



Notes from Patient Reference Group 25th October 2018

Yvette Robbins Lay member of ESCCG's Governing Body and new Chair of the Patient Reference Group (PRG) welcomed everyone and gave apologies from Dr Elango Vijaykumar Clinical Chair of East Surrey Clinical Commissioning Group.

No new conflicts of interest were declared.

Information and advice about care and support in East Surrey – Nathalie Gordon

Following Nathalie's presentation back in June, and having heard from PRG members about how little was known about who to contact for Social Care enquiries and how, Nathalie introduced different resources and ways that GPs, healthcare professionals and members of the general public can seek information and advice.

The Surrey County Council website <https://www.surreycc.gov.uk/> has been reviewed and the section on **care and support for adults** now includes direct links to online self-assessments for social care, and details on how much someone might be expected to pay (the eligibility criteria for free care is high).

On the same page other related links include; staying independent, keeping fit and well and disability and mental health.

We all know that as medicine advances and expectations rise, more and more demands will be put on health and care services. However, there is a lot of help available that might keep people engaged enough to prevent some of this demand. Help is often out there but finding it can be a real ordeal.

For those who have easy access to a computer (and all present in the room did) google seemed to be a first call. However, google may not have details of smaller, local organisations that do not have their own website.

The Surrey Information Point (SIP) allows access to a host of support and services from; using public transport with a disability to specialist equipment suppliers and safety.

<https://www.surreyinformationpoint.org.uk/Categories/26>

ESCCG heard at the Big Health and Care Conversation that access to services and knowing what is available in our community to help people is a real issue. A revised website that has been developed accounting for public feedback and the Surrey Information Point with its comprehensive database can be a great help in directing public and professionals to further support.



Collaborative Practice: Doing things differently in primary care – Altogether Better Project.

Lucy Beach and Trevor Hook (Practice Champion at Caterham Valley Medical Practice) gave an update on how this successful project has been working in East Surrey.

Altogether Better have been working with the following practices to develop “Collaborative Practice”:

1. Smallfield Surgery
2. Birchwood
3. Wall House
4. Townhill
5. Caterham Valley
6. Elizabeth House
7. Hawthorns

However, East Surrey CCG commissioned Altogether Better to work with 8 practices so there is still room for 1 more in this early phase (Warlingham Green/Chaldon Road might be interested).

The project finds interested and enthusiastic local people (through invitation) and supports them to set up new, very local support groups centred around the practice population but relying on the community and practice champions to make the groups successful.

We heard examples of; Welcome on Wednesdays (WOW) Coffee Mornings, Type 1 Diabetes Support Group, Stressbuster yoga, Walking, New Parents, Men’s Health groups, waiting room support e.g. check-in screen, blood pressure and on-line services, helping out at flu clinic and “Share my Doggy” walks.

Trevor the update the PRG on how Caterham Valley Practice Champions have been helping their community;

- 13 champions currently active supported by Practice Manager, GP and Senior Receptionist
- Provided waiting room support for the new appointment system/online services. Approx. 200 people supported.
- Weekly Coffee morning on Wednesday started 20th June, approx. 6 people attend each week
- Fortnightly new Parents Group started 6th June but stopped as wasn’t working very well
- Meditation Session started 18th June – 10 places fully subscribed new sessions planned
- Atrial Fibrillation testing started in the summer. Identified approx. 10 patients so far
- Support to flu clinic (plus AF testing)
- In the pipeline: knitting, cooking for one, Support Group for people with pain, walking group

Active Signposting Alliance for Better Care- ABC (ES GP Federation) - Rhianna Hills

- Active Signposting Training for Reception Staff.

A person centred approach that uses signposting and information to help Primary Care [GP] patients and their Carers move throughout the Care system as smoothly as possible to ensure that unmet needs are met.

In order to facilitate Care Navigation training for selected reception and clerical staff across practices, General Practice Forward View and CEPN funds have been ring-fenced to enhance these roles in active signposting. Other training needs for clerical and reception staff remain the responsibility of the employer and are not covered by this funding.

ABC intend to support every practice to have the opportunity to train nominated staff to undertake this training.

Having Care Navigation skills within the Practices will provide patients with a first point of contact which directs them to the most appropriate source of help. Web and app-based portals can provide self-help and self-management resources as well as signposting to the most appropriate professional. Receptionists acting as care navigators can ensure the patient is booked with 'the right person, first time'.

Reception staff will be given training and access to a directory of services, in order to help them direct patients to the most appropriate source of help or advice. This may include services in the community as well as within the practice.

Benefits for practices: This innovation frees up GP time, releasing about 5 per cent of demand for GP consultations in most practices. It makes more appropriate use of each team member's skills and increases job satisfaction for receptionists.

Benefits for patients: It is easier for patients to get an appointment with the GP when they need it and shortens the wait to get the right help.

In order to achieve these aims, research was carried out against NHSE Bronze Level Content Descriptors for Care Navigation Training.

ABC Admin have contacted practice managers to create a customised directory of services that might consist of;

- Services
- Activities
- Support groups

To starts it would focus on 6-8 key services that are of highest priority, those that would make an impact releasing GP time locally and those that patients are likely to be willing to attend (a mixture of primary care and community/voluntary service). Examples have included:

- ✓ Pharmacy
- ✓ Dentist
- ✓ Mental health

- ✓ Bereavement
- ✓ Transport
- ✓ Benefit & advice services

To find out more please click on link below;

<https://www.slideshare.net/NHSEngland/13-active-signposting-getting-the-most-out-of-it>

There were questions around duplication between Surrey Information Point and of the database held by the federation. It was explained that the reception staff and federation database could/would indeed use SIP – but would also use statutory services too that the general public may not be able to refer into directly.

Active signposting would mostly involve telephone or face to face interface whilst SIP is reliant on someone having access to a computer.

Basically we need to have options for people to access support in the best way possible for them.

[GP Patient Survey Results 2018](#)

The GP Patient Survey (GPPS) is an England-wide survey, providing practice-level data about patients' experiences of their GP practices.

The data is based on the August 2018 GPPS publication.

This presentation presents some of the key results for NHS EAST SURREY CCG.

In NHS EAST SURREY CCG, 4,831 questionnaires were sent out, and 1,950 were returned completed. This represents a response rate of 40%.

The GP Patient Survey measures patients' experiences across a range of topics, including:

- Making appointments
- Perceptions of care at appointments
- Managing health conditions
- Practice opening hours
- Services when GP practices are closed

Overall experience of GP practice – **ESCCG 87% Good**
Nationally 84% Good

Overall experience: how the CCG's results compare to other local CCGs – Results range from **74%-90% putting ESCCG in the best performing category** regionally.

There is also practice specific information available which could be of great use to PPGs and could help Practice Champions decide which groups/support could best benefit their practice e.g. use of online services and support with managing long-term health conditions.

For more information about the survey please visit <https://gp-patient.co.uk/>

Round the PPGs and PPG stocktake survey

Birchwood – Help with flu clinics, Patient education evenings continue

Whyteleafe – Going well. Always have a GP present at meeting. Good feedback on information notice board and support for practice staff

Caterham Valley – New Practice Manager, Patient Champions work going very well.

Oxted Health Centre – Recruiting new young PPG member as previous volunteer has left for University. Recent evening presentation from Dr Vijaykumar and Dr Hill.

Hawthorns – Struggling to recruit new members. New practice Manager.

Townhill – Virtual Group which seems to suit members. PPG have been helping at the recent flu clinics, directing and helping patients remove coats etc.

Woodlands Road – No PPG Group

We are inviting patients registered with East Surrey practices to complete the Patient Participation Group (PPG) Survey to enable East Surrey Clinical Commissioning Group (CCG) to understand the role and activities of PPGs along with the skills and expertise of PPG members. The results will be shared on the CCG website. Deadline for completing the Survey is 3 December 2018.

[Click here to complete the survey or visit our website](#)

<https://www.eastsurreyccg.nhs.uk/news/ppg-survey/>

Clinical Lead's Update

Led by on this occasion by Dr Howard Cohen, one of our Clinical Leaders at East Surrey Clinical Commissioning Group and Senior Partner at Elizabeth House Practice in Warlingham.

Feedback Big Health and Care Conversation (BHCC) Nutfield Lodge 31st August 2018

ESCCG welcomed more than 80 members of the public, patients, partners and colleagues, listened to what matters most to them and talked about the challenges that we all face in health and social care.

The conversation was guided by "Talking Points", chosen according to previous feedback.

- Staying healthy and helping people manage their condition
- Improving access to services
- Improving children's health and wellbeing
- Improving older adults health and wellbeing
- Emotional wellbeing and mental health
- Finances

There was an understanding that the NHS cannot do everything and that the prevention of disease, improved self-care/self-management and early access to necessary and evidence-based, quality treatments should be our priorities.

Participants seemed ready to hear difficult messages around money and funding “we’re all grown up and everyone has to make decisions and stick to their budget” – most of all they appreciated honest conversations.

From what we heard we were able to take some immediate actions

You said

“There are lots of additional and innovative services available in East Surrey but we don’t know about them!”

We did

- **Dedicate the whole of the next edition of Patient Round to services locally available.**
- **Ask service providers to look at their own marketing and awareness raising – taking note of where participants felt we should be advertising.**
- **Hear from ABC (East Surrey GP Alliance) that all the receptionists in East Surrey practices are undertaking Active Signposting training.**

You said

“Healthcare professionals need to understand what Young Carers need from them”

We did

Circulate materials prepared by Surrey Young Carers and NHSE to help professionals understand the needs and wants of Young Carers and to be better able to identify them.

You Said

“Social Prescribing is supported – Wellbeing advisors would like better knowledge of MH services and support available”.

We did

Arrange for ESCCG GP Clinical Lead for Mental Health to meet monthly with Wellbeing advisors for informal training, looking at case studies/what went well and Q and As session.

You Said

“Could advanced care planning be done at much earlier stages?”

We did

Start work to investigate the progress of the ReSPECT process in our locality.

<https://www.respectprocess.org.uk/>

ReSPECT is a process that creates personalised recommendations for a person's clinical care in a future emergency in which they are unable to make or express choices.

ReSPECT can be for anyone, but will have increasing relevance for people who have complex health needs, people who are likely to be nearing the end of their lives, and people who are at risk of sudden deterioration or cardiac arrest. Some people will want to record their care and treatment preferences for other reasons.

Dr Cohen was keen to impress on the audience just how important it is to hear the views of our community and how helpful public critique and challenge can be.

Dr Cohen was also able to explain how (from a practicing clinicians point of view) the presented initiatives from the evening, help to reduce pressure on GP practices, potentially offer more expert and appropriate support to patients and Carers and can bring communities together to reduce social isolation.

Questions were asked about the funding of the NHS and whether taxes from tobacco and alcohol could/ should/ or indeed do fund the NHS and there was a brief discussion about so called self- inflicted illnesses or those that arise from "lifestyle choices". Dr Cohen explained that the NHS cannot treat people according to any type of judgement based on their background. Decisions, including commissioning decisions, must be clinically made and look at outcomes, safety and equity and not based on person's "worth".

Difficult Decisions and Clinically Effective Commissioning - Stella Price

ENGAGEMENT AND EQUALITY REVIEW GROUP

David Borer, Sue Palmer and Stella were amongst those asked to be members of the Engagement and Equality Review Group as part of the Financial Recovery Plan for the "north Place" CCGs. So far we have had two meetings in Crawley in July and August. One scheduled for earlier today was unfortunately cancelled. The Review Group includes patient/carer representatives, Healthwatch and a Voluntary Community representative.

Our first meeting in July gave us a complete overview of the problems and challenges the Alliance had. We also agreed The Role of the Group, Terms of Reference and Public Pledges.

Background:

CCGs of Central Sussex and East Surrey recorded a deficit of £87m. It has been agreed with NHS England that the best way to deal with this deficit is for the CCGs involved to form an Alliance. The Alliance needs to control a total deficit of £65m. If this is achieved the Alliance

will receive £65m from NHS England and will be in a breakeven position hence the Financial Recovery Plan. The Alliance need to achieve £48m in this financial year. To date we understand £25m of the £48m has been identified.

These CCGs have been divided into two Group, North and South for this purpose. We are in the North Group. For information both North and South Groups will adopt the same recovery plan.

The Alliance need to achieve £48m in this financial year. To date we understand £25m of the £48m has been identified.

The key role of our group will collectively review the Alliance plans around service delivery change and the commissioning/decommissioning of services from the Engagement, Equality and Diversity and Inclusion perspective. The Group will provide assurance that the engagement plans are appropriate and that appropriate Equality Analysis has been undertaken.

In other words we will do our best to make appropriate comments and ask questions if a service is decommission or commissioned on how it might affect local people. Not all doom and gloom – some services may be commissioned to save money.

It is important to say we do not have decision making powers. However, we can make suggestions/recommendations and the Alliance will give due regard to these suggestions/recommendations.

In August a group of GPs and Chief Pharmacists and commissioners reviewed the savings and have prioritised opportunities that may safely deliver savings. 20 savings areas have been identified and 9 have been prioritised.

So far two areas have been identified to the Group. These were discussed in detail and many questions asked by the group. We believe these two areas were reasonably considered.

The next meeting for our Group should be in November.

The meeting closed at 9.30pm

Date and time of next meeting Thursday 28th February 2019 7.00-9.30pm – Nutfield Lodge Redhill