



Commissioning Alliance

Brighton and Hove CCG
Crawley CCG
East Surrey CCG
High Weald Lewes Havens CCG
Horsham and Mid Sussex CCG



Minutes

Date: 24th April 2019

Time: 13:30-16:30

Location: The Brighthelm

Summary of resolutions taken at meeting

Proposed resolutions	
Item number	Resolution
	DL- to check policy on pharmaceutical sponsorship for PPG conference  BHCCG Hospitality Gifts and Sponsorsh
3iii	DL to check the policy
4i	DL Powerpoint to be attached with the minutes
4ii	DL share map of PCNs when available
4ii	HL speak to St Peters about PPG meetings
4ii	HL to check if PPG members can attend cluster/ PCN meetings
5i	DL Powerpoint to be attached with the minutes
8ii	DL Powerpoint to be attached with the minutes
8iv	DL to add IT/ IG Neil Kelly to the next agenda
9i	DL to add to the next agenda
9ii	Colin to attend next meeting
10ii	All to email Gemma or Laura with ideas on how to engage the public
13i	ALL- idea of conference topics to DL

Chair	Martyn Yeats		MY
Present	NAME	INITIAL	PRACTICE
	Debbie Ludlam	DL	CCG
	Mark Richardson	MR	Preston Park
	Brian Ravenett	BR	North Laine/ St Peters
	Lloyd Ungoad	LU	Trinity
	Neil Vinter	NV	Saltdean and Rottingdean
	Stan Pearce	SP	Saltdean and Rottingdean
	Denise Muller	DM	Portslade
Fabia Brackenbury	FB	Trinity	
In attendance	Hugo Luck		CCG
	Gemma Clayton		CCG
	Laura Fernandez-Kanye		CCG
	Colin Simmons		Sussex and East Surrey Integrated Urgent Care (IUC) Transformation Programme
	Jane Lodge		CCG
Apologies	Henriette Hardiman		
	Sharon Lyons	SL	
	Maureen Copeman	MC	
	Graham Aldridge	GA	Wish Park
	Magda/ Jess		Community Works

Agenda Item No.		Action
1.	Welcome and apologies	
	The Chair welcomed everyone to the meeting.	
2.	Introduction	
i.	The PPG introduced themselves.	

3.	Minutes (circulated on 06/11/2018) and Matters Arising	
i.	The minutes from the last PPG meeting were approved by the Chair and no issues of accuracy were recorded.	
ii.	It was noted that all matters arising had either been actioned or were covered in the meeting.	
iii.	In relation to the PPG conference, it was asked if we would be able to get extra funding through pharmaceutical sponsorship. DL said that she would need to check the policy because we have strict rules around pharma sponsorship	DL
iv.	Cluster 6 report is confidential and cannot be shared	
4.	Primary Care Networks- Hugo Luck	
i.	Hugo Luck delivered a presentation on Primary Care Networks (PCNs). Action: Powerpoint to be attached with the minutes	DL
ii.	<p>There was a discussion about PCNs and the main points are as follows (Q= Question, A= Answer, C= Comment:</p> <p>Q- Psychologists are missing from the list of professions. Why?</p> <p>A- It was agreed that this is an important profession but practices will be able to recruit their own staff and so can employ psychologists if there is a need within their PCN</p> <p>Q- What will PCNs look like, what practices are in what PCN?</p> <p>A-This is still being worked up. Action: DL to share with PPGs when available</p> <p>Q- How can PCNs best access patient views? It can't be a tick box exercise. Will the PPG structure change?</p> <p>A-The GMS contract will not change and therefore all practices will still be contractually obliged to have and engage with, their own PPG</p> <p>Q-What if a practice doesn't want to join a network?</p> <p>A-There is new money attached to PCNs. If a practice doesn't want to join then they will not receive the £1.50 per patient payment. Other practices within the area would need to pick up the extended hours element. There is no current indication of any practices not wanting to join in Brighton and Hove. The British Medical Association (BMA) are fully behind PCNs so it would be very difficult for a practice not to.</p> <p>Q-Will the clinical director need to be a GP or will it be an admin role?</p> <p>A-It would need to be a clinician</p> <p>Q-how will consistency be delivered? Will the CCG have a role?</p> <p>A-There will be a Direct Enhanced Service (DES) to ensure this. The GMS contract will also stay as it is.</p> <p>A-Who will be responsible for the PCN budget?</p> <p>A-This will probably sit with the clinical director</p>	DL

	<p>C- There hasn't been a PPG meeting at St Peters for ages which is not good considering all the change at the practice. Action: Hugo will chase this up with St Peters</p> <p>Q-will there be PPG representation at PCN meetings? There isn't at cluster meetings and we think there should be. Action: HL to follow this up with cluster managers. Some PPG members were not aware that such meetings exist.</p>	HL HL
5.	Social Prescribing – Jane Lodge	
i.	Action: DL to share Social Prescribing (SP) presentation	DL
ii.	<p>Discussion: 1/5 patients will see their GP for a non medical need (social need). The 2nd slide in the presentation is a high impact action taken from the NHS 5 year Forward View. Link workers will have time to explore cases to provide a more holistic approach. The link workers will receive supervision and be properly supported. The current service is at capacity. Q-We (PPG representatives) would like to see the evidence to see if it works for example: how many referrals, where they were referred to etc A-Impetus have evaluated the extended pilot on community navigators and the reports can be viewed on their website: http://www.bh-impetus.org/wp-content/uploads/2017/05/CN-Evaluation-Feb-2017.pdf Q-How are outcomes measured? A-these are self reported by users of social prescribing C-Links Road put on a successful social prescribing dance session for people with a cognitive impairment. Q-What about the cost? i.e Gym membership is expensive, will there be money to support this? A-There isn't anything in the PCN development to stop practices using money for activities like this Q-The community and voluntary sector are already under pressure, many services are already at capacity with waiting lists of up to 2 months if everyone takes up the SP offer- how will they cope? A-The link workers will be able to flag gaps in capacity and raise concerns</p>	
6.	PPG Website- Mark Richardson	
i.	Mark gave member a "tour of the website" on the big screen	
ii.	MR to change the wording of the "sign up" section of the website to open it up to PPG members (not just those that attend the meetings)	

7.	Community Works update	
i.	Community Works had to send their apologies for this meeting	
8.	Urgent Care specific to Brighton and Hove update- Tammy Ann Sharpe	
i.	Tammy presented to the group on the urgent care updates/ Urgent Treatment Centers (UTC). (see presentation)	
ii.	Action: DL send a copy of the presentation with the minutes	DL
iii.	<p>Discussion:</p> <p>C- its not clear that the walk in Centre is nurse led</p> <p>Q-a concern is that the walk in Centre (WiC) is used a lot by tourists but how many?</p> <p>A-about 25% of patients going to the WiC are tourists or language students</p> <p>Q-what is the timeline and how will it be communicated to patients?</p> <p>A-The opening of the UTC and rebranding will be by 1st December (we are working to keep some of the WiC service. We will be communicating STP wide and locally about services.</p> <p>C-this needs to be simple and clear</p> <p>C-you should ask GP practices to out the information on their practice website homepages</p> <p>C(TS) there is variation between appointments available in practices across the city</p> <p>80% of extended hours appointments are not being used</p> <p>C- we (PPGs) think this is because most people don't know that they can have appointments on weekends and evenings</p> <p>Q-will staff at the UTC be able to see patients whole medical record- out of hours can only see the summary record but it would be good if they could see it all.</p> <p>A-EPIC (extended access) practices have full access to medical records. Another issue is that practices use different IT systems (EMIS, SYSTM1, Vison) and although they are supposed to talk to each other- this sometimes doesn't work.</p> <p>C-communications need to be sent out to inform people that they can sign up to share their Summary Care Record (opt in/ out).</p> <p>Q- if you change surgery from a different area, do your records get transferred?</p> <p>A-Yes</p>	
iv.	It would be useful to have Neil Kelly attend the next meeting to talk about IT/ IG. How the systems work, what the barriers are etc. Action: DL to add to the next agenda	DL

v.		
vi.		
vii.		
9.	111 clinical services update- public engagement 111 procurement clinical assessment service- Colin Simmons	
i.	Presentation by Colin on 111/999/out of hours/ patient transport. Action: DL to share with the minutes	DL
ii.	<p>Discussion:</p> <p>50% of people calling 111 will still need to be seen by a clinician. We will know who the new provider for the 11 service is by summer. Q-The biggest issue is the reputational damage of the 111 service. What if this is a big waste of time and people don't use it? A-We recognize this challenge and we will have a plan on how to address this. C-we should just scrap it (111) and spend the money on more clinicians Q-will all call holders be clinicians? A= 50% will be clinical, we are unsure of the breakdown of disciplines at this stage. C-We should be developing the polyclinic, it's a really good service! Q-will they use AI technology A-Yes Q-How long is the 111 contract? A-7 years Q- how can PPGs contribute to spread the message to the public A-We will be asking you during the mobilization period question (I.e does this make sense) Q-will the call center be local?/ in the UK A-Yesyes, its currently in Ashford and it is stipulated in the service specification that staff have local geographical knowledge. Q-Are all areas doing exactly the same? A-this is mandated but each area will interpret the ask differently. C-We should be innovative in how it is communicated- we should get one of the soaps to play out how the service works! Q-Colin, Can you come to the next meeting? A-Yes possibly- CS to confirm</p>	CS
10.	Hospital Discharge- Gemma Clayton/ Laura Fernandez-Kanye	

i.	Gemma and Laura talked about hospital discharge because we are in the very early stages of looking how we can develop the service across the system.	
ii.	<p>Discussion:</p> <p>Q-How can we (CCG) get information from patients? (i.e patient stories, experiences etc), how do we best engage with PPGs and how do we go about it?</p> <p>A-You should be engaging with forums such as the West Hove Forum, Coffee and Croissants groups too, You can send PPGs a survey- must include open questions. We can add a discussion topic on the PPG website. You can go to individual PPG meetings. You can go to the hospital and sit on the wards and ask people there. Go can sit in a GP waiting room and talk to patients there. Ask Community Matrons- (WSUH have a good model). Healthwatch do a lot around this- have you linked up with them? How many delays are due to pharmacy/ medication- can you link in with the pharmacy/ medicines management teams? (it's not just pharmacy to blame for these delays, sometimes it's because the medication has not been ordered in time). Ask carers?</p> <p>Action: If anyone has any further suggestions please email Gemma gemma.clayton@nhs.net or Laura laura.fernandez-kayne@nhs.net</p> <p>Videos of patient stories would be good- VLOGS!</p> <p>Q-are there enough step down beds- loads of wards have been closed A-there is a big piece of work happening to address this at the moment.</p>	ALL
11.	PPG notice boards- Fabia	
i.	<p>There was a discussion on how to make the most of PPG notice boards. What do you think is the purpose of the PPG notice board, how do you know its getting to the right people and being read, what should we put on them? Minutes? PPG events?</p> <p>C-I don't think we should be advertising things like awareness days on the PPG board- its distracting and takes the focus away from PPG work. C-A3 sheets stand out more C-There is evidence that a big picture of a face draws people in. C-move posters around on a weekly basis Use the screens- make sure the speed they change is slow enough to absorb the information.</p>	

	c-the Audrey Emerton Centre library (at the hospital) have loads of resources you can use- call them and ask for Sandra Webzell C-the new DES requires practices to participate ion 6 national Health promotion campaigns- should we synchronize this?	
13.	Any other business & agenda items for next PPG conference	
i.	DL asked the PPGs to email her any thoughts and ideas they might have for the PPG conference.	ALL
ii.	The next weekend will be approaching Martyn's term as PPG chair. We will send out nomination forms with the minutes	
iii.	We should have just 3 meaty topics to discuss per meeting to keep people interested	
iv.	People need to make sure that they send Debbie their PPG meeting summary forms now that we do not have the information sharing element of the meeting	
14.	Date of next meeting	
	31 st July, 13:30-16:30, Hanover room, The Brighthelm center, North Road, Brighton	