

Clinical Commissioning Group

Public Stakeholder Network Meeting (PSN) Agenda

Tuesday 12th June 2018, Dartmoor/Exmoor Room Stakeholder Pre-meet 10:00-10:30am Main Meeting 10:30-1:00pm

Refreshments will be provided Chair: Sally Parker

	Item Description	Enc/Verbal	Objective/ Desired Outcome	Presenter	Time
1	Housekeeping, welcome, apol Apologies received from:- S			(mail entre	10.30
2.	Ambulance Services	Verbal	For information	SWAST	10:35
3.	Community Pharmacies	Verbal	For Information	Andy Acott Pharmacist	11.10
4	Membership of Meeting	Verbal	Update	Sally Parker	11.45
		Comfort E 12:00-12:			
5.	PSN Profiles	Verbal	For discussion	All	12.15
7	Community Relations Update (Standing item)	Verbal	For information	Sally Parker	12.25
8	Minutes of the April Meeting	Enc. A	To be approved/	Chair	12:30
	and review of action log and Register of Interests (Standing item)	Enc. B Enc. C	Declarations to be made		

The CCG will share its plans with the PSN and will create opportunities for the PSN to influence the CCG's plans. The members will agree the Terms of Reference of the PSN, sign up to the Code of Conduct and declare any interests they hold that could affect decision-making on a Register of Interests.



Clinical Commissioning Group

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10	Future agenda items to be agreed/review of forward planner (Standing item)	Verbal	For discussion and agreement	Chair	12:40
	Medical Waste	Barmad,	SPUS enul "El	Testerology	
	Social Prescribing	II -00:07 bang			
	Over the Counter Guidance	post t-46:07 g	Adeli Alati		
	Minor Injuries ServiceMaternity	resisted gris	6 miss	- (
	 Loneliness 	Sept Of Lade		and ingressed to	
11	Three Key Points to Feedback to PPGs (Standing item)	Verbal	To be discussed	All	12:50
		Meeting clos	se		1000

Future Meeting Dates

All meetings will be held in the Dartmoor/Exmoor Room, 1st Floor, Crown Yealm House, Pathfields Business Park, South Molton, EX36 3LH.

	Date	
100	Tuesday 4 th September 2018	17)
	Tuesday 30 th October 2018	
	Tuesday 11 th December 2018	1

Stakeholder pre-meet 10:00-10:30am Main Meeting 10:30-1:00pm

When at all possible documents and reports should be published with a minimum font size of 12. This may not be fully possible due to volume of information or existing formats. We are working towards providing information in an accessible format.

Please note that reports can be requested in larger font if required through contacting: D-CCG.northernlocality@nhs.net

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Clinical Commissioning Group

Public Stakeholders	
Carol McCormack Hole (CMH)	Community Representative
Suzie Sinden (SS)	Public Representative in community care
Brian Clifton (BC)	Public Representative in urgent care
Sandra Crawley (SC)	Public Representative
Roz Sampson (RS)	Public Representative in planned care
Cllr Jacqui Footman (JF)	Public Representative in mental health
Carolynne Beadman (CB)	Public Representative
Cllr David Goodman (DG)	Public Representative
Denise Oldaker (DO)	Public Representative
Joy Morrison (JMo)	Public Representative
Roger Watts (RW)	Public Representative
Rosie Haworth-Booth (RHB)	Public Representative
Cllr Douglas 'Roy' Lucas (RL)	Public Representative
Sue D'Souza (SDS)	Public Representative
Jenny Jacobs (JJ)	Public Representative
Kim Hancock (KH)	Public Representative
John Hancock (JH)	Public Representative
Chris Davis (DS)	Public Representative
Brian Ward (BW)	Public Representative
Sam McKibbin (SM)	Public Representative
Elizabeth Payne (EP)	Public Representative
Voluntary Sector	Apparamental Appar
1 84 1 (184)	T 0.10
Jo Manley (JM)	Torridge CVS
Caroline Lee	Healthwatch
Heather Eardley	Patients Association
Tim Lamerton (TL)	North Devon Voluntary Services
TBC	Living Options Devon
Hilary Burr (HB)	North Devon Voluntary Services
NEW Devon CCG	
Jennie Willmott (JW)	Lay Member in Patient and Public Engagement
Sally Parker (SP)	Community Relations Manager, NEW Devon CCG
Sharon Hobbs (SH)	Administrator, Northern and Eastern PDU
Moses Warburton (MW)	Commissioning Manager, Urgent Care
James Wright (JW)	Head of Commissioning North
Kerry Burton (KW)	Commissioning Manager Community Care Lead
TBC	Commissioning Manager, Mental Health
	Commissioning Manager, McHall Health

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Public Stakeholder Network (PSN) Tuesday 17th April 2018

Stakeholder Pre-meet 10:00-10:30am Main Meeting 10:30-13:00pm

Dartmoor/Exmoor Room (1st Floor), Crown Yealm House, Pathfields
Business Park, South Molton, EX36 3LH
DRAFT MINUTES

Present: Sally Parker (SP) (chair), Carol McCormack Hole, (CMH), Suzie Sinden (SS), Denise Oldaker (DO), Roz Sampson (RS), Rosie Haworth-Booth (RHB), Jacqui Footman (JF), Jennie Wilmott (JW), Cllr David Goodman (DG), Carolynne Beadman (CB), Chris Davis (CD), Sandra Guard (SG), Sandra Crawley (SC), Brian Ward (BW), Sharon Hobbs (SH) minute taker

Apologies: Brian Clifton (BC), Joan Broad (JB), Sam McKibben, Roger Watts In attendance: Pru Fong (PF), Dave McCauley (DMc) Janet Garland (JG), Claire Sprague

1 Apologies and introductions

SP welcomed everyone to the meeting and introductions were made. Apologies were noted as above. The group were advised of house-keeping arrangements and how to exit the building in the event of an emergency.

In addition, SP noted that she had received the resignation of Joan Broad SP advised that a letter of thanks will be sent from the Group to Joan Broad for her support in the past.

The group welcomed Sandra Crawley who represents Castle Garden Surgery and Brian Ward from Torrington Health Centre PPG who attended for the PSN first time today.

Action: SP to write to Joan Broad

2 Shared Decision Making

Pru Fong gave a presentation on Shared Decision Making. Pru noted that previously there have been instances of a mismatch between what is important to a doctor compared to what is important to the patient. Some cohorts of patients also held the view that Dr knows best and would not challenge what they were told. Shared Page 1

Decision Making is trying to aid patients in their consultations and in their decision making of what course of treatment is best for them.

A copy of the presentation has been circulated to the Group.

Rosie Haworth-Booth noted concern that it could be seen as an exercise to reduce the number of operations that are performed and is designed to persuade patients that an operation is not necessary. Rosie queried if the process would help patients where they would like an operation but the Dr advises that this is not appropriate or possible.

Pru advised that this was not an exercise to reduce the number of operations but ensuring that patients are able to choose the outcome that is right for them.

Chris Davis asked for the driver behind the project and queried if this was related to a money saving exercise. Pru explained that this work had come out of a project on hips and knees. Physios had highlighted that this was an important area of work. The clinicians have driven this work but drs will need to be trained in this new approach and patients will need assistance in this approach as some patients will find this approach more difficult. Pru noted that communication skills have not been an important part of the education process for surgeons but it is important that they understand how to communicate and involve patients in their choices.

Denise noted that it would be important to monitor consultants and queried if there was a process in place for this.

Jacqui noted that it was good that the emphasis was on empowering patients and reminded the group that it is important not to accept what does not feel right for you.

Carol Beadman noted that this process will involve patients acquiring a lot of information to digest and that there needs to be time for patients to assimilate the information provided and that decisions may not be able to be reached with one consultation. Pru noted that this was being looked at during the Shared Decision Making process.

Suzie Sinden noted that sometimes family pressure affected a patient's decision and that a patient may be forced into having an operation by the family but this may not be the best outcome for them.

Roz Sampson noted that she was part of the patient group for the Shared Decision Making and commented that the Group were developing a "Shopping List" for patients of information that they need and that information will be provided at each stage.

It was noted that the Shared Decision Making Process should start with Drs and include Physios and Surgeons and other healthcare professionals.

3 Overview of DRSS

Janet Garland from DRSS gave a presentation on the work carried out at DRSS. This showed the pathway for a referral and how DRSS facilitate this. Janet noted that there will soon be a new website called "My Health". This will have local information from local clinicians. The site will have information that GPs would like available and there will also be a telephone line for information for patients who are unable to access the internet.

A copy of the presentation has been shared with the group and Janet's contact details are on the presentation.

A conversation regarding waiting times followed on from the presentation. The group felt that it was important for patients to be told how long the wait would be when deciding where to go for treatment. It was also discussed that the initial wait for a consultation did not always correlate to the length of the wait for an operation if appropriate. DRSS commented that waiting time guidelines are not very accurate and so they do not mention these as they may not reflect the real time length of wait. DRSS also noted that when an initial appointment is given DRSS do not know whether this appointment will lead to surgery or other interventions so it may not be relevant to know the length of time to surgery. However, the new website will link to the National Waiting Times to give a summary guidance on waiting times.

The meeting also noted that the NHS Constitution allows for patients to receive care in any hospital not just the ones closest to their home. There is also the ability for patients to receive care in a privately funded hospital if appropriate. However, conditions such as Body Mass Index (BMI), chest or heart conditions and uncontrolled diabetes affect the use of some privately funded hospitals as they may have not the emergency care facilities that may be needed.

Rosie Haworth-Booth raised a specific query regarding patient choice of hospital. It was agreed that Rosie would liaise directly with Janet Garland regarding her query.

Jennie Wilmott noted that she will raise the issue of waiting times at the next Governing Body Meeting. At Governing Body, feedback is often that patients will not travel to take an appointment more quickly than that available at their local hospital. If the waiting time information is inaccurate and is not always disclosed to the patient then this needs to be fed back to Governing Body.

Janet agreed to take away these observations and look into a solution but noted that local waiting times including time to surgery were an important part of the choice process for patients when deciding where to go for treatment.

Action: JW to feedback to Governing Body issues relating to waiting times Action: JG to review waiting times and availability of data for patients when choosing where to go for an appointment.

4 Autism

The Group welcomed Dave McCauley, Head of Commissioning for Autism. Dave gave a presentation on autism proposals for adults in Devon. A copy of this presentation has been shared with the Group. Dave noted that the proposals make use of money already in the system rather than sourcing new funding.

Jacqui Footman noted that it is important that the system considers young people who have been damaged by not having access to appropriate services. Jacqui will email Dave McCauley regarding input in his proposals.

It was noted that autism services for children is included in the Children and Young Persons Commissioning reprocurement. The link to this on the CCG website is here.

https://www.newdevonccg.nhs.uk/your-ccg/children-and-young-people-100144

Dave McCauley noted that Virgin Care are leading on Children's Autism.

5 Mental Health Work

Jacqui Footman noted that she had recently met with Karen Acott for the first time to discuss Mental Health work in the CCG. Jacqui felt that the meeting had been a good starting point and looked forward to building a relationship with Karen and understanding more about Mental Health Work within the CCG. Jacqui felt that Karen had the same viewpoint as herself and would ask difficult questions to make sure providers do what they are meant to do.

6 PSN Engagement with Commissioners

Roz Sampson updated the group on her meetings with James Wright. Roz explained that she has met several times with James Wright and also Pru Fong. The meetings with James have been "eye opening" as to how much money is spent on services. James had also explained to Roz that in future budgets may be moving back to NDHT to hold so that they decide how the money is spent.

Roz advised that she will be working with Pru on a group looking at a "Workforce training needs and education" project.

Sally noted that if there are any opportunities to engage with the CCG on projects that these will be shared with the Group.

Chris Davis queried if Roz felt that the sessions with James were worthwhile and if she felt listened to. Roz explained that she felt that James does listen to what she has to say but that the Group had not alerted her to any problems that should be raised with James.

Suzie Sinden explained that she had initially worked with Kerry Burton but that due to changes in work patterns she was now placed with Moses Warburton. Suzie advised that Moses does email updates and explains situations to Suzie and that she had felt that the contact with Moses had been worthwhile.

It was noted that the CCG does listen to what the PPG have to say. As a result of the last PSN meeting which John Womersley attended he is now reviewing how bloods are being taken for pre-op appointments and the time frame for these.

Carol McCormack commented that the Group were privileged that the Northern Locality Commissioners do engage with the Group and listen to what is being said. The PSN relationship with the CCG is not just a tick box exercise.

Tim Lamerton noted that there is a problem with the relationship with the Third Sector. Whilst on a macro level relations are good this does not follow through on a micro level. Sally noted that the commissioners are aware of the wealth of resource available in the Third Sector. Suzie agreed to pick up these concerns with Moses Warburton.

Clarity was requested on the various areas covered by commissioning with the CCG and the ways it is possible to engage with the CCG.

Sally noted that she is reviewing how roles and remits are explained to volunteers and will take this back to the Induction Working Group.

A discussion ensued on how problems and concerns raised at local Patient Participation Group Meetings are escalated via this group to the CCG.

It was agreed that the Profile Template be sent out for refresh so we can gain a better understanding of the areas of expertise within the Public Stakeholder Network. At the same time, the Terms of Reference and Jargon Buster should also be sent out for information. It was noted that this may need to be updated with new acronyms.

Action: SP to update Jargon Buster

Action: SH send out Profile Template with Terms of Reference and Refreshed

Jargon Buster

7 Register of Interest/Minutes of the Last Meeting and Action Log

An amendment to the minutes was noted by Rosie. This relates to the item on recycling. Rosie's comments should read:

Rosie noted that the CCG may find it financially expensive to re-cycle equipment but there is another, environmental cost, which seems to be overlooked. Costs should not always be reckoned simply in monetary terms. In the longer term environmental depredation can itself be extremely costly.

She felt this should be addressed by the CCG.

The group agreed the rest of the minutes of the last meeting (20th February 2018) were accurate with no other amendments.

The action log was reviewed.

Action: Amended February Minutes to be circulated for reference

8 Any Other Business

- 1. It was noted that this meeting is a forum for the Patient Participation Groups to interact with/update the Commissioners. The attendance of the Voluntary Sector at this meeting was queried by Tim Lamerton. Sally Parker noted that the time is right to think about the future of this forum and how it fits into the engagement structure. The Integrated Care Model needs to be reviewed and there needs to be a review of whether the meeting should be broader than just the Patient Participation Group Members. Sally will liaise with Ray Chalmers on this.
- 2. Sally advised the Group that there are two Public Meetings scheduled re Holsworthy Beds.
- 3. Sally also advised that there is a Maternity Services Review being conducted and asked the Group to contact her if there was interest in being involved in this. Both Denise Oldaker and Suzie Sinden advised that this is a subject that they would like to be involved with.
- 4. Sally agreed to clarify if Tim Lamerton can claim mileage expenses for this meeting.

Action: SP to liaise with Ray Chalmers on membership for PSN Meetings

Action: SP to link Denise and Suzie with Maternity Services Review Action: SP to clarify expenses for Voluntary Sector attendance

9 Future Agenda Items to be agreed

It was noted that there are several items on the forward planner for this meeting. It was agreed that Sharon would email out a list of possible future agenda items and ask the Group to prioritise the Agenda for next time.

10 Three key points to feedback to PPGs

11 AOB

Stakeholder pre-meet

Actions:

1. Add Community Pharmacy to forward Agenda planner

 Carolyn Beadman to construct letter to Moses Warburton on behalf of PPG voicing support and request for continuation of the Paramedic Visiting Service. Moses had indicated that at present there is no money available for this project to continue.

12 Date and time of next meeting

Stakeholder informal pre-meet 10:00-10:30am Main meeting 10:30-1:00pm

1. Tuesday 12th June 2018

All meetings will be held in:

Dartmoor/Exmoor Room, 1st Floor, Crown Yealm House, Pathfields Business Park, South Molton, EX36 3LH.

END OF MEETING

These minutes have been approved as an accurate record of this meeting Signed:
Chairman

Date: 05.12.17

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	By Whom										
	Closed										
Locality Public Stakeholder Network	Progress on action	Update - 25.07.17 - Actioned changed from JM to SP who gave an update on how STP is reviewing engagement as a whole and how we can align processes with SD&T. Update - 15.11.17 - ongoing work		29.03 Sara still consulting on this and will udpate everyone at the June Meeting	29.03. Sara is still reviewing this and will udpate everyone at the June meeting.	29.03 Sara still consulting on this and will udpate everyone at a future Meeting	29.03 Sara is hoping to report back at a future meeting	17.04.18 - Sally advised this has been done	18.04.18 Letter sent	29.05.18 - JW is progressing this information	Janet advised that DRSS are planning to include links to the national information on waiting times on our patient website due to be launched on 5th July. Unfortunately there is no information for Northern Devon District Hospital as they are experiencing technical issue with their new reporting system.
bublic Stal	Lead	Sally Parker	Stakeholders	Sara Wright	Sara Wright	Sara Wright	Sara Wright	Sally Parker	Sally Parker	Jenny Wilmott	Janet Garland
	Target Date	ASAP	31.01.18	20.03.18	20.03.18	20.03.18	17,.04.18	20.03.18	18.04.18	29.05.18	29.05.18
Northern	Action	SP to streamline ToR with the following: 1. Map CCG work programme and link in with PSN agenda. 2. Stakeholders to send PSN administrator questions for AOB at least 2 weeks prior to the next meeting and limit number of AOB questions to allow time for these to be answered. 3. Stakeholders to familiarise themselves with relevant webpages. 4. Identify other groups which may be interested in attending the meetings or receiving meeting minutes. 5. Update/administer Northern locality PSN web pages. 6. Include travel claim form with each set of PSN paperwork. 7. Create a forward planner for agenda items for future meetings. 8. Map patient representatives from children's commissioning work programme to PSN. 8. develop better links/feedback system between NDVS work and PSN group. 9. add regular updates to Friday PM email	Stakeholders to email RG their ROI	Sara W to liaise with NDHT on recycling items and difference in policy to RD&E	Sara W to review CCG policy on issuing medical aid items at Pre Med Appointments	SW to clarify decision process for recycling items - Is it CCG or suppler?	SW to report back on waste medical equipment findings at future meeting	Sally Parker to feed back to Peninsula Network re Open Days at Surgery	SP to write to Joan Broad with letter of thanks for her participation with group	JW to feedback to Governing Body issues relating to waiting times	JG to review waiting times and availability of data for patients when choosing where to go for an appointment
	Date	20.07.17	05.12.17	20.02.18`	20.02.18	20.02.18	20.02.18	20.02.18	17.04.18	17.04.18	17.04.18
	Item	NLPSN 07/26	NLPSN 12/41	NLPSN 02/46	NLPSN 02/48	NLPSN 02/49	NLPSN 02/50	NLPSN 02/54	NLPSN 04/58	NLPSN 04/59	NLPSN 04/60

		Northern	n Locality F	ublic Stak	Northern Locality Public Stakeholder Network			
Item	Date	Action	Target Date	Lead	Progress on action	Closed	By Whom	OPEN/ CLOSED/FOR
NLPSN 04/61	17.04.18	SP to update jargon buster	29.05.18	Sally Parker	14.05. New link to jargon buster sent			CLOSE
NLPSN 04/62	17.04.18	SH send out Profile Template, Terms of Reference and Updated Jargon Buster	29.05.18	Sally Parker	14.05 Template sent			CLOSE
NLPSN 04/63	17.04.18	SP to liasie with Ray Chalmers on membership for PSN Meetings	29.05.18	Sally Parker				OPEN
NLPSN 02/64	17.04.18	SP to link Denise and Suzie with Maternity Services Review	05.05.18	Sally Parker	01.05 Sally to reivew and update in meeting			OPEN
NLPSN 04/65	0, 10, 10	SP to clarify expenses for Voluntary Sector	20.05.18	20 N	4000 od ot			CDEN