

**Minutes.**

**17<sup>th</sup> September 2019, 10.00am to 12.30pm, Didcot Civic Hall**

<b>Present</b>	<b>Name</b>		<b>Organisation / LF</b>
		Shelagh Garvey	SG
	Graham Hall	GH	White Horse Medical Practice, Faringdon
	Mary Braybrooke	MB	Clifton Hampden Surgery, Abingdon
	Dave Butterworth	DB	The Abingdon Surgery (Stert Street), Abingdon
	Janet Parker	JP	Newbury Street Practice, Wantage
	Dermot Paddon	DP	Woodlands Medical Centre, Didcot
	Bruce Claxton	BC	Church Street Practice, Wantage
	Stewart Lilly	SL	Woodlands Medical Centre, Didcot
	Sue Hannon	SH	Church Street Practice, Wantage
	Richard Pullen	RP	Berinsfield Health Centre, Berinsfield
	Emma Teasdale	ET	Healthwatch Oxfordshire (Minutes)

1.	<p><b>Welcome, introductions and apologies</b></p> <p>SG welcomed everyone to the meeting.</p> <p><b>Apologies:</b> Gene Webb, Eileen Langley, Bob Lassam, Lesley Powell</p>
2.	<p><b>Minutes of meeting held on 23 July</b> <b>Matters arising</b></p> <p>ET asked to make minor amendments, Minutes Agreed.</p> <p><b>ACTION</b> <b>ET asked to make minor attendee amendments to Minutes</b></p>
3.	<p><b>Chair update/OCCG/LFCs</b></p> <p>Discussed under item 5.</p>
4.	<p><b>Feedback on Primary Care Stakeholder meetings – Wantage (SH/JP)</b></p> <p>SH has attended six data group meetings - during July meeting, group looked at the data that was available and did some forward planning of how to present the results to the town. A ‘Listening Event’ was held last week, resulting from the HOSC meeting in May, where it was felt that the stakeholder group weren’t listened to. There was an independent Chair and views were aired. Most issues covered in draft Minutes but uncertainty over purpose of event and if views will be taken forward.</p> <p>There is a ‘Solution Building’ event 18<sup>th</sup> September 2019, organised by Libby Furness (Head of Transformation, OCCG), and aimed mainly at Parish Councils, looking at the current issues and what people would like to see in the future. No further meetings planned, not known if Minutes/action notes will be produced. Wantage is supposedly following ‘new Framework’ and various people asked to write reports General feeling of ‘lots of talking, zero action’, plus cost of venues, admin. people’s time, etc. SG asked SH/JP to write summary of the meeting.</p>
5.	<p><b>Update on SWOL - SG</b></p> <p>LFCs received a letter – no prior notice or consultation - from Kiren Collison (Clinical Chair, OCCG) and Louise Wallace (Lay OCCG Board member, Public Participation &amp; Involvement), regarding planned changes. The letter (dated 20/8) stated that Locality Forums not continuing after September, and forthcoming OCCG/LFC meeting (29/08) would focus only on how PPGs intend to engage with PCNs. LFCs met with OCCG on 29/10 – only Lou Patten and Louise Wallace attended, no note taker. LFCs voiced anger at their proposed agenda items being ignored, and no opportunity to discuss notes from previous meeting. Also concerned that timescale for ending Locality Forums too short, nothing in place to ensure patient voice heard at decision making level. Lou Patten asked LFCs not to communicate changes to members until Locality Clinical Directors have told the doctors (no restriction mentioned in OCCG letter) - agreed to extend funding of Healthwatch support to Forums to end of October.</p> <p>JC - two fundamental changes being driven by NHS England, i.e. creation of PCNs and addressing large deficits run up by many hospitals and CCGs Oxfordshire, Buckinghamshire and Berkshire West CCGs probably merging into a BOB ICS, leaving smaller commissioning function in Oxon, and smaller CCG - should reduce CCGs’ running costs and provide combined patient number of approx.1.8 million. Changes to OCCG constitution will need GPs’ approval – not known if mechanism exists to impose changes if GPs disagree. NHSE want a 20% spending cut, i.e. running</p>

	<p>costs. Three 'Network Areas' - North, City and South - envisaged, South will cover SE and SW, and fit with Vale and South Oxon boundaries.</p> <p>Discussion to take place at SWOLF meeting later on 17/9 on what will happen over the next 6 months. All 12 Practices and a Practice Manager attend the SWOLF – BL attends the SWOLF meeting on behalf of SWOLF - SG attending today's meeting, at JC request, as BL away.</p> <p>SG – LFCs understand that change happens – she has discussed with SELF Chair how SELF and SWOLF could work together – has been invited to join the SE Talking Health page, which is very well used by SELF members. MB explained that she attends a joint SE/SW meeting, she will email a PPG Good Practice Guide (shared recently from SELF) to ET for onward circulation.</p> <p>SG asked members what they would like to do moving forward. There is an opportunity to hold an extra meeting in October, supported by Healthwatch. A short discussion was held about how SWOLF could continue - consensus that group should find a way to carry on, and BC suggested that supportive Practices could maybe offer a room and meetings could rotate around the area. DB suggested meeting at the end of October would potentially be advantageous to see whether any further changes have been made. DP suggested that each PCN should encourage the networks to continue to include patient involvement, by talking to the Clinical Leads to find out what direction is planned. The group were keen to meet in October to provide opportunity to go back to their Practices and PPGs to discuss the future - important to maintain relationships between PPG leads. JC expressed the value of the relationships built up within SWOLF, with group members comfortable to work with each other - the minimum that could be done would be to maintain those links and relationship through PPG leads, through either meeting or an email exchange, as well as linking in with other PPGs within the PCNs as a starting point for how the patient's voice within the PCNs can be heard – important to preserve 'organisational memory'. ET was able to make immediate booking of All Saints Room, Didcot Civic Hall, on Tuesday 29<sup>th</sup> October 2019, 10am to 12.30pm. There will be a single agenda item, followed by discussion.</p> <p>SL mentioned difficulties of communicating directly with patients, due to GDPR – PPG contact database now reduced as Practice had not followed necessary procedures. SG and SL had already discussed this issue – SG emphasised that GDPR was introduced in 2018, and onus was on Practice to keep up to date with requirements – PPGs can use alternative other methods for getting patient consent to PPG contact.</p> <p><b>ACTION</b>  <b>MB to email a PPG Good Practice Guide, that was shared recently from SELF to ET who will in turn email the document to all SWOLF members</b>  <b>SG to ask each active member if they will allow other active members access to their email address, to facilitate information sharing, etc.</b></p>
6.	<p><b>Primary Care Networks</b></p> <ul style="list-style-type: none"> <li>- <b>Updates</b> DB spoke on behalf of the Healthy Abingdon perspective, A meeting will be held on 21<sup>st</sup> November 2019, to explain to everyone about the PCNs - this has been offered to both PCNs in Abingdon, to date one of the PCNs has actively responded.</li> <li>- <b>Forward planning</b></li> </ul> <p><b>OCCG paper and SAMG discussion paper circulated with agenda (discussed under item 5)</b></p>
7.	<p><b>Update or bubbling up issues from PPGs</b></p> <p>GH – following Ear Syringing discussion at previous meeting, saw an audiologist and was referred to Tara Tripp - cost £70 for examination and suction of both ears. Specsavers can provide hearing aids free of charge, with a doctor's note.</p>

8.	<p><b>Healthwatch update</b></p> <p>The next PPG Forum is being held on Wednesday 9<sup>th</sup> October 2019.</p>
9.	<p><b>Any other business</b></p> <p>JC thanked all SWOLF members for their time and their support. SG thanked JC for his support and openness, and presented him with card and gift voucher, on behalf of SWOLF.</p>
	<p><b>Summary of Actions</b></p> <p><b>Item 2</b>  <b>ET asked to make minor attendee amendments to Minutes</b></p> <p><b>Item 5</b>  <b>MB to email a Good Practice Guide, that was shared recently from SELF to ET who will in turn email the document to all SWOLF members</b>  <b>SG to ask each active member if they will allow other active members access to their email address, to facilitate information sharing, etc.</b></p>

## PPG UPDATES

### **DIDCOT HEALTH CENTRE PPG REPORT SEPTEMBER 2019**

The Assistant Practice Manager is still under pressure with admin. and clinical priorities, as the Practice Manager is currently working remotely, with reduced workload.

Shelagh and fellow Committee member Andrew Jones ran the Didcot PPGs stall at the Didcot Community Hospital Fête on Bank Holiday Monday. Several people (across all three surgeries) signed up to become more involved in their PPGs, both for newsletters and consultations/surveys. The Mayor of Didcot visited the stall and suggested that PPG newsletters could be sent to the Council office for circulation to all elected members.

Shelagh has met Stewart Lilly (WMC) and Andrea Warren (Oaktree HC), to discuss working together on Didcot issues. They are hoping to meet with Dr Alex Hart (Clinical Director, Didcot PCN) a.s.a.p. to discuss his plans for patient representation.

Shelagh Garvey, Chair

### **Clifton Hampden Surgery**

We are hoping to work with Marcham Rd PPG and would like to hear from other PPGs in our PCNs.

We are having a piano recital in Clifton Hampden church on Saturday October 26<sup>th</sup> 3pm. All are welcome. Donations towards equipment for our surgery.

Mary Braybrooke

### **PPG update for Abingdon (Stert Street) Surgery**

The PPG have no concerns currently about the service provided and, indeed, judge that the service as being amongst the best in Abingdon and does not suffer from the problems that many surgeries in Oxfordshire suffer from. Patient numbers per GP are higher than ideal but are being coped with another GP is being added to the team to ease the pressures. There are some changes of key staff like the practice pharmacist and 4 more reception staff have been recruited. People can get direct contact with their GP in a timely way without operating any triage system.

We are interested in the development of PCNs in the town and have a meeting with the new Social Prescribers (SPs) to see how they plan to operate and what help we can give them in working with the voluntary sector. For information, there are two PCNs for Abingdon and one has contracted Oxfordshire Mind as the SP while the other has appointed two part-time SPs. Healthy Abingdon is offering to set up meeting of SPs with community groups and the public.

The two Abingdon PCNs are

- Abingdon Central: Abingdon and Malthouse surgeries.
- Abingdon and District: Marcham Road, Long Furlong, Berinsfield and Clifton Hamden Dave Butterworth

#### **WOODLANDS MEDICAL CENTRE DIDCOT**

The Woodlands PPG supporting The Practice with the continued increase in new patients., as a direct result of the new homes being built in the area. It is understood that the other two surgery's in Didcot are experiencing similar patterns. Woodland has seen approximately 40% growth in five years. Plans for expansion needed urgently. Dialogue, guidance & support from CCG mythical. Enquiries from SODC and The Vale od White Horse confirmed that zero CIL contributions for medical support in their Districts.

Various rumours are prevalent regarding the adjoining Didcot Hospital. Actual explanations are anxiously sought.

Progress or otherwise regarding the Great Western Park allocated medical site also remains unknown at this time. However, it is believed that Taylor/Wimpey are assuming that it is not required, and it is likely to be marketed in the new year?

Delighted that Woodlands received a high rating in the recent Oxford Times Public Survey for Patient satisfaction. 85% was recorded. We will strive to improve, despite various hindrances within the political world and enigma of the NHS.

New regulations of the GDPR are, in The Woodlands PPG's opinion, simply bizarre. We feel that SWOLF should, collectively with CCG and other agencies lobby Parliament & the Health Minister to see if some aspects can be diluted for the benefit of patients, primarily, as well as the ability for PPG's to freely communicate and advise patients of immunisation programmes (especially flu vaccinations) It appears under the new regulations such communications to remind patients is considered "selling!"

Fortunately, we are still able to recruit certain medical personnel, but due to an inability to expand premises, as well as patient growth, an interesting outcome for local medical facilities is inevitable.

Stewart Lilly, Chairman,  
Woodlands PPG

#### **Newbury St Practice, Wantage.**

We have chatted to patients in the waiting area about the various things we do representing them and pointing out the possibility of signing up with the practice by email. We Participated in the Church Street practice traffic survey which has been referred to the Stakeholder Group.

Sadly, there appears to be no further progress in the negotiations about the Health Centre expansion despite our inquiries!

No one seems to know if physio (Healthshare) now takes place in the Hospital building as planned.

Janet Parker