

NHS Lambeth CCG Public forum 2<sup>nd</sup> May 2018 Notes

|   | Source  | Question   | Summary response   | Action                        |
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| 1 | Gay Lee<br>Lambeth Keep<br>Our NHS Public<br>(KONP) | <p><u>Closure of the Walk in Centre at Gracefield Gardens:</u><br/>It is approximately a year since the closure of the Walk in Centre (WiC) at Gracefield Gardens and I have heard that there are still issues about people turning up because they still think it is a WiC, who are not registered with a GP and are turned away because they do not have a booked appointment?</p> <p>Are any statistics being kept on this? If not, could the receptionist staff at Gracefield Gardens be asked to keep records of this activity for a month to understand whether this problem is still occurring?</p>   | <p>Lambeth GP Federations who run that service have supplied information which shows that since 1<sup>st</sup> April 2017 to this week there were 155 appointments (10-15 per month) that were booked on the day where we cannot identify a registered practice. That does not necessarily mean that these people were not registered or did not have an appointment as these figures may be partly related to administration.</p> <p>Reception staff estimate there are approximately two to three people per week arriving without an appointment and they can immediately book an appointment if there is one available there or at another practice even if they are unregistered. The numbers are therefore relatively small.</p> | None                          |
| 2 | Gay Lee<br>Lambeth KONP                             | <p><u>GSTT orthopaedic services:</u><br/>Guy's and St Thomas NHS Foundation Trust (GSST) are reorganising their orthopaedic services. Eight new theatres costing £300m are being built by Johnson and Johnson which the Trust will own. There is the question also of capital money and the procurement of equipment and devices through Johnson and Johnson and the setting up a centre of excellence for orthopaedic care, none of which appears to be in the public domain.</p> <p>We feel this will interfere with the existing South East London Elective Orthopaedic Clinical Network by drawing patients away from other providers of elective orthopaedic towards GSTT. This is a matter for the CCG</p> | <p>The CCG sent a written response to this written enquiry earlier today. This was summarised for the benefit of the meeting.</p> <p>The ongoing equipment replenishment will be funded through revenue income streams of the Trust, including commissioner income from activity. In terms of choices and assumptions about which patients will use the new facilities, GSST are completing this work in response to their current demand and they have a growing referral base. There is a real pressure on system at moment and they therefore need to take on more capacity.</p> <p>However, we do recognise as a network that it is</p>  | Yes – CP to discuss with GSTT |

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|   |                         | <p>as the Elective Orthopaedic Network is part of the SEL Sustainability and Transformation Partnership (STP); also because the CCG as commissioner provides GSTT with money to procure equipment.</p> <p>We are worried also that Peter Earnshaw the clinical director of the services at Guy's and St Thomas' is also the clinical director of the South East London Elective Orthopaedic Clinical Network. Is this a conflict of interest?</p>                                   | <p>necessary to provide a quality service at every site.</p> <p>In relation to Dr Peter Earnshaw, in the job description for the role two things were clear: that that the clinical lead should be recruited from within an existing orthopaedic service in SEL, therefore owned by a local Trust; and that the role is to provide independent network advice to the whole network system.</p> <p>The recruitment process for the post followed the usual process, with an independent orthopaedic consultant on the interview panel. Peter Earnshaw was recruited as a result of this. This is set out in the CCG response sent to you earlier today. The response provided by the CCG is also echoed by the STP.</p> <p>CP said that there is a concern that this has not been communicated well, and offered to raise GL's concerns with GSTT and seek a response from on these matters.</p> |      |
| 3 | Gay Lee<br>Lambeth KONP | <p><u>Workforce risks associated with the Lambeth Living Well Network (LWN) Alliance:</u></p> <p>The LWN Alliance business plan does not contain any information about workforce and whether there is a risk involved about being able to provide the right numbers and quality of staff within the service, as there is already a shortage of staff within mental health services in SLaM. Will any information about workforce planning come into the public domain?</p> <p>.</p> | <p>AM explained that the two people best placed to respond to this Harpal Harrar and Moira McGrath were not at the forum.</p> <p>As a general point we know that workforce is a real problem across the all health and care and particularly in certain specialities and disciplines. There are general workforce problems nationally and more locally particularly in relation to difficulties for people to live and therefore work locally due to the high cost of housing.</p> <p>The Alliance is bringing together a range of organisations. It is hoped in taking an alliance approach to delivering services will we hope in part</p>  | None |

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|   |  |   | <p>protect against some of those recognised existing risks that we have across workforce. We are bringing together organisations, and have a more diverse workforce that will be coming from different approaches (Certitude and Thamesreach).</p> <p>There is no reason why this information will not be placed in the public domain. If there is more detail available I would be happy to update on this/ share this</p>  |   |
| 4 | Les Eliot<br>Lambeth<br>resident/Vassall<br>Road Patient<br>Participation<br>Group (PPG) | <p><u>Financial position of Allied Health as a provider of care: impact on people using care services across Lambeth:</u><br/>Allied Health, a main supplier of care in Lambeth has written to their users to advise that they are trying to conclude a company voluntary arrangement to raise more money. I was asked to contact their local branch however to date have had so reply.</p> <p>Les Elliot said that he would like to work with LBL/CCG on this issue.</p> | <p>This is a huge concern at a national level. The CCG does not hold contracts with Allied; however the Council has significant contracts with them. We spoke about this at a meeting last week. RH as Council representative was invited to respond.</p> <p>RH said that the Council are aware we have people that may be affected and Lambeth Council is working to try to understand what the potential risk and impact locally may be. A Council team is working with the NHS on this to manage the situation locally and ensure safety of the people affected. The matter is also being reported at the Council/CCG management team.</p> <p>RH would be happy to provide the link for Les and to follow up outside meeting.</p> | Yes - RH to take specific details and follow up outside the meeting |
| 5 | Fraser Syme<br>Streatham<br>Patient<br>Network   | <p><u>Implications of the General Data Protection Regulations that come into force in May, particularly for Patient Participation Groups and use of people's information:</u><br/>The General Data Protection Regulations legislation comes into effect on 25<sup>th</sup> May 2018 and given there are implications of this new legislation, will support be given to groups such as Patient Participation Groups (PPG)?</p>   | UD confirmed that the CCG are clear on the regulations and she chairs the CCG's Information Governance Steering Group, which has in place detailed plans for compliance with the new regulations. We are discussing with Sandra Jones of the PPG Network and others about training for PPG Chairs over the coming weeks. The training is not GDPR specifically but for PPG Chairs who use email  | None  |

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|   |  |   | accounts and the implications of the new legislation.  |   |
| 6 | Jenni Rodgers and David Del Nero<br>Streatham PPG                            | <p><u>Additional use of unoccupied space at Baldry Gardens GP Practice:</u></p> <p>Each month the Streatham Patient Network runs health education mornings to raise patients' awareness of key health issues and promote prevention and self-care. This is very successful; however we are limited as to how many sessions we can hold under current arrangements. We are looking to extend this to an afternoon session; however we are having difficulty doing this. The issue is that we need a temporary tenancy to enable us to open the practice in the afternoons. We have also been told by the Practice Manager that the matter has been raised with the CCG by the practice and that they are waiting to hear back from them.</p> | <p>The CCG recognises that these meetings are hugely successful and there has been positive feedback about this work.</p> <p>CC had been speaking to the landlord and confirmed that the CCG would be in a position to issue a short term licence shortly. She did not think there would be an issue for the opening of the afternoon sessions. However, the CCG would need to look at ensuring that if there is no other presence on site what the arrangements for lock up would be.</p> <p>DDN also raised an issue around a lack of Wi-Fi at Baldry Gardens. UD said the CCG is looking into this matter. UD commended the work being done and DD thanked the CCG for their support to date.</p> | Yes – CC to arrange for a temporary licence to be issued          |
| 7 | Nicola Kingston,<br>Patient Participation Group Network (PPGN) (not present) | <p><u>Eligibility for treatment involving a Windrush resident seeking access to cancer treatment:</u></p> <p>On behalf of Nicola Kingston, PPGN Chair, CP highlighted an issue involving a Windrush resident, who she understands is a Lambeth resident, whose access to treatment for prostate cancer was delayed due to problems around establishing whether he was eligible for treatment.</p>   | <p>AM explained that he had no additional information on the matter other than access to the information shared in the media.</p> <p>AM said his understanding is that his treatment is under the Royal Marsden and the matter can be taken up with the Trust. However, AM said he believes that the case is being taken up by Chukka Umunna, MP for Streatham. To try and give a wider answer at present is not possible and it is recognised that this may be frustrating.</p> <p>AM to have a conversation with the Trust about this issue.</p>   | Yes<br>AM to have a conversation with the Trust about this issue. |