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|    | <p>Item 7. PPG membership is steady. There has been interest in the PPG since the publication of the patient leaflets but also fewer contact details following GDPR updates</p>   |
| 3. | <p><b>Update from the Chair / Locality Forum Chairs update</b></p> <p>HVO explained to the group that the Locality Forum Chairs decided not to attend the most recent Locality Forum Chairs OCCG meeting. This takes place every two months and is scheduled in advance. However, on the last occasion neither the Chief Executive nor the Chair of OCCG were able to attend at short notice. The Chairs value having senior representation at these meetings as replacements would not have the same understanding of the issues. HVO expressed the view that the response from OCCG in hearing from patients is not as good as it could be and that it is the role of PPGs to provide patient voice.</p> <p>The group discussed other frustrations they have experienced with patient feedback, including former PAG meetings, and the lack of mechanisms to feedback immediately if systems do not work. The group discussed the MSK Healthshare service as an example, giving examples of problems with the referral process, especially that some of the letters are confusing. AL explained that Healthshare took on a paper based system which has been challenging,</p> <p>NP asked for any MSK Healthshare feedback to be sent to Healthwatch Oxfordshire either by email or through the feedback centre</p> <p><a href="https://healthwatchoxfordshire.co.uk/services">https://healthwatchoxfordshire.co.uk/services</a></p>  |
| 4. | <p><b>NE 'plan on a page'</b></p> <p>JC said the language used makes the Plan on a Page read like a wish list</p> <p>The group discussed Bicester Community Hospital. HVO explained that as it was built under a PFI agreement changing its use would be more complex than otherwise. There is a plan to set up a neighbourhood model of care for patients with complex needs with the aim of improving overall patient care. The hospital would provide a base for the different staff so they could work together more closely. However, the current room layout is not ideal to make this plan work. The group discussed that the hospital is underused, however it is not clear what changes need to be made.</p> <p>The group discussed changes in the way that GP services are delivered, with the use of same day appointments allowing GPs to deal with more complex cases. However same day appointments are not as always accessible to patients in all locations. HVO shared concerns about the possibility of missing problems and that sometimes a GP home visit provides more information. AL said that the model of GP practice is changing with other practitioners providing services to take pressures off GPs. There are practices in SE which offer 15 minute appointments which works well.</p> <p>PP asked about OCCG's responsibilities towards training and encouraging people into careers in healthcare. AL explained that health partners work together on a workforce strategy to train, recruit and retain staff. There is a plan for a health 'passport' for nurses so they can move more easily between services. Employers are looking to work in a more creative way but there are challenges. In Oxfordshire the cost of housing is a barrier to staff retention.</p> |
| 5. | <p><b>NE Commissioning Support Plan</b></p> <p>Item not discussed</p>   |

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| 6. | <p><b>Ear Syringing in Surgeries</b></p> <p>HVO raised the question that ear syringing services are not as widely available now. She described this as a valuable service particularly for older people who can have problems with earwax causing confusion. Payment for the service by the CCG to GPs is £15 as a pre hospital check only. Many practices no longer do routine ear syringing. The alternatives are to refer to ENT or for patients to pay for private services. This situation has been discussed with OCCG with the localities asking for funding for this service.</p> <p>AL added that OCCG has suggested self-management eg olive oil or products that can be bought from a pharmacy. The group commented that this requires confidence and dexterity. If self-care fails practices can offer the service if they choose to or patients can be referred to ENT if self-care measures have been tried.</p> <p>PP suggested having a service where patients could be taught how to carry out self-care.</p> <p><b>Action: AL will check availability of a CCG leaflet about self-care of ears</b></p> |
| 7. | <p><b>Future Planning</b></p> <p>HVO told the group that she does not intend to continue as NELF Chair long term. She said it is an interesting job and it is inspiring to see what people do. She asked the group to help identify a replacement for her. It is not a requirement to have a medical background.</p>   |
| 8. | <p><b>Bubbling up issues from PPGs</b></p> <p><b>PP Bicester</b></p> <p>There has been a liaison meeting with three PPGs which was not minuted but an opportunity to meet. The length of time to get an appointment was the main point raised.</p> <p>Magazines are not provided in the waiting room. Instead patients read the on screen information or look at patient leaflets.</p> <p>PP has been tasked with finding out more about Social Prescribing and has been in touch with Pat Wood from Banbury Citizens Advice. The group confirmed that their bid has been successful.</p> <p><b>JC Montgomery House</b></p> <p>Nothing to report</p>   |
| 9. | <p><b>AOB</b></p> <p>JC queried why it takes several weeks for a patient to receive a letter following a hospital appointment when it is sent much more quickly to the GP surgery electronically for speed. JC additionally complimented the fast track system for a referral which has worked well.</p> <p>ET raised a district nursing query with an example of different nurses treating the same leg ulcer in different ways. AL said that nurses can do a telelink to a hospital to get advice on leg ulcers which is improving their care. There has been training for practice to improve their knowledge of treating conditions such as leg ulcers. AL advised cases could be flagged up to OCCG.</p> <p>HVO told the group about the developing older peoples strategy for Oxfordshire and provided</p>   |

NELF Meeting 1<sup>st</sup> August 2018 Community Room Tesco Bicester

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|     | <p>information. She asked group members to go back to their PPGs to involve them. A Talking Health login is needed.</p> <p><b>Action: Group members to talk to their PPGs about the Oxfordshire Older People's Strategy</b></p> |
| 10. | <p><b>Dates of next meeting / events</b></p> <p>7<sup>th</sup> November 2018 Tesco Bicester 6pm – 8pm (venue tbc)</p>   |
|     | <p><b>Summary of Actions</b></p> <p><b>Item 6: AL will check availability of a CCG leaflet about self-care of ears</b><br/><b>Item 9: Group members to talk to their PPGs about the Oxfordshire Older People's Strategy</b></p> |