

Minutes- Huntingdonshire Patient Forum

**Date** - Thursday 11<sup>th</sup> July 2019

**Time**- 14.30-16.30

**Venue**- Maple Centre 6 Oak Drive Huntingdon

**Present**

Sandy Ferrelly Chair

John George

Caroline Tyrrell-Jones -Healthwatch

Stephen Cheetham

Debbie Drew- Healthwatch (note-taker)

David Bowers

Teresa Cole

Carole Broom

Jean Matheson

Kari Payne (Healthwatch)

Angela Owen- Smith

**Apologies**

Nicola Donald

Frances Dewhurst

Nicola Harris

Parvin Wynn

Roy Stafford

Claire Holman

Ray King-Underwood

**1. Welcome and introductions**

**2. Chair- opening remarks**

Sandy explained that she was chairing the meeting as Roy was unfortunately unwell.

Cambridgeshire and Peterborough CCG are deeply in dept. There are discussions happening around cuts to all areas and there is potential that the voluntary sector will

be hit badly by this. There are discussions about the inequalities of funding per head between areas and Cambridgeshire has had a lot less than some surrounding counties.

The government has been challenged on this inequality and Gary Howsan has been pursuing it.

QU- It may be worth us lobbying our local MP.

CTJ- Healthwatch has sent an open letter to the CCG.

#### **4. Minutes and matters arising**

Minutes were confirmed as correct and no matters arising from them.

#### **5. Update on West Cambs Federation- Steve Cheetham**

Steve had visited the group previously to explain how the West Cambs Federation (WCF) were putting in place an Improved Access Service. This service offers out of hours routine appointments.

Twenty-seven GP practices are sign up to this and the service works from 4 hubs at present Acorn, Buckden, Cornerstone, Cromwell with 3 more potential hubs to follow (Brampton, Ramsey and Spinney).

QU Which practices are signed up to this service?

**ACTION-** Steve will provide a list to Caroline for circulation.

WCF have been looking at their branding and have redesigned the patient feedback form. Posters about the service are being put in community centres as well as the GP practices.

We want people to understand who they are feeding back about- many when they filled in the feedback forms before have talked about their own GP practice rather than the out of hours service they were using, so there is some confusion.

WCF are in the process of producing a 3-fold leaflet and would like some input on what should go on it. We are hoping this will inform people of the service.

SC - we were thinking of a map, the addresses of the hubs, a phone number, what the service is etc.

#### **COMMENTS**

The map should be 2 of the 3 folded sides or it will be too difficult to read.

Maybe have the practices signed up marked in one colour and the Hubs in a different so people can see which hub is nearest to them.

The white on yellow is very difficult for visual impaired to see why not use black on yellow.

What about in different formats? Easy read different languages?

The website colours and those of the leaflets, posters do not match- This also will not help people know what's what. The website is not the easiest to use either.

QU- Have you involved patients in the discussions around posters etc.?

SC- We actually only managed to engage with 14 patients, we can only have one person at a time in a hub asking questions and some people do not want to engage further.

QU- What about the PPGs in surgeries?

SC- we have found it really difficult engaging with PPGs partly because the practice managers do not always give us the contact names.

CTJ- We may have some contacts at Healthwatch I can look for you.

**ACTION** Caroline to check for PPG leads

QU- Can people book appointments directly with the service?

SC- Not at present they need to go through their own GP receptionist. We are hoping that it may happen in the future.

QU- It does not seem that receptionists are offering these out of hours appointments. Why?

SC- I think that many of the GPs / receptionist have not been fully informed so if you know your practice is part of WCF then ask them about extended hrs. and they must offer you an appointment.

QU- I got the impression from one GP that they were not happy that their surgeries were being used. Their equipment etc.

SC- GPs get a good monthly fee from WCF so financially it is a positive rather than negative impact.

QU- what is the lead in time for an appointment?

SC- occasionally there will be the odd appointment within a couple of days but should be within 2 weeks.

QU- do the doctors have access to patient notes?

SC- yes.

QU- how many extra hours are there being offered.

SC- We have 101 hrs. with 15 min appointments. This could be 400 extra appointments a week.

## 6. Shared experiences

JM- Our GP practice has changed the way people get repeat prescriptions. You now have to go into the GP with your form. Is this about saving monies? Some people have difficulty travelling to their GP thus it is difficult to drop off prescription then collect it and then potentially go to pharmacist. Three trips instead of one.

CTJ- this seems to be an individual GP practice rather than across the board. People can give feedback into Healthwatch anonymously if they are having problems.

CB I am a Patient Representative for the STP MSK Steering Group, (chaired by Mr Julian Owen, Consultant Orthopaedic surgeon CUH), expressed concern that meetings had not been taking place as scheduled. This was cited to a number of reasons, from the late issue of the NHS Plan to funding construct of the 2019/20 contracts and governance issues with North and South Alliance Boards interface with the Planned Care Delivery Group (which has now folded).

A total of 7 meetings to date have been cancelled over the period January to August 2019. The Steering Group had been working on this this project for some time even before she joined them in October 2017 with a pilot running late 2018/early 2019. Carole felt to see it stall in this way was not helpful and makes a mockery of the commitment to service improvement. A great deal of hard work had been put in by the 20+ professionals & clinicians involved and felt with all the costs involved not a good use of NHS funds. Carole is seriously considering resigning from the group.

CTJ- They are really still at the early stages of getting patient involvement.

AOS- We held our annual carers tea party in Needingworth, 50-60 people attended and we had a seated Zumba session.

CB- As part of the Rotary we have a community purse and we have just funded 2 runs of the Health Walks brochure.

JG-I am at Cromwell place practice and we can no longer get appointments online- only for bloods. I thought that GPs were supposed to have a certain number of on-line appointments available. I am wondering with the closure of Northcote House practice those patients have been dispersed between 2 practices ours being one if this has had an impact on availability thus no online available.

If the practice are doing triage then the appointments are going to the right people.

### **Extra Agenda Item- Update on Partnership boards- Graham Lewis**

Graham explained that there are 4 boards- one for Carers, Older people, Learning Disability and Physical and Sensory Impairment as well as a wheelchair forum. These board have run throughout Cambridgeshire for a long time now. After a review end of last year and with many services now being across Peterborough and Cambridgeshire

it has been decided to amalgamate both sets of boards. Healthwatch will still be managing these.

The boards have quite a lot of influence and can address issues that are happening locally in health or social care. They have fed questions into the new wheelchair service provider interview, have made comment on the Fairer Charging Policy and the potential changes CCC were thinking of putting in place and have raised issues around lack of information in accessible format (i.e. letters sent to service users with LD).

The boards meet 4 times a year (carers 6) and meet across the county. The boards are made up of relevant professionals and independent members. We are always looking for new members for the relevant boards who have contacts etc. with other service users. Graham is also willing to visit groups that you attend and do a talk to them. Contact Graham [graham.lewis@healthwatchcambspboro.co.uk](mailto:graham.lewis@healthwatchcambspboro.co.uk)

Because the boards are now taking in Peterborough area and some people may not want to travel that far we are encouraging people to come along to the community forums particularly if they have an issue to raise.

## **7. Caroline Tyrrell-Jones- Healthwatch 2020-25**

We at Healthwatch are looking at our priorities for the next 12 months as well as from 2020-25. We are keen to hear from the public what they feel we should be doing so we have consulted the 3 forums.

### **Current**

CTJ Showed the strategy- it was felt compliment the good could be added.

CTJ Showed the group the current mission and it was felt that positive encouragement of good practice could be added.

The group felt that we should be encouraging people to feedback good care and good practice as this often gets overlooked.

Maybe there could be more regular Healthwatch updates i.e. what have we done this week/month? Having a column in the local paper? Do we use community radio?

Make sure the annual report is handed out in various places- people are free to take some copies for their groups.

### **Future**

Mental Health- Healthwatch to stay involved whilst the services are being redesigned.

Looking at GP appointments and the problems around them- This has been an ongoing theme for Healthwatch

- Should HW promote self help
- Look at resources as see if they are being utilized fully.

- With triage in place showing the value of someone seeing a healthcare assistant or nurse instead of GP.
- Promoting good communication

Healthwatch could work towards providing positive feedback to organizations when it has been received.

Healthwatch to keep abreast of what is happening nationally as well as local and see how one impacts the other.

## **AOB**

Richard Dillely wanted to let people know that the Workers Education Alliance who have in the past received direct funding from Government now have to apply to the Mayor of the Combined Authority for funding. This application has been turned down.

*The WEA are the UK's largest voluntary sector provider of adult education in England and Scotland.*

*The Workers' Educational Association (WEA) is a charity dedicated to bringing high-quality, professional education into the heart of communities.*

*We also have a special mission to raise aspirations and develop educational opportunities for the most disadvantaged. This includes providing basic maths, English and IT skills for employment; courses to improve health and wellbeing; creative programmes to broaden horizons and community engagement activities that encourage active citizenship.*

Richard explains that the WEA have been offering training/ courses in the area for more than a century now. If this is no longer going to be available, it will leave yet another gap in provision.

A discussion took place about the change of day for meetings and it was agreed to keep the next meeting as before (the first Tuesday of the month) as rooms have been booked. We may need to start looking for a bigger venue.

Meeting finished 4.45

Next meeting

Tuesday 3<sup>rd</sup> September Maple Centre