

**NHS Warwickshire North Clinical Commissioning Group
Patient Group Forum
Monday 2nd March, 6:30- 8:30pm
George Eliot Hospital, GETEC, Raveloe Conference Room.**

Final minutes

Attendees:

Lesley Hill (LH) Chair	Bulkington Surgery	Sheelagh Charles (SC)	The Old Cole House
Mike Burns (MB)	Warwickshire North CCG	Hay Sharma (HS)	Whitestone Surgery
Terry Spicer (TS) Deputy Chair	Arbury Medical Centre	Maurice Charley (MC)	George Eliot Hospital PAF
Sheila Hinds (SH)	Chancery Lane Surgery	Peter Eltringham (PE)	George Eliot Hospital MAP
Stan Orton (SO)	Dordon and Polesworth Surgery	Len Mackin (LM)	Healthwatch Warwickshire
Sib Mohammed (SM)	Dr Chaudhuri's Surgery	Karen Ashby (KA) Patient & Public Involvement	Warwickshire North CCG
Alan Nicholls (AN)	Dr Reily & Partners Bedworth HC	Jenni Northcote (JN)	Warwickshire North CCG
Christine Pfeiffer (CF)	Grange Medical Centre	Elizabeth Pfute (EP)	Making Space Warwickshire
Cllr Bridgette Chandler (BC)	Hazelwood Surgery	Suman Ghaiwal (SG)	Arden & GEM CSU
Bill Nicklin (BN)	Manor Court Surgery	Nadine Pearson (NP)	Arden & GEM CSU
Jeff Higgs (JH)	Old Mill Surgery		
Hilda Gledhill (HG)	Pear Tree Surgery		
Ken Pritchard (KP)	Rugby Road Surgery		
Joan Baber (JB)	The Old Cole House		

Apologies:

**Gill Davis, Atherstone Surgery
David Frankum, Dr Singh & Partners (Bedworth HC)
Gerald Hancock, Leicester Road Surgery
Jean Lawson, Red Roofs Surgery
Barbara McNaught, Station Street Surgery
Kishor Pala, Stockingford Medical Centre
Di Kent, Whitestone Surgery
Rashida Suleman, Riversley Road Surgery
Andrea Green, Warwickshire North CCG
Dan Ibeziako, NHS Arden and GEM CSU**

Item No:	Agenda item & discussion	Action	Lead officer
1.	<p>Welcome and apologies</p> <p>LH welcomed everyone to the meeting and gave apologies received. She offered a warm welcome to Elizabeth Pfute from Making Space Warwickshire, Suman Ghaiwal from NHS Arden & GEM CSU and Jenni Northcote from NHS WNCCG. Everyone introduced themselves.</p>		
<p>2.</p> <p>2.1</p> <p>2.2</p> <p>2.3</p> <p>2.4</p> <p>2.5</p>	<p>Minutes of the last meeting</p> <p>The minutes were agreed with the following amendments:</p> <ol style="list-style-type: none"> 1. Front page, addition to attendees list to include Ken Pritchard. 2. Page 5, point 5.9, should read JT (Jean Thomas) and not JL. <p>Matters arising</p> <p>Page 6, point 6.4 -KP raised the point that some of the meetings advertised were before the minutes went out therefore how could people attend. LH advised the ones in Warwickshire North were after but said this was a good point.</p> <p>Following on from the January 2015 PGF meeting PE was asked if he had liaised with Dan Ibeziako (DI) directly in regards to contact from Diabetes Super Six group. PE said DI had been in touch however he hadn't heard from the Diabetes Super Six Group as yet. NP advised due to staff leaving there would be a delay. KA advised as soon as the group is back up and running they would get in touch with all those members who have put their names forward.</p> <p>Following the WMAS visit at the last PGF meeting the answers to questions from the group were circulated with minutes. NP advised WMAS had omitted to answer CP's question and reported DI has chased WMAS for this and will update/circulate as soon as the answer is available.</p> <p>Camp Hill Walk in Centre - JN reported the CCG attended a meeting with Camp Hill patient group and NHS England with a further meeting taking place on 13th March. JN confirmed that the Primary care service commissioned by NHS England will transfer to Malling Health on 31st March following a procurement process. WNCCG will continue to commission urgent care provision at Camp Hill pending further work and engagement which will inform future commissioning arrangements</p> <p>DI had asked for the layout of the Issue log to be discussed by</p>	<p><i>DI to remind WMAS for answer</i></p> <p><i>NP and DI to</i></p>	<p><i>NP</i></p> <p><i>DI</i></p> <p><i>DI</i></p>

<p>2.6</p> <p>2.7</p> <p>2.8</p>	<p>the group. PE advised he had asked for it to fit on 2 A4 size sheets for ease of printing. Both AN and CP said they thought the font was much clearer and liked the format NP advised she was happy to print copies on A3 if members agreed for ease. KA asked NP to discuss with DI and agree the best way forward for the next meeting.</p> <p>KA highlighted that the Friends and Family test issue raised by RS and JH had not been added to the March 2015 issue log. As requested DI had received specific details from JH however not from RS. DI had contacted GEH directly and the response had been shared with JH. KA asked JH if he was satisfied with the response, he agreed he was. KA asked the group if they would be happy for the issue to go straight onto the March 2015 issue log and then close the issue. This was agreed by members. KA advised the tests target of 40% is a national target and not a CCG target. The hospital reports it is hitting this at the moment.</p> <p>LM advised the GP access survey carried out by Healthwatch Warwickshire across the county went very well with over 550 responses received.</p>	<p><i>discuss</i></p> <p><i>DI to put onto March 2015 Issue log and then close</i></p>	<p><i>DI</i></p>
<p>3.</p> <p>3.1</p>	<p>PGF Chair Elections</p> <p>KA reported one nomination for the post of Chair had been received from SO and due to this the voting will be decided by a show of hands from members in the room in accordance with the PGF Terms of Reference. KA explained SO will be asked to leave the room during the vote taking place. SO was asked to brief the group of why he should be considered for the post. SO then left the room.</p> <p>KP asked if there was going to be any discussion on what SO had said. KA opened the discussion with members and then asked for a show of hands of those in favour of having SO as Chair.</p> <p>Results of vote: 13 - For (which included one vote by email) 6 - Abstains 0 –Against</p> <p>SO was duly elected as Chair.</p> <p>SO thanked everyone and wished LH good luck in the future and thanked her for the work and commitment to the group she had showed over the past two years and agreed for LH to carry on as chair at this meeting.</p>		

	KA also recognised the work that LH had put into the forum over the last 2 years & formally thanked her for her contribution.		
4.	CCG update		
4.1	MB apologised for Andrea Green's absence.		
4.2	End of life strategy at George Eliot Hospital: MB reported WNCCG are still waiting for the report and timeline. MB said he was expecting this very soon and will ensure the PGF will be sent the report promptly in the next few weeks with the time line explaining the findings before the next meeting.	<i>MB to send information out before next PGF mtg</i>	
4.3	X-Rays at George Eliot Hospital: MB reported he had tried to get an update prior to this meeting but had had no response. The CCG is looking at setting a local standard as there are no national targets on reporting. MB will chase again and feedback to group as soon as any response is received.	<i>MB to send information out before next PGF mtg</i>	
4.4	Phoenix Group: MB reported there has been no update and realises the information is very time critical. MB advised there was no news on the grant situation whether successful or not at present but that this was anticipated during March & that he would feedback to the group as soon as further information received.	<i>AG to update at May PGF mtg</i>	
4.5	Community Services feedback -JN fed back on behalf of the CCG. KA advised the PGF had been involved in this work back in September to give their views on community services. The group's findings/views had been fed back and are being collated with other feedback into key messages and overall themes and a report will be available very soon. JN advised of a feedback event on Tuesday 24 th March 2015 at Nuneaton Town Hall, 1pm -3pm which the group were welcome to attend and there is also an online survey being carried out for those who cannot attend the event.	<i>JN & NP to share the details asap</i>	
4.6	KA asked for the details of this event to be sent out asap to all members and asked LM if Healthwatch could assist in circulating the survey which he was happy to do. MB updated on commissioning intentions which have now been published. HG asked if the CCGs going to end the year in the black. MB advised the CCG would end the year in the black. MB went on to explain the future funding allocation and the risk factors	<i>JN to forward the survey link to LM asap</i>	

	<p>and pressures.</p> <p>KA advised how hard the CCG financial team had worked to achieve this position and thanked them for their work.</p> <p>MB updated on the Prime Minister Challenge fund. MB reported the CCG is delighted that this could potentially mean a huge investment into primary care if the bid is successful. A timeline will be announced soon. MB reported 27 out of 28 practices have backed this in this area.</p> <p>TS raised a question on the End of Life strategy re hospice at home. TS reported there is a lack of funding for this strategy and asked if the CCG funds Myton beds as he had heard the beds are not being used by Warwickshire North patients. MC reassured the group that the beds are definitely being used by Warwickshire North patients.</p>		
5.	Issues log and update from local PPG groups		
5.1	LH apologised to the group for the issue log as some of the issues had not been removed from the log when closed. KA will ask DI to remove and update for the next meeting in May.	<i>DI to update Issue log</i>	<i>DI</i>
5.2	2013.001- MC was to do an audit however reported due to changes at the NHS Trust he will need extra time to report back to the group on this issue. It was agreed MC/AG to report back at July 2015 meeting. Issue left open.	<i>MC/AG report back to PGF in July 2015</i>	<i>AG</i>
5.3	2013.002, 2014.04, 2014.05 and 2014.07 Issues are all closed.	<i>DI to update issue log</i>	<i>DI</i>
5.4	2014.09, 2014.10 and 2014.12 – MB reporting back in CCG update advised there will be more information available in the next few weeks and this will be shared with the group. MB promised to circulate more information over the next few weeks.	<i>MB/AG to follow up</i>	<i>AG</i>
5.5	2014.11 – Patients discharged from wards have to wait 3-4 hours for their medication. Previously MC reported a new group is looking into this and all problems around discharge. MC reported he will feedback the findings at the next PGF meeting.	<i>MC will update at May 2015 mtg</i>	<i>MC</i>
5.6	2014.13 – PGF members asked if Friends and Family test were still being used in hospitals after patients had not been asked to fill one in at discharge. Specific cases were requested for the hospital which had been passed on. DI received a response and forwarded onto the PGF member. It was agreed that this issue be closed.	<i>DI to update March 2015 issues log</i>	<i>DI</i>

5.6	KA asked the group if there were any new issues. No new issues were raised.		
6. 6.1	<p>#onething- Local cardiovascular disease (CVD) campaign</p> <p>KA presented on the CVD Lifestyle campaign, #onething.</p> <p>The audiences for CVD are women, men and children. The overall aims of the campaign is to reduce levels of CVD in women, reduce CVD deaths, reduce smoking in pregnancy, increase numbers accessing smoking cessation and increase physical activity. It was agreed that this would be a local campaign involving local people. KA advised there are case studies who have agreed to be filmed and these will be used at practices who have screens in their waiting area. The campaign provides an opportunity to tailor to local stories and roll out across media, social media and marketing materials. KA encouraged the members to let us know if there were any patients that would be suitable case studies that would be interested in being filmed.</p> <p>The campaign launched on Friday 13th February and saw staff manning stands at Tesco in Bedworth, Ropewalk in Nuneaton and the Market Square in Atherstone. Staff engaged with the public and asked what one change they could make to improve their health. To date over 200 pledges have been made and these are being followed up by weekly emails, then monthly and then three monthly. Also the group was asked to promote on Twitter and Facebook if they have access.</p> <p>KA asked members of the group to make a pledge themselves, have a photo taken with their pledge and were given posters to advertise the campaign in their practices. KA advised practices should have already received information on the campaign. LM was asked to advertise in the Healthwatch forums and CAB Hub.</p> <p>HG asked how much this campaign was costing. KA advised as this was a joint project there was no cost to the CCG and was paid for by Public Health Warwickshire at around £5k. As a result if only one person signs up to make a healthy lifestyle change it could potentially save the NHS money.</p>		
7. 7.1	<p>Review of Terms of Reference (TOR)</p> <p>LH opened the discussion on the PGF's review of TOR. These were discussed and KA asked for a draft with the amends to be circulated very quickly for sign off.</p>	<p><i>NP to amend and send draft to members prior/separately to draft minutes</i></p>	<p><i>NP</i></p>

7.2	EP advised her organisation should be referred to as Making Space Warwickshire and not Making Spaces.		
7.3	TS requested for a review date to be added as footer to TOR papers		
8.	<p>Items for future agendas</p> <p>8.1 KA reported an email had been forwarded to request if the Director of Operations from AGE UK could visit the group. It was agreed that the information with contact details would be circulated to all Practice Managers via PGF members to arrange visit directly with the practices as more applicable to them. NP to share details with all the members straight after the meeting.</p> <p>8.2 KA reported Dr John Linnane, Director of Public Health Warwickshire has been invited to speak at the May 2015 PGF meeting and has agreed to attend.</p> <p>8.3 SH suggested a speaker on Continuing Health Care (CHC) would be useful following from MB update earlier. This was agreed by the members. LM suggested David Soley from Warwickshire County Council be invited as he is a lead in CHC. KA asked for his details from LM and will get in contact.</p> <p>8.4 KA thanked everyone for their ideas and requested that if any others come to mind to contact DI on 01926 353810 or by email Dan.ibeziako@ardencsu.nhs.uk</p> <p>8.5 TS reported his own good news story of his recent visit to George Eliot Hospital and the good care and experience he had received.</p>	<p><i>NP to circulate details to PGF members</i></p>	<p>NP</p>
9.	<p>Chairs report</p> <p>LH reported since the last meeting she has represented the PGF at several meetings including the CCG Public Board meeting at the end of January. Among the items discussed were:</p> <ul style="list-style-type: none"> • 5 Year Forward Plan, • discussions are underway to develop 4 x integrated teams of GPs, co-commissioning and development of integrated Health and Social Care Teams • a user of Mental Health services was able to ask some very pertinent questions about our mental health services. <p>In January she attended a joint meeting of Warwickshire County Council and Healthwatch. Discussions centred around the Health and Wellbeing Strategy, Commissioning priorities across the 3 CCGs, Public Health, Social Care compared to</p>		

	<p>Public Health England.</p> <p>In the last five weeks she reported attending two meetings on Dementia Friends, and this was the topic of last week's Voluntary Associations Network meeting in Wood End and will be repeated at the CAN Network meeting for Nuneaton and Bedworth on 12th March. At the Wood End meeting HG gave a very clear personal message about the importance of dementia support groups like the Phoenix.</p> <p>Finally, she thanked all the Forum members for the support that they had given her over the past two years. She hoped that members would continue to support SO the new Chairman so that this forum will continue to provide an important means by which patients in our area can get their voices heard.</p>		
10.	GEH Patient Advocacy Forum update		
10.1	On behalf of Dordon Surgery SO raised the issue of problems contacting the Physiotherapy department by telephone. A response has been received from John Thompson, Acting Director of Operations at GEH who had spoken with Jon Walters, Head of Physiotherapy which said there had been a shortage of staff to cover. The hospital is increasing the number of staff over the next two months and also getting the Physiotherapist's to handle more calls, from practices and patients. The Dordon Surgery will carry out a 3 month analysis and report their findings back to hospital.		
10.2	Car parking still remains a problem at GEH. SO met with Sean Mitchell Head of Security and Dr Wood to discuss the issues and will update the group at the next PGF meeting.		
10.3	GEH Organisation Changes - with effect from 1st April 2015, the current 3 divisions will be replaced by six Clinical Business Units. Each unit will be made accountable for performance and changes made to maintain or improve as seen by their performance and will be reviewed regularly. The aim is to make staff more accountable.		
11.	Any other business		
11.1	PE requested the past minutes be put onto the PGF website as not up to date.	<i>DI update website with minutes</i>	<i>DI</i>
11.2	JB reported in the local press the achievement of Dr Richard Hyslop and his staff at the Old Cole House Surgery as one of the best GP surgeries in England. SH asked for them to share best practice with others.		
11.3	LM reported Healthwatch Warwickshire (HW) are carrying out		

	<p>enter & view inspections in care homes & also within GP practices by invitation. HW has written to all practices in the area to ask for permission to visit to observe how the practice runs. There will be a survey taking place of services. So far sixteen practices have signed up to visits including three practices from this area: 25th Feb (which has been carried out) – Old Mill Surgery 25th April – Red Roofs Surgery 27th April – Hazelwood Surgery</p> <p>All practice managers should know about this and work packages have gone out. HW would like members to ask if they could make a visit to their surgery and would encourage a member of the PPG to be present at the visit. LM advised all practice managers have been contacted directly to arrange a visit, should any of the PGF members need more information on the visits, to contact LM directly by emailing him at HW.</p> <p>LM reported HW has also done the Young People Survey and this will be published soon. Following on from the survey the young people have asked if they could attend one of the PPG meetings to film a video to look at participation in health generally within the next couple of weeks. The group were asked to contact LM directly if their group is willing to take part.</p> <p>11.4 KP raised that the parking permits received with the minutes are incorrect and could result in a parking fine. Members agreed for them to be changed to 6.00pm to 9.00pm.</p> <p>11.5 SO reported he has been involved in the tendering process and setting the Final Operating Criteria for Patient Transport Services Contract. SO said this was a most interesting experience. The Contract has been awarded to West Midlands Ambulance Service, with much tighter controls than previous contract.</p> <p>KA thanked SO and all other members for giving the time and responding so quickly to be involved in processes such as Patient Transport Services, NHS 111 and Leg Ulcers at such short notice at times and the value members bring to the process as new contracts are being renewed.</p> <p>JN advised that during the Service re-design project the CCG is working hard to get a much better system to flag up communication. This would include a better system to recognise patients need as not everyone can respond straight away to attend these meetings.</p> <p>SH reported she always passes everything on to her practice manager and said her Practice Manager was not aware of any</p>	<p><i>NP to make the changes for the PGF May mtg</i></p> <p><i>DI and SG to put on events page of</i></p>	
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11.6	<p>of these. JN advised they are aware of this feedback and this will be looked into. JN asked if it would help if there was some kind of calendar which the group could access to advertise forthcoming events. KA suggested these go on to the website on the events page and asked for DI and SG to ensure these go on.</p> <p>LH asked if the CCG could fund Admiral Nurses in this area. KA will ask AG to report on this at the May meeting, however it was agreed not to make this an issue on log.</p>	<p><i>website</i></p> <p>AG</p>	
12.	Close		
13.	<p style="text-align: center;">Date of next meeting: Monday 11th May 2015, 6.30pm - 8.30pm In Raveloe Conference Room, GETEC building at George Eliot Hospital.</p> <p style="text-align: center;">2015 future dates: Monday 6th July Monday 7th September Monday 2nd November</p>		