

NORTH STAFFORDSHIRE AND STOKE-ON-TRENT CLINICAL COMMISSIONING GROUPS (CCGs) PATIENT CONGRESS MEETING IN COMMON

Summary of meeting on Wednesday 16th August 2017

Patient Involvement in the GP Forward View

Congress members heard that 1) this is a national programme that is looking at the investment and change in general practice and how to integrate services; 2) a Project Management Team will be providing support to GP practices whilst this is being rolled out; 3) work is underway around access to GP services, looking at proposals and targets for extended hours access and care navigation; 4) care navigation looks at the principle that when a patient feels ill and requests to see a GP, the GP may not be the appropriate healthcare professional for the patient to see, it could be for example the Nurse. GP Receptionists will become Care Navigators and will signpost patients to the appropriate service rather than the patient just seeing their GP; 5) care navigation is not about the patient being refused to see their GP, but to be signposted to the appropriate service for their needs; 6) there will be investment in technology services for example the setup of patients being able to Skype their GP; 7) patients and congress members have a key part in the shaping of this service; 8) PPGs and patients will be consulted with and will have involvement in how the extended hours access will look. PPGs will be asked to inform patients what care navigation will look like and; 9) the Pilot will be looking at patient and the public needs.

Congress members raised 1) the need for localities to work together; 2) the need for strategic direction around what is needed and how that is to be shaped; 3) the need for patients to receive the correct information when being signposted to services; 4) the need for information to be available by other means and not just online; 5) the need for patients to have a clear understanding around Care Hubs and what they will provide and; 6) concern around that not all GPs have an active PPG.

Quality Strategy Implementation Plan

Congress members heard that 1) the Quality Strategy Implementation Plan has three strategic aims, aim one: all patient patients feel safe, aim two: all patients receive effective healthcare and aim 3: all patients have a positive experience of care; 2) a Community Nursing Assurance Group has been set up to bring together Community Matrons, District Nurses etc. from different areas, to gain their perspective on if they feel they are being supported, the pressures that they face and how the CCGs can support; 3) Focus Groups have taken place, attended by Community Nursing Teams to gain their perspectives on what can be done to improve the delivery of service to patients; 4) a Care Home Matron commenced on a 12 month secondment and provides a rolling programme of leadership, education and clinical leadership to care homes and the building of relationships with care homes providing directly commissioned care and other key stakeholders; 5) there has been a student nurse placement within the CCGs which provided the opportunity for the student placement to understand and consider the essential roles of the CCGs and how the CCGs worked to meet the healthcare requirements of the local practice population. This has been very successful and; 6) healthcare breaches are being examined and trends and themes are being identified. Pathways are being examined to see if some are as effective as they should be.

Congress members raised 1) concern around the impact financial restraints may have on change to services and bringing in additional resource. It was noted that the Quality Impact Panel looks at any potential implications any change may have on patients and how this is to be monitored. All QIPP financial savings go through a robust system and Quality Impact Assessments are undertaken on any change being applied, to identify what impact this change may have and to put in place mitigations and; 2) concern around how the delivery of the three strategic aims and Quality Strategy is being measured. It was noted that the delivery of the strategic aims and Quality Strategy are monitored by the CCGs Quality Committee In Common which measures the achievement of the constitutional standards, complaints, infection control etc. and reports to the CCGs Governing Board In Common where broader information is reported and areas were highlighted that required focus. This will then feed down to the CCGs Quality Committee In Common for the Quality Team to pick up. Information gathered at groups that report to the CCGs Quality Committee In Common informs strategic level and how best practice can be shared.

Dementia Passport

Congress members heard that 1) the CCGs are holding sessions for staff to become a dementia friend and understand what a dementia diagnosis feels like for patients and carers. GP surgeries are being encouraged to become dementia friendly and; 2) the North Staffordshire and Stoke-on-Trent Dementia Steering Group are pulling together a dementia passport for patient use which details what professionals need to know in an emergency. The passport will also contain details around patient's preferences, who/which services are involved with their care and end of life wishes. The draft document will report to the September 2017 Steering Group and will then be trialled with patients to ensure it meets their needs.

Citizens Jury Update

Congress members heard that 1) the Citizen's Jury is progressing well; 2) Jury members have been going out to interview a variety of people and groups, as well as running a number of drop in sessions, to gather a wealth of information; 3) at the last Citizen's Jury meeting Jurors reviewed all evidence gathered from carers, services users and the online survey and pulled out the key points emerging and located any evident gaps in the gathered evidence that required further exploration; 4) the Citizen's Jury is being supported by a Birmingham PHD Student, who has been very helpful in identifying different ways to review the information collected, key issues and how to manage the process; 5) a clerk to the jury is being provided by a member of Staffordshire Fire and Rescue who is capturing the process, the learning from the process and will produce the Citizen's Jury Report. It is anticipated that the report will be ready around November 2017 and will be available within the public domain after being considered by the CCGs Governing Board

and; 6) at the next Citizen's Jury meeting Jury members will be looking at the next steps of the process and will make the decision of what Provider will be approached and what critical questions the Provider will be asked. Following this, recommendations will be produced.

Reducing Medicines Waste Campaign

Congress members heard that 1) this year's campaign aims to reduce waste medicines; 2) a charter will be implemented whereby three pledges will be introduced. GPs will sign up to the GP pledge, Pharmacists will sign up to the Pharmacy pledge and patients will sign up to the public pledge, all of which aims to ensure that patients receive the medicines they require, take them appropriately and to reduce waste medicines; 3) the charter will be led by the CCGs Medicine's Optimisation Team who would like GPs, Pharmacies and patients to sign up to the pledges and; 4) the next Community Conversation will focus on waste medicines and what can be done differently to reduce waste medicines and save money.

Congress members raised 1) the need for the pledge to be clear on if it was the responsibility of the patient or the GP to arrange medicines reviews; 2) the need for the pledge to educate patients on the need to check their medicines as soon as they have been issued them by the pharmacist; 3) concern around the lack of continuity between hospital prescribing and GP prescribing which could lead to waste medicines; 4) the need for patients to be made aware that they could return medicines to the pharmacist, as these could be harmful to the patient if taken and no longer required and; 5) the need to consider patients whose condition had improved overtime and no longer took their medication, however feared informing their GP of this in case their GP felt they no longer required this medicine. The patient would then have to go back through the process of having this medicine prescribed again if required.

Antibiotics Campaign

Congress members heard that an Antibiotic campaign will be launched this year targeting local people who expected to be prescribed antibiotics by their GP, however were not prescribed antibiotics. Instead, patients will be given a card from their GP providing information on why they have not been prescribed antibiotics, how they can look after themselves better and if they do not feel better within a certain number of days to revisit their GP to be reassessed.

Congress members were asked to review the wording and feedback on the Antibiotic Campaign card.

NHS England's Consultation on 'Items which should not routinely be prescribed in primary care: a consultation on guidance for CCGs'

Congress members heard that 1) NHS England has launched a consultation around what items should not be routinely prescribed. The aim of the consultation is to seek a wide range of views on the proposals and; 2) the CCGs' Medicines Optimisation Team will be holding two focus groups and patients who are currently prescribed some of the medicines under consideration will be invited to attend, as well as non-users of these medicines, to scope a wide range of views.