

GOVERNING BODY MEETING held in public

27 April 2016

Agenda Item **2.4.2**

Paper Title	Eastern Cheshire HealthVoice
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APPENDIX A

Unconfirmed Notes of the meeting held on 17th March 2016

UNCONFIRMED Minutes of the meeting

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Thursday 17 March, 2016

The Hall at Marthall, Sandebridge Lane, Knutsford WA16 7SB

Attendee's Name		
Trevor Lerman	TL	Chair and Handforth Health Centre PPG
Andrew Blain	AB	Kenmore PPG
Archie Watt	AW	Chelford PPG
Barrie Towse	BT	
Charlotte Peters-Rock	CPR	Governor CWP / Cheshire Area for Cheshire Action
Cyril Towse	CT	
Diane Walton	DW	
Geoff Gray	GeG	Broken Cross PPG
Jo Rose	JR	Annandale PPG
Gill Griffies	GG	Chelford PPG
Jacque Grinham	JG	Annandale PPG
Jennifer Flowerdew	JF	
Jo Rose	JR	Annandale PPG
John Adams	JA	Action for Sick Children
Mike Heale	MH	East Cheshire Mental Health Forum
Milka Podsiedlik	MP	Pathways CIC
Patrick Heywood	PH	Toft Road PPG
In Attendance		
ECCCG		
Jerry Hawker	JH	Chief Officer ECCCG
Matthew Cunningham	MC	Head of Corporate Services ECCCG
Usman Nawaz	UN	Engagement and Involvement Manager ECCCG
Kate Banks	KB	Communications Officer
Bill Swann	BS	Governing Body Lay Member ECCCG
Dawn Wayne	DaW	Note taker / PA to ECCCG Chair
Neil Evans	NE	Commissioning Director ECCCG
Katie Hall	KH	Quality and Commissioning Officer
Robert Hussey	RH	Community Resuscitation & Complementary Resources Manager - NWAS
APOLOGIES		
John Teggart; Joan Teggart; Bernard Warrington; Eileen Talbot; Linda Gill; Maureen Sibley; Colin Sibley		
All papers/presentations are available on the HealthVoice website http://www.ehealthvoice.info/		

Item	Actions
<p>Welcome TL welcomed attendees to the meeting.</p>	
<p>Minutes of the last meeting and Matters Arising DW advised that her apologies had not been noted in the minutes. This will be</p>	

	Item	Actions
	<p>amended retrospectively. The minutes of the meeting held on 22 January 2016 were accepted as an accurate record.</p> <p>Matters arising:</p> <ul style="list-style-type: none"> • Item 2: CPR had not received a response from Emma Leigh regarding queries on the childrens and young people’s mental health item. <p>ACTION: Usman to follow up with Emma.</p> <ul style="list-style-type: none"> • Item 2: UN confirmed that Locality Peer Group meetings were being arranged in 4 of the five localities; the new Peer Group representative for Wilmslow area, Dr Alex Garvey, will be in post in April and a meeting will be arranged with him as soon as possible. • Item 4: Clarification was requested regarding the transformation of general practice listed as one of the areas for prioritisation in the Commissioning Intentions process. NE advised that implementation of the transformation will progress over the next 9 months under the new standardisation contract. The next phase will be how to future-proof GP practices eg: <ul style="list-style-type: none"> - estates, (Do the buildings have sufficient capacity? Are they fit for purpose?) - how to develop their facilities - workforce, overcoming the national shortage of doctors and healthcare professionals. 	UN/EL
Meeting Specific Agenda items		
	<p><u>NWAS Community First Responders and Defibrillator Project</u></p> <p>A presentation was given to the group by Robert Hussey of North West Ambulance Service highlighting the community resuscitation and complementary resources available within the Cheshire and Merseyside footprint. The presentation is available on the website and included in the pack attached to the minutes.</p> <p>Following the presentation, Robert answered questions from the group.</p> <p>A copy of the First Responders presentation is on the HealthVoice website and is incorporated into the pack circulated with the Minutes.</p> <p><i>For more information on locations of AEDs, cardiac arrests in Eastern Cheshire over last year, take a look at this presentation delivered to the CCG Governing Body in February http://tinyurl.com/zljfq15</i></p> <p><i>To read the Cheshire East Council scrutiny report on ambulance services http://tinyurl.com/hj7mzqg</i></p>	
1	<p><u>Patient Representative Updates</u></p> <p>Patrick Heywood – IT workstream</p> <p>PH advised that:</p> <ul style="list-style-type: none"> • There were major challenges linking up the assorted systems used by healthcare providers throughout the pan-Cheshire footprint which is delaying the development of integrated care programmes. • 21 out of 22 Eastern Cheshire GP practices are using EMIS web and most are able to offer patient access for booking appointments, checking test results etc. 	

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	<ul style="list-style-type: none"> • Cheshire Care Record – the challenge is to make it operational to enable patient records to be available to health professionals throughout Cheshire. • Electronic patient records – not progressing currently due to lack of resource but will include all aspects of patients medical history. <p>Following a query about patients booking multiple appointments on line, PH advised that a protection system was in place to avoid overbooking and to help control 'Did Not Attend' instances to prevent abuse of the service.</p> <p>A question was raised regarding patients being microchipped to enable access to their personal details quickly. PH noted that microchipping is being considered in some countries but not in UK.</p>	
2	<p>Barrie Towse – Caring Together Operational Group</p> <p>BT stated that the Caring Together Operational Group was newly formed when the Caring Together governance structure was revised. It will be meeting monthly with the first meeting being held in November and included representatives from Cheshire East Council, Public Health, Cheshire & Wirral Partnership Trust, ECCCG, East Cheshire Trust and HealthVoice. Items discussed included :</p> <ul style="list-style-type: none"> • Tracking cultural transformation – people working together, staff survey entailing health employees and council employees. • Producing a draft outline business case to direct the way that healthcare will be provided in this area. The draft will be presented to HealthVoice when it is available. • Learning from the Catalonia experience – some CCG colleagues visited Spain as part of an educational programme funded by Health Education England to observe their integrated care system. • The Caring Together programme participating in the Barnaby festival in Macclesfield. 	
3	<p>Jo Rose – Integrated Diabetes Care</p> <p>JR advised that a need for a diabetes education package for patients had been identified. Following numerous meetings and a technology enabled diabetes care event at Alderley Park a specification had been drawn up which was much broader than originally envisaged. The specification is now out to tender and bids are being evaluated.</p>	
4	<p>Jackie Grinham – Programme Management Group.</p> <p>JG had been asked to represent HealthVoice on the Programme Management Group. The aim of the meetings is to maintain an overview of progress of the five elements of the CCG's 'Plan on a Page'. There are a number of projects within each of the five areas resulting in a Total of 31 projects overall. The meeting gives the programme leads an opportunity to meet together to share experiences and avoid duplication of work.</p>	
5	<p>Feedback from Agenda Planning Workshop</p> <p>Further to the Agenda Planning workshop which was held during the last HealthVoice meeting, AB and TL fed back the results from the flipchart exercise. These can be seen in in the presentation pack.</p> <p>The key suggestion taken on board was around introducing a lead agenda item/theme to the meetings. While it was agreed that future agendas could be</p>	

	Item	Actions
	<p>themed, this would not however preclude the Standing Items such as patient rep updates.</p>	
6	<p><u>Commissioning Intentions Update</u></p> <p>Neil Evans reported that the CCG has been working with group of members from HealthVoice to shape the draft 'Plan on a Page'. The CCG ambitions have been co-developed with the public and clinicians over the last two years incorporating the Caring Together programme.</p> <p>One of the major challenges in the 2016-17 plan will be the QIPP (Quality, Innovation, Prevention and Productivity) target – how the CCG gets best value for money for services it procures and how the money is invested in the main priorities for the population of Eastern Cheshire. The CCG will be working through a range of QIPP themes and using a scoring tool to prioritise investment.</p> <p>AB advised that there was only 3 members left in the HealthVoice sub-group for Commissioning Intentions and further members would be welcomed as there was still a large amount of work to do over the next 5-6 months. Any interested members should contact Andrew via Usman Nawaz, 01626 66 3864, usman.nawaz@nhs.net.</p> <p>A copy of the Commissioning Intentions presentation is on the HealthVoice website and is incorporated into the pack circulated with the Minutes.</p>	
7	<p><u>CATCH App</u></p> <p>A presentation was made to the group about a free mobile/tablet application which has been developed in conjunction with South Cheshire CCG and Cheshire East Council. CATCH is a free health app aimed at parents and carers of children aged 0-5 with the focus on giving timely, consistent advice and reducing the disproportionate number of presentations at A&E who leave with a no treatment, just advice. The information can be tailored to individuals and features an interactive map identifying GP surgeries, dental surgeries, health centres, pharmacies etc. All the information contained within the app is sourced from NHS Choices.</p> <p>HealthVoice members were asked to help promote the app as widely as possible, posters, leaflets, badges etc can be obtained from Kate Banks. 01625 663824 katebanks1@nhs.net</p>	
8	<p><u>CCG Complaints Team Update</u></p> <p>Following her introductory visit last year, Rosie Kendrew was invited back to HealthVoice to feedback on the achievements of the Complaints team over the past year.</p> <p>Key achievements:</p> <ul style="list-style-type: none"> • Service strives to be as patient friendly as possible • Patients are at the centre of the process • Looking at different ways of managing complaints, ie face to face meetings. • Changes have been and are being made as a result of complaints already resolved. • Complaints are sitting at the centre of how we commission services, using the intelligence gained to drive up quality of service and inform commissioning intentions. 	

	Item	Actions
	<p>The Complaints Team has recently expanded to take on subject access requests, and the ECCCCG patient advice and liaison service phone line (separate from the East Cheshire Trust PALS)</p> <p>Key recurring themes for complaints are: Continuing Healthcare, mental health services, services for patient with more complex issues, surgery delays (18 week referral to treatment target), autism and ADHD services.</p> <p>In answer to a query regarding response time for complaints received, RK advised that completion is currently within 35 working days but sometimes it can take longer particularly if responses from other organisations are required. The team set a high quality standard so occasionally they may revisit responses to get the best information available.</p> <p><i>A member of the Complaints Team will be available at the end of HealthVoice meetings to discuss individual cases. Between meetings, the team can be contacted on complaints.nhseasterncheshireccq@nhs.net or 01625 663 828.</i></p>	
<p>9</p> <p>9.1</p>	<p><u>Any Other Business</u></p> <p>Usman Nawaz advised that a standardised role profile and confidentiality agreement for patient representatives in the CCG was being drawn up. This will be circulated amongst existing patient representatives to be signed and shared with new patient representatives when they are appointed.</p>	
	<p>Dates of future meetings: Tuesday 10 May 2016, 09:30-12:00, Bridestones Suite, Congleton Town Hall Thursday 14 July 2016, 18:30-21:00, Capesthorpe Room, Macclesfield Town Hall</p>	<p>All to note</p>