

Minutes

PPI Committee
Monday 20th November 2017, Committee Room, Arnold Civic Centre

Present:

Janet Champion (JC) (Chair)	PPI Lay Member, NNE Governing Body
Sharon Bentley (SB)	Patient and Public Representative
Hazel Buchanan (HB)	NNE Director of Operations
Francis Henman (FH)	Patient and Public Representative
Mariea Kennedy (MK)	PALS Officer (<i>deputised on behalf of Helen Horsfield</i>)
Terry Lock (TL)	Park House PPG
Sharon Pickett (SP)	Deputy Chief Officer
Kathryn Sanderson (KS)	Patient and Public Representative

In Attendance:

Louisa Hall (LH)	Corporate Admin Officer
Antonia Smith (AS)	Corporate Communications Manager

Apologies:

Deborah Bellamy (DB)	Patient and Public Representative
Helen Horsfield (HH)	Complaints Manager
Elaine Maddock (EM)	Governing Body GP Representative

Cumulative Record of Members Attendance (2017/18)

Name	Possible	Actual	Name	Possible	Actual
Deborah Bellamy	4	3	Terry Lock	4	4
Sharon Bentley	4	4	Elaine Maddock	4	3
Hazel Buchanan	4	3	Sharon Pickett	4	2
Janet Champion	4	4			
Francis Henman	4	4			
Helen Horsfield	4	4(1x deputy)			

Item		Action
PPI 17/044	<p><u>Welcome and Apologies</u></p> <p>Janet Champion (JC) welcomed the group. Apologies were noted above.</p> <p>Quoracy was confirmed.</p>	
PPI 17/045	<p><u>Declarations of Interest</u></p> <p>The Chair reminded committee members of their obligation to declare any interests they may have on any issues arising at Governing Body meetings which might conflict with the business of the CCG.</p>	

	<p>Declarations of the Patient Participation Involvement Committee were listed in the CCG's Register of Interests. JC noted that the Register was available either via the secretary to the PPI Committee or the CCG website at the following link:</p> <p>http://www.nottinghamnortheastccg.nhs.uk/contact-us/freedom-of-information/conflicts-of-interest/</p> <p>No Declarations of Interest were made in relation to the agenda.</p>	
<p>PPI 17/046</p>	<p><u>Minutes and Actions from previous meeting 12.09.2017</u></p> <p>The minutes of the meeting held on 12th September 2017 were approved as a true and accurate record with one minor amendment.</p>	
<p>PPI 17/047</p>	<p><u>CCG Alignment update</u></p> <p>Hazel Buchanan gave an update on the alignment process advising that this is taking longer than anticipated with phase 1 of the top tiers to be completed by Christmas with the rest of staff in January 2018.</p> <p>The Committee was updated that Sam Walters is now appointed as the Accountable Officer and Jonathan Bemrose as the Chief Finance Officer.</p> <p>HB presented the top tier structure paper and gave an overview of the tiers. It was added that the capability and capacity review carried out by Deloitte highlighted the need to align financing, contracting and performance to be more efficient.</p> <p>It was added that there is an existing medical director in Nottingham City CCG so this will also be considered for the County.</p> <p>Engagement elements will sit under the chief operating officer. The Committee were informed that there will be four localities directors. This will ensure that locality focus is maintained whilst working over the 4 CCGs. The Partnerships role will also have a responsibility for communications and engagement and to liaise with the district and borough councils, HealthWatch and police etc.</p> <p>As the consultation for the top tiers is now closed, the slotting/pooled posts or competitive interview process will be looked at. HB confirmed that this will be based on job descriptions with an offer of post but currently unknown if for more than 1 post.</p> <p>Joint committee structure is now being reviewed with the committees going to a single structure for the four CCGS with delegated responsibility, clinical and management. Reviewing what can go through the joint committee but some elements cannot go through legally as the 4 statutory CCGs have a duty to continue these. Various meetings will be taking place to discuss the different committees across the patch.</p> <p>Engagement will be looked at in detail to also ensure the Greater Nottingham CCGs reach out to right groups through the city and county.</p>	

	<p>HB informed the Committee of the different elements of the 4 CCGs. It was queried that the 4 CCGs seem to have different levels of representations and raised the issue if there are any other significant ways of working that are beneficial or detrimental across each. Involvement needs to be secured with the difference around membership. City CCG also has voluntary as a big part of the sectors to help to engage so it will be important to have a matrix of membership.</p> <p>The Committee raised queries around the responsibility of the committees being advisory and how the input of the district borough council is managed through the PRGs and Committees.</p> <p>It was commented that continuing focus on localities this could overwhelm the nature of the committee. HB confirmed that the committees have to demonstrate that it covers a breadth of population and not just locality.</p> <p>HB highlighted that the framework requires agreement so that sub-groups and the committee can be progressed. Feedback is being received at the moment and liaising with the patient groups.</p>	
<p>PPI 17/048</p>	<p><u>ACS Update</u></p> <p>JC gave an overview on the ACS update meeting at Easthorpe</p> <p>It was highlighted that there were discussions around simplifying what things meant with views to have more time to look at outcomes and what the milestones would be.</p> <p>It was shared that there was a general consensus to get the full ACS story so that it can be described in confidence and with full support.</p> <p>Steve Thorne is working on the comms for ACS with the first ACS event held at Albert Hall and led by the Clinical leads. Q & A was lively which dominated the meeting with questions raised on the STP.</p> <p>Feedback was given on how to better improve the next event and will feature on the Greater Nottingham website.</p> <p>JC informed the Committee that a patient story has been done to show what the system currently looks like and what it would look like in the future.</p> <p>The next ACS event will take place in Rushcliffe in February 2018. The Committee discussed options to tackle unevenness in attendance from different communities. It was confirmed that Steve Thorne is looking into this.</p>	
<p>PPI 17/049</p>	<p><u>Medicines Management</u></p> <p>Antonia Smith gave an update on the self-care roadshow that has been happening and the practices visited so far.</p> <p>This highlighted self-care but also to incorporate completion of surveys on the Over The Counter (OTC) changes and repeat prescribing feedback.</p> <p>Once all practices have been visited, Nikki Biddlestone will be pulling together a report of findings.</p> <p>146 replies have been received so far with a majority not noticing the changes or</p>	

	<p>impact of the OTC changes and the findings as follows: 83% haven't seen an impact on them. 52% order their repeats in practices and not the pharmacy. 89% know that medicines cannot be recycled once left pharmacies.</p> <p>It was suggested that a question around receiving free prescriptions would be useful due to the high number of prescription receivers and to ask about pre-payment. HB added that savings of around £10,000 a month have been made on Over The Counter.</p> <p>The Committee discussed how to avoid stockpiling or medicines that patients no longer need. It was added that there is a need to work on pharmacy culture as well as patient and clinicians. Kathryn Sanderson (KS) added that their locality has seen positive results with patients getting accustomed to it after concerns about taking more trips; however, patients can still get it to the pharmacy from the doctors.</p> <p>The Committee raised concerns around vulnerable groups. Elderly and assisted needs can still be exempt and go to pharmacies. KS monitored who collected the prescription in the locality to see if it was the patient, relative etc. and will all be blocked into lists so they can be reviewed more easily.</p>	
<p>PPI 17/050</p>	<p><u>Primary Care GP Access</u></p> <p>The Committee was issued with the presentation and asked if there were any questions on the content.</p> <p>This gave a brief overview on the survey on what patients thought about the 7 day service and extended hours. Result shows that patients wouldn't be bothered if it was a Saturday or Sunday. Concerns were raised around alleviating or causing more pressure for GPs.</p> <p>Patient access also raised concerns on how to support those who cannot travel etc. with a possibility of a hub in a certain locality etc. Meetings have taken place with PPG members to look at ideas for hubs and how it could work. It was recommended that there is a need to look at flexibility for access and bases etc. and the level of GP support available.</p> <p>Sharon Pickett (SP) gave an overview of the process of roll out with 2017/18 part funding then following year with full funding. This is with an aim to run a full service from Oct 2018 instead of part.</p> <p>The Committee were informed that the specification is currently being devised and timings are being finalised. The Committee acknowledged that it would have a further update once available.</p> <p>It was commented that 506 responses is positive but with the population being large there would be a need for a follow up response survey after the procurement has been done and then a further survey after 6 months to assess the impact. A discussion took place around how to get further surveys from a wider</p>	

	background and those of a working age who may not use the service frequently.	
PPI 17/051	<p><u>Joint PPI Committee</u></p> <p>See agenda item PPI 17/047, both agenda items discussed above.</p>	
PPI 17/052	<p><u>PPI Improvement and Assessment Framework results</u></p> <p>HB informed the Committee of the PPI Improvement and Assessment Framework results that have been received for NNE. The full report has not been sent out yet; however feedback that has been received is positive. The assessment which is carried out by NHSE has RAG rated NNE as Green with positive feedback on engagement and annual reports. Improvements to be seen on the website that it is not clear on how to get information in different formats (audio, braille). The full report will be shared once available.</p>	
PPI 17/053	<p><u>PPG Forum notes from 03.10.2017</u></p> <p>The Committee acknowledged the PPG Forum notes. Dementia presentation was well received.</p>	
PPI 17/054	<p><u>AOB:</u></p> <p>Terry Lock (TL) gave an update on the Connected Notts project advising the Connected Notts IT Summit is being held on the 21st November. This included an introduction into the ACS and also adapted technologies. Midlands Accord meeting will be taking place before Christmas. TL added he will feedback if appropriate. HB raised a query on engagement for Connected Notts. TL confirmed that the portal is going well and was well received. Set up a call centre for patients regarding applied consent. GPRCC phase 3 is being formed and extended to social care. Some places have been doing more things in liaising with different CCG areas to use and share best practice. Penetration testing has been done with 100% results. TL to provide an update at the next meeting where applicable.</p>	TL
<p>Details of the next meeting Tuesday 9th January 2018, 1pm-4pm Chappell Room, Civic Centre, Arnot Hill Park</p>		

Meeting administrator: louisa.hall@nhs.net

All attendees should be aware that there is a requirement to comply with the Freedom of Information Act 2000. The minutes and papers from this meeting could be released as part of a request for information

Ratified