



THE SUTTON CLINICAL COMMISSIONING GROUP
PATIENT REFERENCE GROUP

Minutes of the meeting

Wednesday 25th March 2015

MR1 Sutton Civic Offices 4.45pm - 6.45pm

PRG Members

David Williams - Chair of PRG

Beddington Medical Centre - Robert Briant

Benhill and Belmont - Jack Hamilton

Bishopsford Road Practice - Sheila Andrews

Carshalton Fields Surgery - Aboo Koheeeallee

Carshalton Fields Surgery - Karen Page

Cheam Family Practice - Michael Pitcher (Vice Chair)

Chesser Surgery - Ken Fish

Dr Grice and Partners - Paul Alford

Faccini House - Sara Cornwall

Faccini House - Ruhee Farooq

Green Wrythe Surgery - Janet King

GP Centre Cheam - Marion Taylor

Grove Road Practice - Gillian Bennett

Grove Road Practice - Roger Quemby + Support for RQ (LBS) - Daniel Turner

Hackbridge Medical Centre - Daphne Todd

Maldon Road Surgery - Janet Emberson

Maldon Road Surgery - Heather Howell

Robin Hood Lane (Dr Seyan) - Susan Healy

Robin Hood Lane (Dr Seyan) - John Templeman

Shotfield Medical Practice - Ken Collins

Wallington Medical Centre Jyoti Das

Wandle Valley Health Centre - Emmanuel Dada

Wrythe Green Surgery -Meg Jefferies

Wrythe Green Surgery - Daphne Norman

Well Court Surgery - Terry Reddin

Apologies

Cheam Family Practice -Trevor Eames

Manor Practice- Hilary Smith (Vice Chair)

Shotfield Medical Practice Paul Brudenell

In attendance

Dr Brendan Hudson - Chair Sutton CCG

Sue Roostan - Director Commissioning and Planning SCCG

Adrian Davey -Joint Commissioning Manager - Mental Health,SCCG/LBS

Pam Howe - Healthwatch Sutton

Sally Brierley - Board Lay Member (PPI and Quality), Sutton CCG

1. Welcome, Introductions and Apologies

The Chair welcomed everyone and asked those present to introduce themselves.

Apologies were noted

2. Declarations of Conflict of Interest

None declared

Notes of the last meeting (19.1.15) & Matters Arising

The notes of the previous meeting were accepted with no amendments

The Chair identified that minutes of PRG meetings are not verbatim and designed to provide a record of key matters in a format that representatives can take back to their patient groups.

3. Speaker Adrian Davey

Outcome of the Mental Health Consultation

Adrian provided the background to the consultation looking at how best to deliver mental health in patient services across SW London: - A consultation (led by Kingston Clinical Commissioning Group working with Merton, Sutton, Richmond and Wandsworth CCGs and NHS England, alongside South West London & St George's Mental Health NHS Trust.) proposed a number of options.

Following consultation the preferred option was to provide two centres of excellence for inpatient mental health services at Springfield University Hospital and at Tolworth Hospital. Each site would provide a range of services - this will be a significant transformation. LBS Overview and Scrutiny Committee are looking to agree this preferred option.

Adrian identified that changes to the inpatient services for Sutton residents will not be unduly affected as services provided at Springfield hospital (Ward 3) were established some time ago. Adult deaf services will remain on the Springfield site due to the deaf community that has built up in this area around services. Work will be needed on children's inpatient services as these will be moved to Tolworth along with in patient services for older people (not used much by Sutton)

(For further details <http://www.suttonccg.nhs.uk/Get-Involved/Consultations/Pages/Inpatient-mental-health-services-consultation.aspx>)

Members raised a number of concerns and reservations about the proposed reduction in mental health inpatient beds and the drivers for the decision to make reductions. Adrian responded to explain that, as community mental health services expand, the requirement for inpatient beds is anticipated to fall. Plans will be put in place (and regularly reviewed) to develop an infrastructure of community support. The CCG will explore how best to allocate resources to support a wider infrastructure of mental health services. One of these could be Street Triage where mental health professionals accompany the police.

In response to questions Adrian explained that demand for services is indicated by the Joint Strategic Needs Assessment (JSNA) and any sale of buildings will be reinvested in regeneration.

The new Primary Care model

Adrian reported that Sutton CCG is in the early stages of procuring a new mental health service through Primary Care. This is part of a national initiative and a number of services are being considered for commissioning locally. These would include;

- a single point of referral
- enhanced Improving Access to Psychological Therapies (IAPT) - to include psychotherapy
- primary care support for people to live well with a long term mental health conditions
- enhancing wellbeing through social prescribing

The new model, currently without a name, will be launched on July 1st 2015

(for more information - <http://www.suttonccg.nhs.uk/News-Publications>)

SW London and St Georges Mental Health NHS Trust application for Foundation Trust status

Adrian reported that the Trust have started the process of applying for approval to become a Foundation Trust. Last year this application was not supported by SCCG but, having worked with the Trust, their strategic alignment is now closer and as such they are now able to give support.

The Dementia Pathway

Adrian explained the background of the Central government requirement for two-thirds of the estimated number of people with dementia to receive a diagnosis and appropriate post-diagnosis support by March 2015. Sutton's diagnosis rate has improved to 59%.

The Pathway encompasses a range of services designed to support people living with dementia. Life after diagnosis will be a part of redefining the overall provision for older people. SCCG will work closely with the Alzheimer's Society to ensure that there is responsive care at the time it is needed.

The ultimate aim of the pathway will be to create a Dementia Friendly Community in Sutton. As part of achieving this a Dementia Action Alliance has been formed where groups have joined together to look at addressing issues with a 'whole systems approach'.

(For more information - <http://www.suttonccg.nhs.uk>)

Dementia Awareness sessions

As part of the drive, to make Sutton a 'Dementia Friendly' community, PRG members were offered free places on Dementia Awareness sessions, currently being delivered across Sutton by Sutton's Alzheimer's Society and for the PRG would be coordinated through Healthwatch Sutton. Pam Howe provided details of the dates (13/4 & 22/4) and how to book a place. Members were advised that places would mainly be for PRG members and if there were sufficient interest,

further sessions could be run for members of PPGs. Members were encouraged to attend and feedback from those who have already attended was very positive.

ACTION PRG members to book places if wished

PRG members to ascertain if further sessions, for PPG members, would be of interest

4. NHS111

David Williams announced that 5 members of the PRG will visit the Call Centre to look at the patient experience of using the service. Representatives will feedback on the visit at a future PRG meeting.

Sue Roostan explained that procurement, across SW London, for the NHS 111 service is underway and expected to be finalised for Feb 2016. Procurement of the Out of Hours service will run separately as the current provider is contracted until 2017.

ACTION PRG members visiting the Call Centre to coordinate feedback for the May meeting

5. Co commissioning Primary Care

Dr Brendan Hudson provided a briefing handout and explained that a national initiative, to transform primary care, meant CCGs were offered the opportunity to co commission primary care services with NHS England. It has been approved that SCCG will in future co commission but for now only the co commissioning of GP services is included.

Dr Hudson identified that whilst there will be no new investment and the changes won't be noticeable it will mean that CCGs will have a more powerful voice, using their local knowledge and patient feedback to changes services to meet local needs.

The introduction of Care Quality Commission (CQC) inspections of GP practices means that there is now more information available and that SCCG will be able to better support practices to meet standards/ best practice.

Sutton's 27 GP practices will now form a federation, with an independent board, to work across Sutton. Training on managing conflict of interest will be provided and the SCCG will look at how to manage a decision making process that ensures the public have confidence in the decision making process.

SCCG will continue to value the input from the PRG and in due course patient feedback on primary care services can be included in the remit of the group.

Ken Fish expressed concerns about the additional workload now placed on GPs given the requirement for them to identify and support, more and more, patients with mental health issues and dementia and carers. Dr Hudson responded to say GPs have always been busy and Sue Roostan referred to the move to 'parity of esteem' for mental health conditions and that SCCG will expect the providers, which they commission, to meet targets.

Janet King spoke of the recent programme of CQC inspections of some GP practices in Sutton and that reports, expected soon, have been delayed as Inspectors are 6 - 8 weeks behind with their reporting.

6. SCCG Feedback on PRG input into commissioning intentions

Sue Roostan updated that the CCG have reviewed and are redrafting the commissioning intentions which were outlined in their 'Plan on a Page' document which covered 2015 - 2016.

The feedback from the PRG workshop, on patient input into commissioning decisions, was taken into account as part the review. The plan, which is being updated to reflect work already done in 2014 -2015, also takes account of national guidance. Nationally there is a requirement to focus on partnership and planning and co creating new models of care.

Sue announced that SCCG was recently awarded Vanguard status, by NHS England. (One of only 2 CCGs in London and only 29 nationally) for the partnership work it has undertaken to enhance care for people in nursing homes.

(For more information <http://www.suttonccg.nhs.uk/vanguard/Pages/default.aspx>)

Sue informed the group that in the past SCCG was underfunded and as a result there is now additional money (approx£4 million) available for investing in additional services and that it is anticipated that, using currently identified priorities, some transformational changes could be made. An 'Investment appraisal' workshop was held, with key stakeholders, to explore a range of business cases. Feedback from the PRG workshops on commissioning intentions was used in the business planning and at the workshop.

Sue identified that there are a lot of factors for the SCCG to consider in its planning including, neighboring CCGs, the Better Care Fund and the Care Act. Also that Epsom and St Helier Trust are also embarking on a period of change and are exploring the configuration of services across its estate to ensure best use of resources. The introduction of primary care co commissioning will allow for whole pathways to be worked on allow care to move out of primary care and back in.

Sue responded to questions indicating the difficulties faced in balancing the budget to ensure the SCCG meets the requirement to have a 1% surplus, that health inequalities across Sutton will be considered in the allocating of the additional money and that the CCG will explore the viability of 7 day services to optimize the use of capital equipment.

Sue agreed to return to the PRG at a future date to share outcomes of the planning decisions.

Michael Pitcher informed the group that he had attended the Investment Planning workshop and had been pleased to see that the PRG work had been taken forward and included in the planning priorities.

7. Healthwatch Sutton (HWS) and the PRG

Sally Brearley updated the group on the responses that she had received to her request for feedback on the issue of a potential conflict of interest arising from the Chair of the PRG also being the Chair of HWS. Half of those who had contacted her had been fine about the

arrangement or saw that there were some advantages. The other half expressed concerns about a potential conflict or that it means only 1 voice for both groups.

Some points were discussed and Sally suggested that whilst the concerns may only be from a minority they do need to be addressed and that a process for managing a conflict of interest is the best way forward. For this reason she proposed that the Terms of Reference (ToR) for the group be reviewed and as part of this there be a vote on a proposed amendment that 1 person could not hold both Chairing roles.

In response to comments Sally stressed this was to give the PRG a chance to debate an issue raised by several members, not the CCG seeking to impose a view of its own and that a vote on the proposed amendment would allow for an open discussion and a democratic process to take the matter forward. Sally requested that PRG representatives go back to their PPGs to consider this and any other amendments, to the ToR that they may wish to put forward.

In order to allow time for the group to consider any changes to the TOR, before the election of officers, Sally proposed that the election be deferred until October. This would also bring into line the election of officers, 1 Chair and 1 Vice Chair being due in June and 1 Vice Chair in October.

It was agreed that the PRG

- should have a conflict of interest policy/register of interests
- that the election of PRG officers be deferred until October
- that any proposed amendments to the TOR be submitted and voted on
- anyone with any further thoughts or comments to contact Sally
- Agenda planning meeting will look at how to fit the proposals into the meeting schedule and circulate a timetable and consider comments on any conflict of interest documents.

ACTION Members to consult their PPG to identify their views on the proposal that the PRG Terms of Reference be amended to state that the Chair of the PRG may not be the Chair of Healthwatch Sutton

ACTION members to consult on any other amendments, to the ToR that they may wish to propose and forward to Pam Howe

Dr Hudson announced that SCCG were pleased to confirm that that they have commissioned HWS to continue to provide the support to the PRG and PPGs. Dr Hudson expressed the view that the maturing of the PRG and that it is now less focused on governance issues, is in part as a result of the support from HWS.

Dr Hudson thanked HWS for the work they have done with PPGs, including his own practice group. Members also acknowledged the support provided by HWS.

8. Any other business

Bob Bryant spoke of the cost to hospitals of using agency staff and David Williams responded to reassure, that from his attendance at hospital board meetings, this issue is very much on the Trusts radar.

Date of Next Meeting

Thursday 14th May 2015

MR1 Sutton Civic Offices 4.45pm - 6.45pm