

NHS Lambeth CCG Public forum 1 November 2017 Notes

	Source	Question	Summary response	Action
1	Jenni Rodgers Patient Participation Group Network (PPGN)	NHS Identification cards pilot scheme for Lambeth PPG members: This valuable year-long pilot has now come to an end. Can the CCG consider renewing/extending the scheme?	The CCG has reviewed the scheme and plans to renew the scheme for a further year. There has been some learning and some minor changes will be made, e.g. to the title on the badge.	Arrange to reissue badges to existing badge-holders
1(a)	Jenni Rodgers Patient Participation Group Network (PPGN)	Communicating by SMS for health updates: JR shared work being undertaken by PPGN and practices to communicate with patients using SMS text messages to inform them about health talks. JR highlighted the positive impact of this and noted some limitations for those who do not have the technological savvy to make use of this additional means of communication.	There is an APP that smart phone users can use which enables richer messaging. For people who do not have smart phones the APP can also send out a message with alternative instructions to access more detailed information. AM invited attendees to share details of any other solutions that they are aware of.	No
2	Wendy Horler, Southwark Resident	Funding cuts and impact on future health visiting services: a report (Evelina Hospital) highlights an anticipated 10% reduction in Health Visiting during 2018/19. Is this due to poor economics?	<p>Health visiting falls under the remit of the London Borough of Lambeth, rather than the CCG, however Lambeth Council has taken a significant reduction in relation to funding and as a result the Council are looking to restructure their services including health visiting, which is regrettable since it has taken four years to get health visiting staffing to its present level.</p> <p>The CCG is working with the Council to look at working in different ways to mitigate the impact of funding cuts to these services.</p> <p>This also presents a number of challenges arising from the Public Health grant cuts, which will continue year on year until 2020. We need to find a way to manage</p>	No

		<p>Gay Lee, Keep Our NHS Public, suggested that a discussion with the UNITE trade union about the difficulties around health visiting may be beneficial.</p>	<p>that reduction in funding by rethinking how we work. At the heart of this will be how to ensure that the most vulnerable are not overlooked.</p> <p>AM thanked GL and noted that such a conversation would need to be taken forward in context of the relationship between workers and the union.</p>	
3	Gay Lee, Keep Our NHS Public	<p>Progress of the Alliance locally in light of what is happening in Manchester. That is, a halt to plans to handover a multispecialty community provider contract to a consortium of existing providers through the vehicle of new Accountable Care Organisations due to potential additional VAT charges: is this likely to be an issue in Lambeth?</p>	<p>We are aware of developments in Manchester and elsewhere and there are number of issues around liabilities. NHS England is looking at these issues, including corporation tax and alliance set-up.</p> <p>We do not foresee these problems occurring in Lambeth; and generally this is where a single organisation is taking on work usually done by number of organisations.</p>	No
4	Gay Lee, Keep Our NHS Public	<p>South East London Integrated Urgent Care service procurement: thank you to the SEL IUC team for producing a thorough report.</p> <p>It is not clear how the general public will be kept informed or how the service will be audited? Also, the initial call handling diagrams included in the report do not correspond with the text – a concern.</p> <p>When someone dials 111 will they still be referred to someone and would this person be a health care professional?</p> <p>The dilution of GP/General Practice - was this done in an effort to attempt to cut costs because the contract was too expensive? This has not been made clear.</p>	<p>HH explained the proposed process for handling calls is to put the call straight through to the relevant specialist, such as pharmacy or mental health, who can handle that call and patient straight away. The idea is not to have to send a patient to another service.</p> <p>This model, by not having to automatically refer/signpost the patient to other services, will be more efficient (and therefore less costly) and will provide a speedier and more direct service for the caller.</p> <p>Previously, it was felt that within the budget there was insufficient capacity to be able to deliver effectively, however now with the multi-disciplinary team it is considered that the service can be delivered within budget.</p>	CF to provide contact details for the emergency and urgent care workstream.

		Do we have a Lambeth representative on the emergency and urgent care workstream?	<p>We will communicate key messages over the coming months.</p> <p>There was a recruitment and retention issue to find sufficient numbers of GPs to operate this service and it was considered that multi disciplines would work just as well.</p> <p>AP said it is about trying to adapt a nationally driven structure to what will work for Lambeth. The broader finance issue is not unique to this particular service area. Work is still being carried out around finance such as reviewing the business case to ensure that it is affordable. Chair's action will be required to ensure work continues to be progressed.</p> <p>CF explained that anyone who is interested can stay up to date with developments by signing up to the OHSEL newsletter via the OHSEL website (http://www.ourhealthiersel.nhs.uk) The workstream has patient participants from SEL but these do not do so as representatives. Rather, they are individuals whose role is to give a patient perspective. If anyone would like to get involved in the urgent and emergency care workstream, they can express an interest via the OHSEL and the CCG websites. We are not able to share contact details of individual patient members.</p> <p>The CCG public forum also provides another route to be kept up to date on developments.</p>	
5	Cheryl Alfred PPG Network	Sustainability and Transformation Plan engagement and detailed output/response: over the summer at an STP event a number of questions were raised for which we were told that we would receive a response. Can you	AM promised to look into the matter. However, it was later confirmed that the details of outputs from the summer engagement event are available on the South East London (STP) website.	No

		please advise whether you are aware of the timetable for delivery of this work?		
6(a)	Sarah Corlett, Healthwatch Lambeth	Integrated Urgent Care system work and approach to engagement: in terms of an equality analysis SC noted the report in GB papers referred to gaps for certain groups such as gypsy travellers, asylum seekers, and refugees. Can you please advise what the CCG plans are for ensuring good outcomes for groups? Equally, what engagement activity is planned for these groups?	<p>CF said that she had been involved in South East London-wide work in relation to these matters. Equality analysis and engagement planning had identified the need to ensure that there was engagement with the groups mentioned, and individual CCG areas undertook focused engagement with one or more of these groups to ensure that gaps were addressed. In Lambeth, an engagement forum was held with Portuguese speakers, for example, where around 30 people were able to ask questions on the proposed model and feed in their experience of the urgent care system currently. A number of similarities between the Portuguese Urgent Care System and the UK system were identified, which will help in future communications activity.</p> <p>AP said that the SEL Integrated Urgent Care service (IUC) team were joining the Governing Body meeting later that afternoon and would be available to answer some of those questions.</p> <p>HH said that going forward that demographic data would be collected once the new system is in place to ensure we have an understanding of the needs of these cohorts of people. Further engagement was not planned at this stage.</p>	No
6 (b)	Nicola Kingston, Lambeth Patient Participation	Lambeth Together work and approach to engagement: at a North Local Care Network Joint Board and Forum meeting on 31 st October 2017, we had opportunity to hear about some of the excellent activities/work taking place in the north of the borough. Also Raj Mitra was talking	AM had been unable to attend the meeting and would be interested in receiving feedback. Work is underway on citizen engagement and Raj Mitra, will need to be advised of the actions going forward.	No

	<p>Group Network (PPGN)</p>	<p>about future of commissioning and if we see a future. Can we look at how to ensure that equalities are still being picked up?</p> <p>NK also asked how the CCG sees the future roles of citizens and the voluntary sector. At a recent Strategic Partnership Meeting the discussion was about partnership working and she would like the CCG to get involved.</p> <p>NK also asked to promote a meeting, the Lambeth Together Engagement Event by Lambeth Patient Participation Group Network happening next week Thursday, 9 November 2017 at 336 Brixton Road, London SW9 7AA, 6pm around Lambeth Together and the role of voluntary sector to help to shape and co-produce this project.</p>	<p>The meeting last night will have some views and recommendations on how to get there.</p> <p>As commissioners the CCG does a lot of work that is not commissioning and our core activities need to evolve as this develops in Lambeth Together.</p> <p>UD related that the CCG planned to review its engagement strategy and would use the CCG's Engagement, Equalities and Communications Committee meeting of 29 November as an opportunity to begin the debate. The PPGN were invited to participate in this. Raj Mitra would be leading this work.</p> <p>AM said that the two main activities occupying CCG time presently were making the money right - and as part of this the CCG is declaring itself to be in financial recovery - And the Lambeth Together work. In his view if we continue to do things the same way we will have the same outcomes, and therefore we need to be transformational going forward and bring about change now that will produce effective delivery for the future.</p>	
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