Minutes. PPPWO
10th April 2018 10.00 – 11.00am WODC Offices, Wood Green, Room 1

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<thead>
<tr>
<th>Name</th>
<th>Organisation / LF</th>
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<tbody>
<tr>
<td>Graham Shelton</td>
<td>GS Nuffield PPG / PPPWO Chair</td>
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<tr>
<td>Peter J Branson</td>
<td>PJB MS Society; West Oxon / PPPWO Vice Chair</td>
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<td>Madeleine Radburn</td>
<td>MR Windrush PPG / PPPWO Vice Chair</td>
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<td>Dr Amar Latif</td>
<td>AL OCCG Deputy Locality Clinical Director</td>
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<td>John Simpson</td>
<td>JRS Retired GP</td>
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<td>Roy Thomas</td>
<td>RT Eynsham Medical Group</td>
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<tr>
<td>Judith Wardle</td>
<td>JW Action for Carers</td>
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<tr>
<td>Jane Southworth</td>
<td>JS Deer Park Campaign Group</td>
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<tr>
<td>Sue Smith</td>
<td>SS Charlbury PPG</td>
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<tr>
<td>Kathy Broughton</td>
<td>KB Charlbury PPG</td>
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<td>Nicola Perrett</td>
<td>NP Healthwatch Oxfordshire - minutes</td>
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1. **Welcome and apologies**  
GS welcomed the group and Dr Amar Latif. Dr Latif introduced himself to the group and explained his work as Deputy Clinical Lead for WOLG and as clinical lead for long term conditions. The group introduced themselves to Dr Latif and explained their various roles in health.

Apologies from:  
Jan Cottle  
Jacqui Wright  
Fergus Campbell  
Deirdre Myatt

2. **Minutes of last meeting**  
The group agreed the minutes.

3. **Matters arising**  
Laura Spurs from Westmed has been invited to future meetings.  
MR has circulated the summary locality plan written to inform her PPG.  
PB is has asked about the mental health scheme in Chipping Norton and is waiting for feedback.  
Eynsham Village Hall has been booked for the carers event in June.  
JS will remind Brenda Churchill to share her PPG’s survey questions.  
MR link to Oxford Health website is in minutes and asked the group to look at the new site and provide any feedback.  
GS requested that information from Jacqui Wright about the May Witney Dementia event be circulated with the minutes.

4. **Introduction from Dr Amar Latif**  
Covered in Item 1

5. **Topics to cover with Lou Patten**  
Lou Patten and Julie Dandridge will be attending the additional PPPWO meeting on Thursday.  
AL advised the group that Lou Patten has experience of delivery Integrated Care Systems (formerly Accountable Care Organisations). These aim to ensure incentives are aligned so that the whole system makes the best use of the money available.  
Buckinghamshire has approval to take an ICS forward and is one of the first. It is uncharted Territory and what it means practically is not yet defined, eg governance.  
AL advised that Lou Patten is influential, is in listening mode, and has ideas from what has been done elsewhere and is an advocate for patients.  
JW endorsed this view from her experience.

The group raised questions they would like to take forward at the meeting on Thursday:

- GS What is being integrated – is it care as well as health?  
- GS How much freedom will there be to act – how much is decided by money?  
- SS How will means tested and non means tested services be aligned?  
- JRS Why can’t a GP talk directly to a consultant about a referral – there should be personal as well as system integration.
- KB How will cultures be brought together? Will there be issues about how money is shared?
- JS How is patient demand being met in Witney?
- JS What provisions are there for patients to be referred to specialists by GPs
- GS What are the objectives? What are we trying to improve? What doesn’t work currently?
- KB Will the person with authority to make decisions be at the meetings to decide new working practices?
- MR There needs to be better communication, listening and understanding eg District Nurses have a new system of working but GPs have not been advised
- MR There needs to be less duplication – eg there are four hospital at home services in Oxfordshire. They are all called the same thing but are different in what they offer
- MR There is a need for integrated patient information
- MR Services should be working cooperatively and together and not in competition
- SS What has happened to the integrated locality team? Has this model worked and if so how can the learning be used? MR noted there are two teams by this name, one in the NHS and one in social services that work separately
- PB Does the public have confidence in the CCG given that handling of consultation has been flawed? Is it evidence based when so few people are involved? Feedback to the public is poor.
- GS Fragmentation of services and short term funding objectives mean plans are not patient centric and focussed on keeping well. There needs to be more focus on what is important to patients.
- RT Accountability – plans are very long and unless someone polices them the plan doesn’t necessarily happen eg communication between health and social care on discharge.
- RT Do delays in the system cause additional patient need?
- JW Patient Advisory Groups are valuable in communications
- JS How do patients who are suffering quietly get heard?
- GS Engaging with patients in a timely, systematic way with different age groups etc. How we measure what patients think is important.

The group discussed the new Healthshare MSK system and some of the issues that have been faced. There are some diagnostic physiotherapy appointments available at the Hub

AL followed the group’s conversation by saying that GPs can speak to someone at the JR on the same day if it is an emergency. Also that with the new MSK system there is good evidence that patients can be treated more quickly which is better for the patient.

JS added that there were no chemists open in Witney on Easter Sunday. There were six available across the county.

AL told the group that the concerns raised will be familiar to Lou as she is used to talking to patient groups. He suggested
- Coming to meeting with suggestions for solutions
- Being aware of population growth/housing
- Addressing the challenge of primary care estates – ie surgery size / capacity to increase

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<td><strong>6.</strong></td>
<td><strong>Public and Patient Preference Study</strong></td>
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<td>The discussion about what we are trying to achieve from a patient perspective is to be carried forward.</td>
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<td><strong>7.</strong></td>
<td><strong>June public event in Eynsham</strong></td>
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<td>Kay Francis is leading on this</td>
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8. **Antibiotics public lecture**  
   Carried forward to 22\textsuperscript{nd} September

9. **Health Fair**  
   JW to talk to Dr Jonathan McWilliam

10. **Governor updates (MR)**

   Oxford Health are redesigning their website. Committee members are asked to visit www.oxfordhealth.nhs.uk and hunt for a topic which they feel they might need in the future. MR would be grateful for feedback with a brief note of how they got on, especially if they have any problems. Also feedback is welcome on what they think of the website as a whole.

   The Trust is undergoing a re-structuring at the moment which MR hopes will give Oxfordshire community issues more clarity and a higher priority. The Governors are now more active within the structure and are chairing their own sub-groups where they feel they can be more challenging and obtain better information.

11. **PPG updates**

   **SS Charlbury**
   There have been concerns with GP recruitment as a senior partner is approaching retirement. They feel vulnerable as a small practice. A newsletter, an open day at the surgery and a simple questionnaire are planned. SS asked if other PPGs can make contributions to their newsletter.

   **GS Nuffield**
   They are working on a newsletter, a survey and their website

   **RT Eynsham**
   Eynsham PPG is meeting next week.

   **MR Windrush**
   The PPG is now producing the Practice Leaflet (which is given to all new patients at the Practice) in an effort to provide greater support to the staff by taking some work from them. MR is particularly pleased to advise that the electronic group signed up member number 200 yesterday.

12. **HWO update**  
   Available via link

13. **AOB and date of next meeting**

   AL advised that GPs have experienced some difficulties with online pharmacy services and is concerned that their marketing implies a recommendation

   Future Meetings to be held at WODC Wood Green:
   
   - Tues 8 May 2-4pm. Room 2.
   - Tues 12 June 10-12. Room 1
   - Tues 10 July 2-4. Room 2.
   - Tues 7 Aug 10-12. Room 1
   - Tues 11 Sep 2-4. Room 2
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<th>Date</th>
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<tr>
<td>Tues 9 Oct</td>
<td>10-12</td>
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<td>Tues 13 Nov</td>
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<td>Tues 11 Dec</td>
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