

Patient Reference Group Meeting
Thursday 19th October 17
Nutfield Lodge, Redhill

Minutes

1. Welcome and introduction to the meeting – Dr Elango Vijaykumar, Clinical Chair ESCCG

Dr Vijaykumar welcomed everyone to the meeting and informed the group that sadly Nici Jupp has had to step down from her role on the Governing Body as Lay Member for Patient and Public Involvement for personal reasons.

The CCG will ensure that this important role is continued by one of the other Lay Members on the Governing Body.

2. Declarations of Interests – Dr Elango Vijaykumar, Clinical Chair ESCCG

Dr Elango Vijaykumar declared his role as a GP at Birchwood Medical Practice in Horley.

Don Illman declared his role as Chairman of the 'Independent Mental Health Network' in Surrey.

3. CCG Update – Dr Elango Vijaykumar, Clinical Chair ESCCG

Leadership

In June this year the Interim Chief Officer, Ian Ayres, who we shared with West Kent CCG, moved back to work with West Kent CCG full time.

Three CCG's in Surrey now have a joint management structure and Matthew Tait has been appointed as joint Chief Officer for the three CCG's. As a result of this, East Surrey has been fortunate enough to appoint Dominic Wright, former Chief Officer at Guildford & Waverley CCG for the foreseeable future. Together with Surrey County Council the 3 CCGs form "Surrey Heartlands" - a **partnership** of local health and care organisations.

The CCG's Chief Finance Officer, Ray Davey, is an interim and his contract with the CCG will be ending in the next month. Pippa Ross-Smith will be taking over this role at the CCG.

East Surrey CCG has always scored very highly in terms of quality and will continue to focus on producing good quality outcomes for our patients.

Finance

Finance for East Surrey has always been a struggle and the CCG remains in financial deficit. Because of this Financial Deficit the CCG remains in Special Measures by NHS England. A Financial Plan of a £17.5m deficit has been agreed with NHSE for 2017/18.

There is still significant pressure in the Acute which is the main cost driver for the CCG. The good news however is that the underlying run rate has improved from £19.4m (16/17) to £14.1m (17/18).



Sustainable Transformation Partnership

There are 211 CCG's in the Country and these have been grouped together in localities to form 44 Sustainable Transformation Partnerships (STP). The idea behind this formation is that by economies of scale, much more can be achieved by working together.

50% of East Surrey Hospital patients are from the East Surrey area and 50% are from the Sussex area. Because of this split, East Surrey CCG was pushed more towards joining Sussex STP. This decision was made a few years ago as it was believed at the time to be the right thing for our patients.

Looking at Surrey Heartlands (where health and social care have been brought together in order to make better and more sensible plans to keep our services improving and working well into the future) there are now also apparent benefits to belonging to the Surrey Heartlands STP .

East Surrey CCG has had some tough conversations as to whether we would be best placed in Surrey Heartlands STP and the Governing Body has discussed this in length, with the involvement of NHS England. The feeling now is that Surrey Heartlands would be a better journey for our population and the Governing Body has made this recommendation to the 18 Practices within East Surrey. If this move to Surrey Heartlands STP takes place, it may mean that East Surrey CCG will have to dissolve and join with Surrey Downs CCG. NHS England is working with the CCGs to see how they can make this happen. We currently do not know the outcome of this but are working with all parties involved to determine the best outcome for the CCG. It is unclear what will happen to ESCCG's deficit if the merge takes place.

Dr Elango Vijaykumar stressed that this change would not affect services in East Surrey and with the devolution agenda, this may even improve the way services are delivered.

Good news stories

Stroke in-patient rehabilitation - Over the past year so much work has been put into re-developing the Stroke Pathway and as a result of this work the first few Surrey patients have been referred to Queen Elizabeth Foundation for in-patient rehabilitation. Before, Surrey patients would go to Crawley for in-patient rehabilitation which meant they weren't receiving the Social Care required. In QEF, the patient will get the Social Care that they need, as well as fantastic in-patient rehabilitation. This service is for those patients who have had a dense Stroke.

Early Supported Discharge - Improvements have been made to the way we deliver some of our community stroke rehabilitation services. The CCGs are currently working with local NHS community providers to develop the early supported discharge service and transition to a new model of care which will begin in November 2017. Early supported discharge is an intervention for adults after a stroke that allows their care to be transferred from an inpatient environment to a community setting. It enables people to continue their rehabilitation therapy in their normal place of residence with the same intensity and expertise that they would receive in hospital.

Motor Neurone Disease Nurse Specialist – A nurse specialist for Motor Neurone Disease and Long Term Neurological Condition patients has been appointed by FCHC to work across East Surrey.

Well-being Advisors – Well-being Advisors have now been rolled out to all Practices in East Surrey. Your GP can refer you to a well-being advisor to help and support you when your needs are not purely health related. The initial consultation is 45 minutes which allows plenty of time to talk through a range of non- medical



issues, the need for emotional or practical help and to refer you to services beyond that which the NHS can offer.

First Community Health and Care – FCHC is the Community Provider for East Surrey and they have recently been rated as “Outstanding” by CQC which is great news for East Surrey patients.

ESCCG Commissioned services - Independent clinical panels has rated ESCCG’s commissioned services;
Cancer “Outstanding”
Mental Health “Good”
Dementia “Good”

ESCCG has been certified as one of the four ‘most improved’ CCGs by the All-Party Parliamentary Group on Cancer in recognition of the progress we have made in one year survival rates

4. Falls Prevention – Jodie Bryant, Physiotherapist and Clinical Lead for Lewisham’s Falls Prevention Service

Jodie was invited to talk to the group about a new Falls Prevention Service which has been set up in Lewisham by the Chartered Society of Physiotherapy, which will start in January 2018.

A fall is when a person comes to rest on the ground. It is a controllable condition but the biggest challenge is to get people to invest in services to prevent this from happening. Falls are not a normal part of ageing and it doesn’t have to happen. Falls are most commonly experienced in the home and are responsible for a huge proportion of ambulance activity. The healthcare cost associated with fragility fractures is estimated at £2 billion a year.

The Kings Fund ran a report in 2015 in Torbay to look at the average cost of hospital, community and social care for a patient twelve months before they had a fall and 12 months after the fall and the results showed that the cost for the patient was four times greater after a patient had had a fall.

Once a person has a fall they often gradually lose confidence and become terrified of falling over again. This as a result means they go out less and therefore become weaker and more likely to fall. This then leads to the person becoming socially isolated.

The aim of the new scheme is to identify frail people as early as possible so interventions can be put in place to prevent fragility fractures from happening.

By 2020 it is expected that hip fracture incidences in the UK will rise to 101,000 a year.

Medication is a huge factor in causing falls and Jodie stressed the importance of having regular medication reviews particularly if you are taking 4 or more medications.

The Chartered Society of Physiotherapy has done a lot of work to look at what can be done to save money and improve quality of life for patients. A Falls Prevention Economic Model Tool was produced and showed that physiotherapy is a cost-effective way of preventing falls and could probably prevent around 160,000 serious falls and a spend of £252m across the UK each year. For every £1 spent on physiotherapy, around £4 is returned in prevented NHS spending.



Once a patient is identified as being at risk of falling they are referred to a specialist service where a multi-factorial risk assessment is carried out. Following this, tailored intervention is put in place based on the identified risk factors.

Evidence shows that exercise can decrease the risk of falling by 31% and this exercise needs to include a balance challenge and progressive strengthening. Jodie circulated the 'Get Up and Go' leaflet which is a falls prevention 'bible' and contains safe exercises to keep people as strong as possible. If you would like further copies of these leaflets to share, please contact Carol Rowley (carol.rowley4@nhs.net).

Further exercises and videos can be found on their website via the following link <http://www.csp.org.uk/your-health/exercise-advice-all-ages-fitness>

As part of the new service, data will be sought as to how many people have had to press their call buzzer due to falling. These people will then be contacted individually to discuss interventions that would prevent it from happening again.

Care Homes are also being targeted to help identify those who are frail and at risk of falling.

Exercise classes are run away from the Hospital setting to try and maintain the social aspect.

Q – I attend falls classes at YMCA and the exercises have really helped me and given me a new lease of life. Are the 'Get Up and Go' leaflets being distributed to GP Practices and Care Homes?

A – Jodie confirmed that she can organise for these leaflets to be sent out to GP Practices and Care Homes via Carol.

Q – Is there money available to help people who are risk of falling to attend exercise classes?

A – There is currently a small charge to attend exercise classes but it is recognised that this needs to be worked on further to enable as many people as possible to be able to access these classes.

Q – Care Homes are closing at an alarming rate; what is being done to protect Care Home patients from falling?

A – Naturally those in a care home are at a greater risk of falling. Greater influence and interventions can be put in place in those care homes which are run by the Council. Private care homes are tricky but there are still quality indicators in place that they need to abide by. Care Home Community Matrons go into all Care Homes and regularly talk to and review the patients. Encouragement is continually given to improve the systems Care Homes have in place to prevent falls from happening.

A member of the PRG suggested that perhaps Well-Being Advisors in the GP Practices could consult with patients to find out what they would like to get from an exercise class.

It was also questioned whether the STP should be doing more on falls prevention?



5. Primary Care Network update – Lyndsey Reeves, Primary Care Development Manager ESCCG

The practices within East Surrey have been identified as four networks based on geographical location and population size. The intention being that this offers the opportunity to work efficiently together through the sharing of resources and information and so that the larger practices can help the smaller practices to prevent there being a postcode lottery.

Each of the Networks are leading on one of the following Prototypes:

- Diabetes
- Falls
- Social Isolation
- End of Life

Each of the Prototypes are working on small interventions which can be put in place to improve services for the above areas which can then be scaled up to be rolled out across the four Networks.

Primary Care Network Managers are now in post and will drive these projects forward and bring them together across all of the Networks to ensure that they are delivered.

Improved Access

National Guidance has been issued describing how the CCG must improve access to primary care by commissioning additional capacity from April 2018 and additional funding has been given for this. The aim is to provide access to Primary Care services between 8am-8pm seven days a week. To do this the numbers of planned and unplanned appointments available are to be increased.

This additional service may not be provided by your own GP Practice but at another Practice in the East Surrey area.

The following six factors will be taken into account when determining what this service will look like for our local area;

1. Patient access and preference
2. Achievability – workforce, estate
3. Resilience – How to staff these services if people are off sick
4. Affordability
5. Commissioning fit/risk of over-capacity
6. Engagement and buy-in of primary care and other providers



The guidance provided is very clear as to how the money is to be spent to improve access to GP services to prevent patients going to A+E unnecessarily.

It is still currently being determined how this money will be used to provide the services that patients want.

The hope is that by having appointments available in the evenings and at weekends, many urgent cases will be seen then which in turn will open up the day-time appointments for those who have a Long Term Condition and need that continuity of care by seeing their own GP in their own Practice.

Q – Will Practices end up with a back-log which will result in a decrease in the quality of service being provided?

A – The new services will not affect the services that are already in place. The guidance is very clear that we can't use services already in place to provide the improved access. This will be in addition to the services already available as the aim is to build on services rather than cut them down.

A lot of work is being done currently around IT. Most Practices now use the same IT system and systems are in place for other Practices to see your notes and add to these. This is all part of the scoping work and if you want to access the Improved Access appointments you will be asked whether you are happy for your notes to be shared with the Practice providing this service.

One of the PRG members commented that they have found Paramedics to be really helpful and questioned whether it would help to have more working in the Practices. Some of the Practices do now have Paramedic Practitioners and this way of working has come from the GP Forward View which is a national document that encourages healthcare professionals to work differently and be used in different ways depending on the service they are trying to deliver.

The Improved Access Services will be in place from April 2018 and recurrent funding will be available for the following year if the standards are met.

A survey has been produced to find out from the general public;

- How likely they are to use appointments in the evenings and at weekends.
- The kind of services they might want to use in the evenings and at weekends.
- Where they would be willing to travel to access appointments in the evenings and at weekends

The results will help to determine what the Improved Access service will look like in East Surrey.

Q – How have you ensured that the survey reaches all levels of society?

A – The survey has been distributed in the following ways;

- Electronically to Patient Reference Group Members, the Practices and to Voluntary Sector Organisations
- CCG Website
- CCG Facebook Page
- Net Mums online Portal
- Paper copies available in every East Surrey GP Practice



- Healthwatch
- Hard copies available at Caterham Dene at the weekend
- East Surrey Disability Alliance Network

This is the first wave of public engagement and once the results have been reviewed further work will be done to target areas of the population that haven't been sufficiently represented. A more pro-active approach will be taken to go out to places such as Leisure Centres, gyms, mums groups etc.

Q – How will you ensure that these services are staffed?

A – We are fortunate that we have the funds available to source the staff for these services.

6. Around the PPG's – Carol Rowley, Patient Experience Lead ESCCG

This part of the meeting was to hear from PPG members about what has happened in their Practice PPG since the last meeting.

Townhill

- The Senior Partner, Dr Clarke has retired after working 32 years at the Practice
- There is a new Community Partnership Clinic which runs every Friday to sign-post young parents so that they feel cared for and supported.
- The Practice has had a good uptake at flu clinics

Oxted Health Centre

- Child Immunisation survey has been produced by the PPG and put up on survey monkey. Feedback from this will be given to Carol. Through the health visitors network one to ones will be carried out to determine why there is a lack of uptake in 2 year olds.
- The PPG is arranging a health talk for patients on the Liver
- Flu Clinic is in full swing and has had a good uptake
- The Practice now has its own twitter account

Birchwood Medical Practice

- The PPG has recruited some new members
- Currently organising a new health education talk
- The PPG is carrying out a campaign on the car park opposite the Practice. Surrey County Council want to claim 22 of the available spaces which then only leaves 12 spaces for members of the public to use.
- The list for the Practice is now open again due to receiving additional funds from NHS England to put in place additional Clinical Care.

Greystone House

- The last flu clinic was extremely successful with 523 patients being seen in 3 hours



Caterham Valley

- The last PPG meeting was held on 22nd June. The group has always had a problem with getting engagement
- The Practice is considering signing up to the ABC Federation Programme to support the group to become health champions.
- The Practice is currently piloting e-consult, which is an online consultation and a GP gets back to you fairly quickly after you have filled in the relevant information online. There have been a few administration issues but overall it has lowered the number of people turning up for the walk-in clinic.
- 50% of those eligible have had their flu jab
- A good number of patients are now using online services to book appointments etc.
- The CCG Improved Access Survey has been put up on the Practice website to try and reach as many people as possible

Warlingham Green

- The PPG is now doing really well
- The Practice newsletter has gone out and been emailed to patients through the practice database
- Planned lecture for February on Diabetes

Don Illman – Mental Health

- The Shaws Corner Mental Health unit has now been moved to Gatton Place
- Tandridge Unit has moved to Caterham Dene
- Part closure of Crisis House which is now being used as sanctuary beds. Hopefully the Safe Haven will pick up those people who would have gone to Crisis House

7. Commissioning Intentions – Raheel Anwar, Head of Commissioning ESCCG

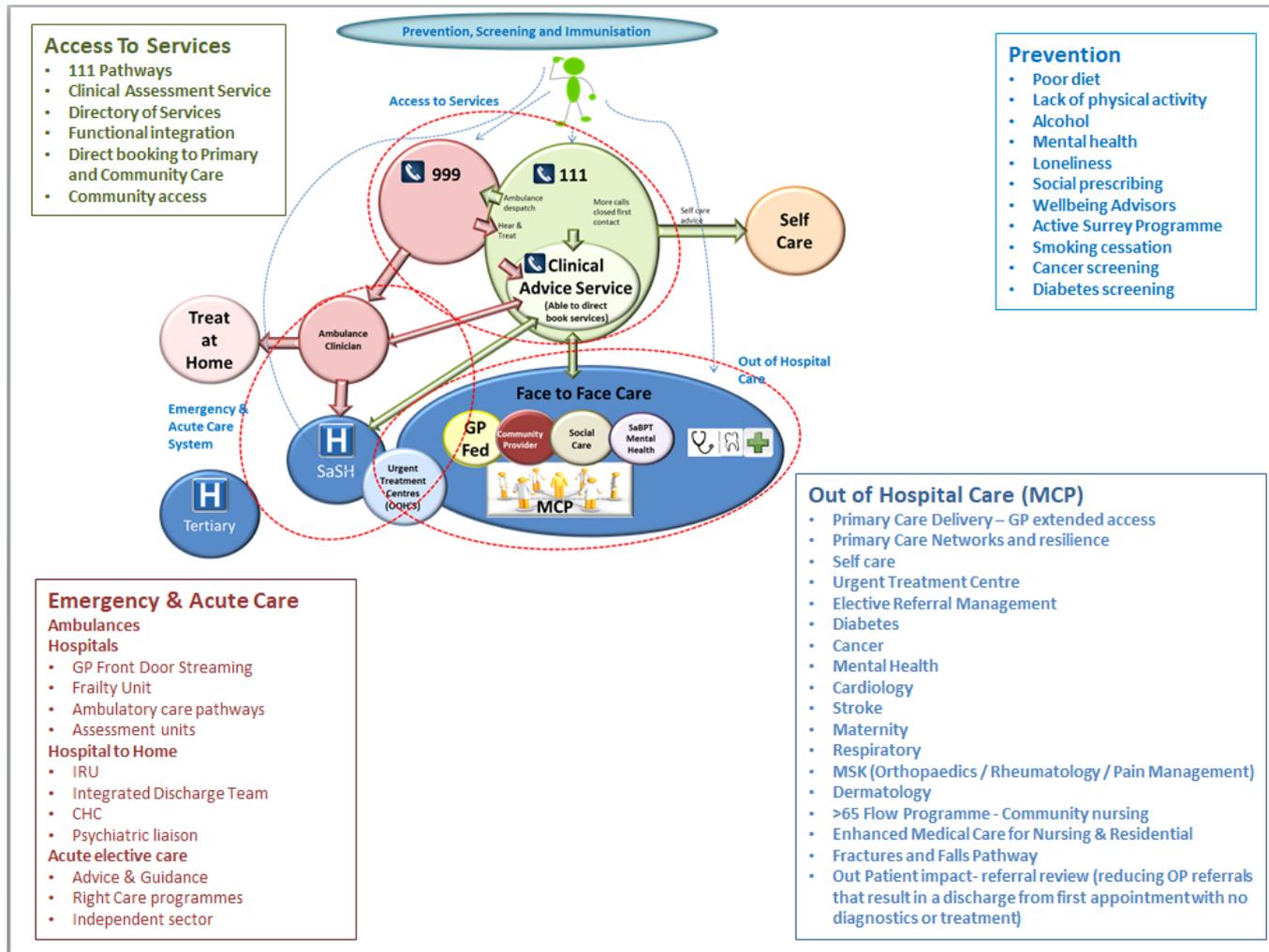
East Surrey CCG has completed drafting its Commissioning strategy which sets out our vision of how we will deliver health care moving forward. This strategy has been based on the Call to Action, which local residents contributed to, as well as the National Five Year Forward View (FYFV). The Call to Action requires bold change to be implemented on how services are delivered, so that the patient is put in the centre and that health needs are met.

New Models of Care are to be implemented so that out of hospital care becomes a much larger part of what the NHS does. The FYFV speaks of the direction of travel being towards moving specialist care out of hospitals into the community. This Model of care is called a Multispecialty Community Providers Model or 'MCP.' The aim is to break down barriers between family doctors and hospitals, with more care delivered locally, supported by specialist centres for people with multiple conditions. General Practice, community providers and social care will work together to deliver care through the multispecialty provider model. The aim is that the services will all be accessed through the NHS 111 system.

A whole system approach has been developed to be commissioned as four interlinked components and care will be organised at five different levels: in GP practices, in networks, across the CCG, across the SASH footprint and across the STP.



The diagram below sets out the four areas that the system is currently concentrating on:



East Surrey patients have helped to develop these four areas that are being worked on through the Call to Action meetings that took place. All the feedback was fed to NHS England which helped to form the National Five Year Forward View.

Providers have been informed of East Surrey CCG's Commissioning Intentions but we would value patient feedback and support for these plans. The ESCCG Commissioning Intentions can be viewed on the CCG website here: <http://www.eastsurreyccg.nhs.uk/about-us/our-plans/> (Click on 'Strategy and Planning' and then the East Surrey CCG Commissioning Intentions Link). Please send any feedback directly to Carol Rowley (carol.rowley4@nhs.net).



Q – How do you envisage Mental Health being incorporated in this new model?

A – ‘The Mental Health Forward View’ has been aligned to this work and Mental Health Practitioners are part of the Multispecialty Community Provider Model. Surrey and Borders Partnership Trust have also been involved in this work. Well-being Advisors placed in the Practices will also help to sign-post patients to the appropriate available services.

One of the four Practice Networks is looking at Physical Health and this includes those with Mental Health. The findings from this work will be shared across all the four Networks.

Q – Do First Contact Physios feature within the MCP Model?

A – Yes First Community Health Care (Community Provider for East Surrey) has been very much involved in designing the new Model of Care.

Q – Do you have adequate baselines to monitor progress?

A – The system is working closely with Surrey County Council to ensure that quality data is received which will help to map the journey of travel. This data will be used to prioritise the areas that will make the most difference.

8. GP Patient Satisfaction Survey – Carol Rowley, Patient Experience Lead ESCCG

The GP patient satisfaction survey is sent out nationally from NHS England to a random selection of patients. In NHS East Surrey CCG, 4,705 questionnaires were sent out, and 2,043 were returned completed. This represents a response rate of 43% which is significant. The survey provides practice-level data about patients experiences of their GP practices. For more information about the survey please visit <https://gp-patient.co.uk/>.

Highlights of the results can be found in the slides attached separately.

East Surrey CCG has the best overall patient satisfaction score out of the CCG’s in the local surrounding area. The results have also improved from last year which is good to see.

Carol suggested that it might be worth PPG’s looking at the specific results for their Practice and identifying if there are any areas that could be addressed to improve the patient satisfaction within the Practice.

9. Opportunities to become more involved – Carol Rowley, Patient Experience Lead ESCCG

East Surrey CCG would value patient involvement in the following areas:

- Dermatology
- Respiratory
- End of Life Care
- Diabetes

If you have any experience in these areas or perhaps have a general interest and would like to get involved in this work, please contact either Rhianna Hills (Rhianna.hills@nhs.net) or Carol Rowley (carol.rowley4@nhs.net) for more information.



The CCG has a new website (www.eastsurreyccg.nhs.uk) and would really value patient feedback on how easy the site is to navigate, whether it's easy to read, is there anything else you would like to see included etc. If you have a few moments to spare please send any feedback to Carol Rowley.

10. Adult Social Care, Surrey County Council – Natalie Gordon

Natalie Gordon works within Adult Social Care Team at Surrey County Council and her role is information and patient engagement. She introduced her colleague, Nathalie Wilson who will be taking over her role and will be presenting at the next PRG Meeting in February to present SCCs new engagement strategy.

Natalie spoke briefly about 'Surrey Information Point', (<https://www.surreyinformationpoint.org.uk/>) which is a website that provides information on care, community and health support that is available in your area. If you would like to receive posters and leaflets to help promote the website, please contact Rhianna Hills. Natalie also offered to write a piece for your Practice Newsletter to explain what the website can help you with. If you would like to take up this kind offer please let Rhianna know who will put you in touch.

11. Future Meeting Dates

Thursday 22nd February 18 – 7.00-9.30pm – Nutfield Lodge Redhill

Thursday 21st June 18 – 7.00-9.30pm – Nutfield Lodge Redhill

Thursday 25th October 18 – 7.00-9.30pm – Nutfield Lodge Redhill

