

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

**Minutes**

**Attendees:**

Lesley Hill (LH) (Chair)	<b>Bulkington Surgery</b>	Beverley Bailey (BB)	<b>Pear Tree Surgery</b>
Andrea Green (AG)	<b>Warwickshire North CCG</b>	Ken Pritchard (Ken P)	<b>Rugby Road Surgery</b>
Terry Spicer (TS)	<b>Arbury Medical Centre</b>	Barbara McNaught (BM)	<b>Station Road Surgery</b>
Adrian Edgington(AE)	<b>Camp Hill GP Led Health Centre</b>	Kishor Pala (KP)	<b>Stockingford Medical Centre</b>
Sheila Hinds (SH)	<b>Chancery Lane Surgery</b>	Hay Sharma (HS)	<b>Whitestone Surgery (Dr Kumar's)</b>
Stan Orton (SO)	<b>Dordon and Polesworth Surgery</b>	Clive Frost (CF)	<b>Woodlands Surgery</b>
Sib Mohamed (SM)	<b>Dr Chaudhuri's Surgery</b>	Maurice Charley (MC)	<b>George Eliot Hospital PAF</b>
Betty Rossi (BR)	<b>Queens Road Surgery (Dr Henderson)</b>	Len Makin (LM)	<b>Healthwatch</b>
Alan Nicholls (AN)	<b>Bedworth Health Centre( Dr Reily and partners)</b>	Kiri Harbottle (KH)	<b>Arden CSU</b>
David Frankum (DF)	<b>Bedworth Health Centre( Dr Singh and partners)</b>	Nadine Pearson (NP)	<b>Arden CSU</b>
Bill Nicklin (BN)	<b>Manor Court Surgery</b>	Rachel Robinson (RR)	<b>Warwickshire Public Health</b>
Jeff Higgs (JH)	<b>Old Mill Surgery</b>	Christos Mousoulis (CM)	<b>Warwickshire Public Health</b>
Hilda Gledhill (HG)	<b>Pear Tree Surgery</b>		

**Apologies:**

Karen Ashby, WNCCG  
Gill Davis, Atherstone Surgery  
Christine Pfeiffer, Grange Medical Centre  
Joan Baber, The Old Cole House  
Jean Lawson, Red Roofs Surgery  
Diane Kent, Whitestone Surgery (Dr Kumar's)  
John Jephcott, Woodlands Surgery  
Peter Eltringham, George Eliot Hospital Members Advocate Panel

Item No:	Agenda Item & Discussion	Action	Lead officer
1.	<p><b>Welcome and apologies</b></p> <p>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 Warwickshire Public Health. 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><b>Minutes of the last meeting</b></p> <p>The minutes were agreed with the following amendment:</p> <p>1. Page 4, point 4.12: should read Deb Saunders is retiring in June and not July.</p> <p><b>Matters arising</b></p> <p>LH reminded members to complete a contact record form which gives permission to share their details and enables any information to be sent via email. Blank forms were circulated at the meeting for new and existing members.</p> <p>Healthwatch Leaflet on basic standards of care - AG advised that there was no update from Healthwatch on the draft leaflet which was being developed on the basic standards of care that patients and relatives should expect when going into hospital.</p> <p>LH said that she, BR and AN had agreed to be on the working group with the CCG and Healthwatch to help develop the leaflet. However this was yet to progress.</p> <p>LM explained due to staff changes he was not aware of what stage the leaflet was at. He was asked for an update at the next mtg.</p> <p>AG has written to Dr Bavabanthan to explain the system and review timetable for the LES contracts. Ken P advised both he and Dr Bavabanthan were very pleased with her response.</p> <p>LH asked whether all members had received a copy of the End of Life presentation from last meeting. LH asked for all new members to be sent a copy by email.</p>	<p><i>Healthwatch to update at the Sept mtg</i></p> <p><i>Send presentation to new members</i></p>	<p>ALL</p> <p>LM</p> <p>NP</p>
3.	<p><b>CCG Update</b></p> <p>AG said she will update the group on the CCG's summary of the annual report at the September meeting.</p>	<p><i>For Sept meeting</i></p>	<p>AG</p>

3.2	Review of Community Services - AG asked the group to obtain views on Community Services in order to inform the CCG's commissioning intentions. A proforma was provided, to be returned by 20 <sup>th</sup> August 2014. AG asked for dedicated time at next PGF meeting for members to discuss the results.	<i>Proforma to be sent back to NP.</i>	ALL
4.	<b>Issues Log and update from local PPG groups and Healthwatch</b>		
4.1	2013.001- MC undertaking audit. The audit had already highlighted immediately difficulties with health records which had been raised with GEH. Issue left open.	<i>MC to update at Sept mtg</i>	MC
4.2	2013.004 & 2013.024 - LH advised these points will be covered in the Public Health presentation later in this meeting. Both issues closed.		
4.3	2014.03 – Examples had not been provided by the group. AG suggested that the CCG audit specific contracts for access rates in light of the age discrimination issues. CCG to report back to group at November meeting. Issue closed at it stands and wait for the CCG to look into this issue and report back to the group.	<i>CCG to undertake audit and report back at November meeting</i>	AG
4.4	2014.04 -AG reported back on delays to ambulance response times. There has been an improvement since the CCG has been monitoring closely. AG will give a full update at the next meeting. Issue left open.	<i>AG to update at Sept mtg</i>	AG
4.5	2014.05 – Linked to 2014.04. AG suggested West Midlands Ambulance Service (WMAS) be invited to the group's meeting in January 2015. HG - asked if a rapid response car turns up and a patient needs an ambulance does the clock start then or from the beginning? AE suggested asking WMAS to bring their response rates to the meeting in January. Issue kept open.	<i>WMAS to be invited to January meeting</i>	NP
4.7	2014.06 – Re Dr Singh's Surgery, Bedworth Health Centre having problems booking phlebotomy appointments. AG reported this is being audited. The CCG is waiting for a response and will brief the group at a later meeting. AG asked that this issue should be closed and more time be given to the CCG to report back to group at the Nov meeting. Issue closed		
4.8	<b>LH asked representatives for any new Issues:</b>  HS asked whether Whitestone Surgery were to keep their own issue logs in their group. LH said yes, this is something they could organise in their own group.		

4.9	Patient Forum' area on website LH reported that Cat Ainsworth was to organise log-ins for members. LH asked if members had all received them and happy using the site. LM said he was having a few problems and not very user friendly. KP requested a log in as a new member.	<i>New members to be sent log in</i>	<i>NP</i>
4.10	LM advised link for the Healthwatch Health & Social Care Support Directory was now available on the patient' forum area. The directory is also available from the Healthwatch website under "services". There are 3 available which represents each CCG area. Please find link: <a href="http://www.healthwatchwarwickshire.co.uk/content/services">http://www.healthwatchwarwickshire.co.uk/content/services</a> When hard copies become available he will bring them to the next meeting.	<i>Hard copies of directories to be circulated once available.</i>	<i>LM</i>
4.11	SO raised the issue of NHS England's care. data scheme, particularly that information captured had been sold to Experian, as reported in the Sunday Mirror. This contradicted the information given by NHS England at the last meeting.		
4.12	HG – Reported on the problems of DNAs (Did not attend) at the Pear Tree Surgery. She went onto say that HS2 work is starting a few miles from Kingsbury. She asked who would be looking after the workers on this project. Is this going to impact on their surgery and which hospital? AE suggested she speak to North Warwickshire Borough Council. AE reported that for DNAs, Camp Hill surgery now sends text messages to remind patients of forthcoming appointments which has been very successful.  BR suggested charging patients if they do not turn up for an appointment. LH said this was not allowed. LH suggested putting on the Members Forum to share solutions from other surgeries.	<i>Add to Members Forum</i>	<i>NP</i>
4.13	Ken P reported the physiotherapy department at GEH only has one telephone line and it's always busy. Ken P went to say the media reported today that discussions are taking place to charge for NHS services.		
4.14	LH raised 2 issues from her surgery: At Bulkington Surgery PPG meeting it was reported that patient referral letters are not being received by the hospitals. They are sent by hard copy and fax. Practice Manager reports the letters get lost frequently. This was agreed to be included in issue 2013.001.	<i>To be added to existing issue 2013.001</i>	<i>NP</i>
4.15	LH - Choose and Book system – Appointments appear when the GP initially looks, however they are not available when patients try to book. After discussion in the group it was agreed	<i>Add to issue log</i>	<i>NP</i>

<p>4.16</p> <p>4.17</p> <p>4.18</p>	<p>to add to issue log.</p> <p>BR – Re prescription service at GEH. BR said she had to wait over 20 minutes only to be informed they had not got her medication. This is a huge problem</p> <p>LM Update on Healthwatch Annual Report – is now on website and link on forum area on website.</p> <p>Ken P asked who is responsible for sending out the minutes and papers for GEH board meetings. LH gave him the details of the board secretary Vanessa Nicholls 02476153072.</p>	<p><i>Add to issue log</i></p>	<p><i>NP</i></p>
<p>5</p> <p>5.1</p>	<p><b>Cancer screening services</b></p> <p>Rachel Robinson (RR) introduced herself and Christos Mousoulis (CM) from Warwickshire Public Health.</p> <p>RR reported that the Public Health team no longer has the responsibility for screening services in this area, it now rests with NHS England. Therefore they are happy to take any questions back to NHS England and report back to the group at a later date.</p> <p>The presentation covered NHS screening programmes. Principles of screening, What is NHS Cervical Screening, Breast Screening?, Prostate Cancer Screening and Bowel Cancer Screening.</p> <p>AE raised that Female Genital Mutilation could be discovered through cervical screening process. Staff need to be trained on this.</p> <p>AE reported North Warwickshire Breast Screening mobile unit had been removed from Kingsbury. RR reported that it had been removed because of the health centre’s suitability as a venue. There are 11 criteria which a venue needs to meet for the unit to be placed there. Rachel said the uptake of Breast Screening is higher in this area than others. The Borough Council has been seeking other venues. No drop in uptake has been experienced.</p> <p>CM reported that there is no screening programme for Prostate Cancer. Patients can ask for a test through their GP.</p> <p>The group was extremely concerned that men were dying of prostate cancer and a screening programme may help prevent this. JH asked why the test was not done locally at GEH as it used to be. RR confirmed that Public Health Warwickshire has no say in the way these tests are done and it is a national</p>	<p><i>Copy of the presentation to the forum &amp; put on patients forum on website</i></p> <p><i>RR will take questions back to NHSE</i></p>	<p><i>NP</i></p> <p><i>RR</i></p>

	<p>issue. Screening programmes are regularly reviewed and the feasibility and effectiveness of prostate cancer screening was regularly considered.</p> <p>BM reported that Scotland has rolled out testing for Prostate Cancer and – why was this when it was not available in England?</p> <p>JH asked if the review on prostate cancer screening is available from the NHSE.</p>	<i>RR to find out availability of review</i>	<i>RR</i>
<b>6.</b>	<b>Election of PAF representative</b>		
<b>6.1</b>	SO had offered to become the PAF representative. No other nominations were received. Therefore LH suggested he be elected. This was seconded by BR and the group agreed.		
<b>7.</b>	<b>Chairperson's report</b>		
<b>7.1</b>	<p>LH reported that since the last meeting she has represented the Forum at the last CCG Governing Body meeting in May and most of the Warwickshire Healthwatch AGM in June.</p> <p>Other events attended:</p> <ul style="list-style-type: none"> <li>• A consultation event on changes to the access to IDS services matrix for disabled children. This includes services like short breaks. There also appear to be anomalies between services for overnight breaks paid for by health in the north of the county, but paid for by social services in the south of the county. This has been passed onto AG.</li> <li>• There have also been several more events around the forthcoming special educational needs disability reforms which will see education, health and social services working closer together to support individuals from the age of 0-25.</li> </ul>		
<b>7.2</b>	<p>LH asked whether each surgery is backing the RCGP's petition to protect the future of general practice? Your practice manager should have received a copy of Put Patients First – Back General Practice, if not go to <a href="http://www.putpatientsfirst.rcgp.org.uk">www.putpatientsfirst.rcgp.org.uk</a>. The closing date is 15<sup>th</sup> August.</p> <p>Bulkington surgery has got 130 signatures at a recent fund raising event, and will be getting more by attending the waiting room during surgeries. It is a really good way of supporting your practice and also raising the profile of your PPG.</p>	<i>LH to put link on PGF</i>	<i>LH</i>
<b>7.3</b>	LH also commented that George Eliot Hospital AGM takes place on Wednesday 9 <sup>th</sup> July. Contact Vanessa Nicholls on		

	02476 153072 for more information.		
<b>8.</b>	<b>GEH Patient Advocacy Forum update</b>		
<b>8.1</b>	SO reported on points from the last PAF meeting. <ul style="list-style-type: none"> <li>• Age UK presented on Rapid Discharge System.</li> <li>• GEH presented on plans to increase services in the future.</li> </ul>		
<b>9.</b>	<b>Any other business</b>		
<b>9.1</b>	Ken P – asked who will be replacing Catherine Ainsworth who left in June. Kiri Harbottle introduced herself. Nadine Pearson will support the group with minutes and papers - details as follows: Email <a href="mailto:nadine.pearson@ardencsu.nhs.uk">nadine.pearson@ardencsu.nhs.uk</a> Direct tele no: 01926 353810		
<b>9.2</b>	KH on behalf of the CCG gave information about Diabetes Super Six which seeks to improve diabetes diagnosis and care. The CCG is hoping to get a working group together of 5 or 6 patient volunteers to help CCGs take this forward. Diabetes Super Six is already being rolled out in South Warwickshire.	<b>Volunteers to contact NP</b>	<b>ALL</b>
<b>9.3</b>	LH asked members to use the online discussion forum and report back any problems.		
<b>9.4</b>	TOR will be reviewed at the next meeting and circulated with minutes in PDF and Word for the next meeting.	<b>TOR to be reviewed at the next meeting</b>	<b>ALL</b>
<b>10.</b>	<b>Close</b>		
<b>11.</b>	<p style="text-align: center;"><b>Date of next meeting:</b>  <b>Monday 1 September 2014 – 6:30-8:30pm</b>  <b>George Eliot Hospital GETEC Seminar Room 2/3</b></p> <p style="text-align: center;"><b>2014 dates:</b>  <b>Monday 3 November 2014</b></p>		