

NORTH STAFFORDSHIRE CCG PATIENT CONGRESS

Summary of meeting on Wednesday 21st October 2015

Key Updates

Keele University GP Access Audit – Members were updated on the findings which overall showed access to be good, with the average wait times to see a doctor being 0- 3 days in most cases. Findings will be shared with the CCG's primary care team. Members were pleased to hear of the audit results but firmly supported a qualitative review of access to support the numerical based audit. This will be fed back to Keele colleagues and the Primary Care Director.

Citizen Jury Final Report and Recommendations – The clinical director for commissioning confirmed all recommendations have been taken on board by the CCG and a task and finish group has been established to monitor work taking place. The action plan to monitor this work was shared with patient congress.

Dementia- Members were informed that as a result of the ongoing dementia awareness work, dementia diagnosis rates within North Staffordshire are now at 70%, above the national average of 67%.

Summary of news, views and perspectives from patient participation and locality groups and third sector organisations

- There was a report back on the Transition Group for the new model of care, My Care, My Way: Home First. The first engagement event is due to take place on Friday 23rd October 2015 at the Moat House. All other dates are available on the CCG website and have been circulated to congress members.
- Information was shared about concerns raised with NHS England about pharmacy prescriptions being sent to selected pharmacies without patient permission.
- A themed patient congress meeting on social care and the third sector was proposed to take place in February 2016.

Joint CCG Strategy

Congress members were asked to consider the following questions regarding the developing joint CCG strategy. Who should we be listening to? What should we bear in mind? What would you like to see included within the strategy?

Congress members offered the following feedback:

- The strategy should be clear and evidence based with alignment to localities within North Staffordshire and Stoke-on-Trent.
- The CCG should consider listening to the voluntary sector as well as professional bodies who might specialise in specific conditions / services, e.g. Age UK, Healthwatch, faith groups.
- The CCG should take into consideration the thoughts and views of the NHS workforce.
- Listen to ethnic minorities, those from the 9 protected groups and members from more rural based communities.
- Commission services which people can understand.
- Members would like to see an increased emphasis on personal responsibility and prevention through patient education.
- Increase partnership working with the local council and public health to increase prevention within the Strategy.
- There is a need to bear in mind the limited resources of the CCGs
- Patients would like to see the CCG thinking outside the NHS box and engaging with local communities. However, the CCG should not engage 'if they already have the answer'

Front of House and Out of Hours

Members heard about an extension to the out of hours GP contract and the proposals to review how the out of hours contract might be integrated with the Front of House service provided at the hospital Accident and Emergency department. Members also heard the engagement strategy that had been executed and were asked if they thought enough engagement had been undertaken or whether more should be conducted. Members requested further engagement with a focus on organisations in the voluntary sector who have clients who are frequent users and the 9 protected groups.

Date of the Next Meeting

Thursday 17th December 2015