shortly and that directories should be available at all surgeries, as well as in other community locations. If further copies are required, people can phone the publisher Healthcare Publications on 0844 8001214. Group agreed to close issue. Link also to be made available on the members' forum area of the website.	<i>Online link on forum members' area</i>	<i>CA</i>
4.3	2013.004 – lack of awareness of prostate cancer and screening uptake – public health invited to attend July meeting.		
4.4	2013.011 – Patients receiving calls about non-attendance at GEH – individual has confirmed that they are happy that issue is resolved. Group agreed to close issue.		
4.5	2013.023 – communication of Liverpool Care Pathway – consultant to feed issues raised into ongoing work, however as patient didn't want to pursue as a complaint, the group agreed to close issue.		
4.6	2014.03 – age and cost considerations as part of treatment decisions – the group discussed their concerns in this area, and are to forward specific examples where age discrimination may have occurred so that the issue can be investigated by CCG and Healthwatch. AG confirmed that age cannot be a barrier to treatment and that decisions must be evidence based including the known effectiveness of any particular treatment in the individual circumstances presented. AG confirmed that there are cost considerations for expensive treatments – advice is given by NICE on a national level on whether such treatments should be offered.	<i>Group to provide specific examples of age discrimination</i>	<i>ALL</i>
4.7	2014.04 – delays to ambulance response times. The group were presented with current ambulance response times. AG advised that across the wider region WMAS is meeting its targets but is struggling in rural areas such as North Warwickshire. WMAS has been fined for poor performance and		

	<p>new local KPI targets have been set for Warwickshire North CCG area. The CCG is working with WMAS to improve local performance. Group agreed to invite WMAS to a future meeting, once new initiatives to improve performance had chance to take effect.</p>		
4.8	<p>2014.05 – ambulance delays examples – SO asked to provide specific information on examples to include date and location so that specific incidences can be investigated.</p>	<p>Further details needed on delayed response</p>	<p>SO</p>
4.9	<p>New issue raised: 2014.06 – Dr Singh’s surgery, Bedworth Health Centre, are having problems booking phlebotomy appointments. Appointments now need to be booked via phone number at GEH rather than at surgery. People are finding that the number is very busy, often engaged. GD said that when they get through it is not clear that they need to specify whether they want an appointment at the surgery or at GEH. GEH to be asked to respond. The group asked if anything can be done to extend hours for calls or increase call handling capacity.</p>	<p>Raise issue with GEH via PAF, and raise contract query</p>	<p>MC/AG</p>
	<p>Update from PPGs and Healthwatch</p>		
4.10	<p>KP, Rugby Road Surgery – his wife was prescribed tablets on discharge from hospital on a Wednesday for 1 week, to be followed by a blood test. Phlebotomist turned up unexpectedly on the Tuesday to take the blood test – one day too early, and so had to rearrange and come back. There is a lack of communication between departments which is causing inconvenience for patients. KP did not wish for an issue to be raised on the Issue Log.</p>		
4.11	<p>KP confirmed details of issue previously raised at March meeting regarding booking of district nurse appointments. On 26 February, lady rang Bedworth Health Centre to book an appointment with a district nurse. She was told to ring a hub, which turned out to be in Staffordshire. After a conversation with them for 20-25 minutes she managed to get them to understand what she wanted. They agreed to ring the district nurses to arrange a visit. Why couldn’t the appointment be booked at the health centre on her initial call? AG asked KP to provide patient details, with patient consent, so that incident can be investigated.</p>	<p>KP to ask permission from patient to share details</p>	<p>KP/AG</p>
4.12	<p>LM, Healthwatch, advised the group of staff changes: Deb Saunders is retiring in June and will be replaced by Chris Bain as CEO. There are also three new members of staff – Michelle Williamson for communications and engagement, Jen Cook for</p>		

	volunteer support and an admin assistant. He also advised that the Healthwatch annual report will be available soon.		
5.	Election of deputy chair		
5.1	As required by the Terms of Reference for the Patient Group Forum, re-selection of a deputy chair is required for the term 2014-16. One vote is available per PPG plus other PGF core members, including Healthwatch, GEH PAF and Advocates, and CCG Lay Member.		
5.2	Stan Orton and Terry Spicer had nominated themselves for election and had submitted a supporting personal statement. Nominees spoke to the group about their nomination before attendees were asked to mark their choice on provided voting slip.		
5.3	No votes had been received prior to the meeting.		
6.	NHS England care.data project		
6.1	NHS England attended the group as part of a listening exercise to hear people's views about the national care.data project – 'better information means better care'.	<i>NHSE to provide a briefing document following the meeting.</i>	<i>NHSE</i>
6.2	<p>The group raised the following queries and concerns:</p> <ul style="list-style-type: none"> - The group raised some questions about pseudonymising personal data and the kind of companies that might apply to use the data. It was explained how personal information will be anonymised so that an individual's medical information could be linked from GP to hospital data but that the individual could not be named or otherwise identified. Permission to use data would only be given if the research would improve health outcomes. Companies are not allowed to sell or give away the data they hold. - Concerns that personal information will be sold to third parties – how will NHS England ensure that their information is safe and being used correctly NHSE replied that organisations must go through robust application process to use data and that this permission is only given for the purposes set out in the application and must not be used for any other reason. - How can people opt out? People can either opt out completely or agree for their data to be only used in demographic data and not by individual. There is no time limit to opt out of the programme. - Why do people have to opt out at their GP practice? This is because practices have different systems. GP practices are responsible for collecting personal data 		

	<p>and for its security. They have responsibility for ensuring that patients know about the programme.</p> <ul style="list-style-type: none"> - The group said that they would be more comfortable with an opt-in scheme than an opt-out scheme as there is a risk that not everyone will hear about the scheme and so be able to make an informed decision. - Will there be promotion of the results of this listening period, for example another household delivery of an information leaflet? NHSE confirmed yes there will be promotion in the press, on their website and an information leaflet sent out to all households after 30 September. 		
7.	CCG website: PGF members' area		
7.1	CA presented the new PGF members area of the CCG website and explained the resources that are available, including meeting information and discussion forum.		
7.2	She explained that each member of the PGF would receive an email with their individual log in details, inviting them to set up a log in for the site. The group are advised that they will need to accept cookies to enable the site to work.	Members to log in to website	ALL
7.3	The site has been developed to be a resource for the group and members are invited to suggest improvements or additions so that they can make best use of the resource.	Members to give feedback and suggestions for site development	ALL
7.4	Two discussion topics have been set up: <ol style="list-style-type: none"> 1. Community Support Groups - Are you aware of any community support groups that others might find useful? Please share this information here. 2. Dementia carer support - Could your practice establish a dementia carer support network? Do you have expert carers at your practice who would be willing to support carers of people newly diagnosed with dementia? What ideas does your PPG have about setting up a group, or what challenges are you facing? 		
8	Chairpersons Report		
8.1	LH advised that she has attended several events of note: <ul style="list-style-type: none"> • A Disability Awareness Workshop run by Family Voice Warwickshire designed to train professionals on understanding what it is like to be disabled in a non-disabled world. • Took part in the statutory PLACE Assessment of the George Eliot Hospital 		

<p>8.2</p>	<ul style="list-style-type: none"> • Attended a meeting of the George Eliot Hospital Quality Account Group. The Quality Account should have been circulated at the end of last week, and the WCC Task & Finish Group will be meeting later this week to consider a response. • Attended the last CCG meeting in March • Attended the Health & Social Care Forum which was hosted by HealthWatch Warwickshire. • There have also been several events around the forthcoming Special Educational Needs Reforms which will see Education, Health and Social Services working closer together to support individuals from the age of 0 - 25. <p>She also advised the following notices:</p> <ul style="list-style-type: none"> • Those of you involved with, or know of, local voluntary or support groups for specific health related issues, please could you ask the organisers to register their details on the: Warwickshire Partnership : “Warwickshire community Directory” For further information see www.vconnectsystem.org.uk/warwickshire • This is Mental Health Awareness Week The theme of this year’s Mental Health Awareness Week is anxiety, one of the leading causes of mental ill-health in the world. Events include: <ul style="list-style-type: none"> ○ Wellbeing outreach session, Thursday morning at Atherstone Library Wednesday morning in Nuneaton Library Tuesday afternoon in Bedworth Library ○ I’m a Service User get me out of here! about phobias & anxiety management: Mancetter on Friday afternoon Nuneaton on Thursday evening Bedworth on Wednesday evening 		
<p>9.</p>	<p>GEH Patient Advocacy Forum update</p> <p>Nothing to report.</p>		
<p>10.</p>	<p>Any other business</p> <p>TS noted that the Terms of Reference does not include a clause for review the terms. It was agreed that the TOR would be reviewed annually.</p>	<p><i>Review TOR and update as required for 2014-15</i></p>	<p>ALL</p>

	<p>Deputy Chair election results Vote results: Stan Orton – 9 votes Terry Spicer – 9 votes</p> <p>As per terms of reference, in the event of a tie the vote of the current Chair is the casting vote. Therefore, Terry Spicer was duly elected as Deputy Chair for 2014-16.</p> <p>LH thanked Stan Orton for his support during 2013-14, and offered congratulations to TS.</p> <p>As TS currently acts as GEH PAF representative for the group, an election for an alternative representative will be held at the next Patient Group Forum meeting on 7 July.</p>	<p><i>Election of new GEH PAF representative</i></p>	<p><i>ALL</i></p>
<p>10</p>	<p>Close</p>		
	<p>Date of next meeting: Monday 7 July 2014 – 6:30-8:30pm George Eliot Hospital GETEC Seminar Room 2/3</p> <p>2014 dates: Monday 1 September Monday 3 November</p>		