

SUBJECT TO RATIFICATION AT THE NEXT MEETING

**PATIENT AND PUBLIC INVOLVEMENT FORUM**

**ACTION NOTES 6 JUNE 2018**

**BLACKPOOL CCG, BOARDROOM, BLACKPOOL STADIUM**

Present: (HW) Helen Williams – Governing Body Member – Chair  
 (CB) Catherine Bentley, Equality and Inclusion Business Partner, CSU  
 (JG) Janet Grime, Performance & Quality Specialist, CSU  
 (NS) Nathan Skelton, Communication & Engagement Officer, BCCG  
 (SS) Sujata Singh, CCG GP Member  
 (LR) Leanne Rudnick, CCG GP Member  
 (LM) Linda Markey, Director, URPotential  
 (AH) Andrew Heath, Blackpool Teaching Hospitals  
 (STB) Sheralee Turner-Birchall –Healthwatch Blackpool - Empowerment  
 (NC) Nick Colledge –Healthwatch Blackpool - Empowerment  
 (DE) Diana Evans – Blackpool Advocacy Hub Empowerment  
 (SM) Sandip Mahajan – Scrutiny Officer, Blackpool Council

In Attendance: (YJ) Yvonne Jones (note taking)  
 (LJT) Louise Talbot – Secretary to the Governing Body (for Item 6)

SUBJECT	ACTION TO BE TAKEN	ACTION BY
1. Welcome and Introductions	HW welcomed everyone to the meeting and introductions were made.	
2. Apologies for Absence	Apologies for absence had been received from Lesley Anderson-Hadley.	
3. Declarations of Interest/Conflicts of Interest relating to the items on the Agenda	No declarations of interest/conflicts of interest were declared. HW asked members to declare any interests that may arise during the meeting.	
4. Action Notes of last Forum held on 7 February 2018	Subject to a minor amendment to Item 5, the notes were approved as a correct record.	
5. Matters Arising	<b>Item 15 – Accessible Information at the Trust</b> – JG advised that she had not had feedback from AH and it was agreed that AH would contact JG outside of the meeting regarding this information.	<b>JG/AH</b>

	<p><b>Item 6 – Terms of Reference Review</b> – LJT advised that the Terms of Reference had been discussed at the Quality &amp; Engagement Committee. The members of that Committee were in the main happy with the amendments that had been made, although the Head of Safeguarding felt that the Terms of Reference seemed to focus on adults and did not include children. It had also been suggested that there should be some reference to carers. After discussion it was agreed that people should be changed to ‘people of all ages including children and young people’s issues. STB also requested that acronyms be replaced with the complete wording. It was also suggested that in 1.4 the word population should be changed to people and carers. Members agreed to this. LJT made a note of these changes and would feed this back to the Quality and Engagement Committee. HW advised that she was meeting with Fylde &amp; Wyre on Friday with a view to combining our meeting with their PPE, therefore, the Terms of Reference might need to be changed again shortly.</p> <p><b>Item 8 – Knee PROMS</b> – JG advised that she was looking in to how the Trust’s performance compared to other Trusts and would bring back to the next meeting. AH mentioned that there had been some cancellations of procedures therefore this could skew the figures.</p> <p><b>Item 8 – Always Events</b> – STB commented that this should read John’s Campaign and YJ would amend this in the minutes.</p> <p><b>Item 10 – Care Home Model</b> – JG to follow up with Calum Dixon outside of the meeting regarding the list of care homes that participated in the pilot in order that Healthwatch could include them on their Enter and View visits.</p>	<p>LJT</p> <p>JG</p> <p>YJ</p> <p>JG</p>
<p><b>6. Terms of Reference Review</b></p>	<p>This was covered under matters arising.</p>	
<p><b>7. Communication &amp; Engagement</b></p>	<p><b>(a) Update</b></p> <p><b>Policy Harmonisation</b> – NS reported Blackpool CCG is working in partnership with the other seven CCGs in Lancashire to review clinical policies that they had adopted from the previous Primary Care Trusts.</p> <p>It had been agreed that these policies should be reviewed to:</p> <ul style="list-style-type: none"> <li>• Ensure a consistent and fair approach</li> <li>• Develop a set of principles and policies against which decisions about care and treatment can be made</li> <li>• To develop collaborative policies across the eight CCGs in Lancashire.</li> </ul> <p>The latest policies to be reviewed are:</p> <ul style="list-style-type: none"> <li>• A new policy for the supply and funding of insulin pumps for patients with Diabetes Mellitus</li> <li>• A new policy for the provision of continuous glucose monitoring</li> </ul>	

- and flash glucose monitoring for patients with Diabetes Mellitus
- A policy for the management of back pain – spinal injections and radiofrequency denervation

NS had provided links to all three policies and recommended that these be read before giving feedback. Comments should be submitted by Friday 29 June 2018.

NS advised that they had held a widely publicised joint engagement event at the Open Forum which was held at 6.30 in Kirkham, and only three people attended. STB asked if the attendees had been asked if the venue was suitable as this might have been why attendance was so low. NS did not know if this question had been asked.

**Blackpool Low Vision Committee** – NS explained that he attended this quarterly Committee where issues for people with visual impairments are discussed. The following comments had been raised and these had been reported back to the CCG:

- When visiting Whitegate Drive out of hours service for an emergency appointment a prescription is sometimes given however the pharmacy on site is not able to fill the prescription resulting in travel to another pharmacy. For people with visual impairment this is very difficult.
- The Trust was praised for its handling of a patient with a visual impairment who was staying in hospital.
- One person wanted a referral to Manchester eye hospital but for some reason wasn't allowed one (more details on this have been requested so checks can be made).

**Adult Continence Survey** – NS reported that this survey has been put back again.

**GP Extended Access Survey** – NS reported that this had closed on 25 May 2018 with over 260 responses. The report is now being prepared and the findings will be compared with Healthwatch's enter and view reports.

**Trackers** – NS had provided reports for both April and May 2018.

HW remarked on the increase in numbers of followers on Twitter.

NS took members through the Communications & Engagement Campaign Planning which covered:

- Adult Continence,
- Bowel Cancer Screening,
- Cancer Support Calendar,
- Extended Access (survey closed 25 May),
- CCG Annual Report which was an easy read version which would be published soon and sent to NHS England,
- NHS Diabetes Prevention Programme
- Summer Awareness Campaigns.

	<p>HW picked out the item on CCG Services reported under Your Voice and commented that this was mistaken identity.</p> <p>Regarding the complaint under Spire Fylde Coast Hospital about not getting a response from anyone about their complaint. NS reported that this had been picked up from the Patient Choice website. JG to liaise with NS outside of the meeting.</p>	<b>JG/NS</b>																																								
<b>8. Friends and Family Test Position</b>	<p>AH presented the new style Patient Experience Report for April 2018.</p> <p><b><u>Summary of Complaints/Compliments/Concerns - Key Issues</u></b></p> <table border="1" data-bbox="375 689 1251 1061"> <thead> <tr> <th></th> <th>Apr 18</th> <th>March 19</th> <th>Apr 17</th> </tr> </thead> <tbody> <tr> <td>Written Formal</td> <td>50</td> <td>38</td> <td>23</td> </tr> <tr> <td>Verbal</td> <td>8</td> <td>18</td> <td>11</td> </tr> <tr> <td>Compliments</td> <td>265</td> <td>223</td> <td>407</td> </tr> <tr> <td>Informal Concerns</td> <td>42</td> <td>37</td> <td>78</td> </tr> <tr> <td>General Enquiries</td> <td>322</td> <td>316</td> <td>150</td> </tr> <tr> <td>Listeners</td> <td>94</td> <td>183</td> <td>157</td> </tr> <tr> <td>FFT Responses</td> <td>4119</td> <td>3904</td> <td>4301</td> </tr> <tr> <td>FFT Recommend</td> <td>96.63%</td> <td>96.75%</td> <td>97.21%</td> </tr> <tr> <td>Care Opinions</td> <td>10</td> <td>11</td> <td>18</td> </tr> </tbody> </table> <p>AH reported that there had been a slight increase in the likely to recommend. There had been positive comments received by the Volunteers visiting wards. STB enquired as to why the responses breakdown figures were in percentages and AH responded that they were only required to report percentages.</p> <p>JG reported that for the John's Campaign there had been a lot of positive feedback from staff.</p> <p>AH explained that Listeners are a group of 15 volunteers who visit all wards within the year and had themed questions to ask. The volunteers gave a couple of hours each week. Limited but really good.</p> <p>When asked AH explained that the information gathered was shared with commissioners.</p> <p>STB commented that she would be interested in how this would be tested with the public. AH replied that it was being tested every day on the wards and a yearly survey goes out. AH also commented that the National survey was clunky and they were receiving better responses from this.</p> <p>HW commented that she liked the report.</p>		Apr 18	March 19	Apr 17	Written Formal	50	38	23	Verbal	8	18	11	Compliments	265	223	407	Informal Concerns	42	37	78	General Enquiries	322	316	150	Listeners	94	183	157	FFT Responses	4119	3904	4301	FFT Recommend	96.63%	96.75%	97.21%	Care Opinions	10	11	18	
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<b>9. Patient Story</b>	<p>The patient story was about a young man called Scott McCracken who had suffered sight loss due to a tumour on the pituitary gland. He was very</p>																																									

	<p>pleased with the treatment he received from the Diabetes Team at BTH. He has now been fitted with an insulin pump which has regulated his bloods and he has had a lot of support and guidance.</p> <p>AH commented that the Diabetes Team have had a lot of positive feedback and are shortlisted for the 70<sup>th</sup> Birthday Awards.</p>	
<b>10. Healthwatch Update</b>	<p>STB and NC reported that they had only been in post since the previous week. HW mentioned that Healthwatch Lancashire Ltd had received funding to the end of March 2018. They did not re-tender and the contract was handed back to Empowerment to hold until the end of March 2019.</p> <p>STB and NC each gave some background on what they had been involved in previously. An update report would be available for the next meeting.</p>	
<b>11. Complaints</b>	<p>As the report had been circulated JG would take this as read.</p> <p>At the last meeting it had been suggested that the complaints be noted by theme but due to the low number of CCG complaints this would make it very easy for the patient to be identified. JG was still working on how to report this. JG would bring the Year End Report to the next meeting or email it out to members. CB commented that the report looked good.</p> <p>AH and JG to liaise over complaints.</p> <p>HW – actions taken missing. JG to look at this.</p> <p>DE to ask if their complainants wanted to share their experiences with the group.</p> <p>Discussion ensued regarding bringing case studies to the meeting. DE to liaise with Healthwatch to see if they could get someone to come and share their experiences at the meeting.</p>	<p><b>JG/AH</b></p> <p><b>JG</b></p> <p><b>DE</b></p> <p><b>DE/STB/NC</b></p>
<b>12. Equality &amp; Inclusion EDS Report</b>	<p><b>Equality Delivery System (EDS)</b></p> <p>The CCG's 2018 grading assessment will focus on EDS Goal 1 Better Health Outcomes, the EDS will be graded by the CCG's PPI forum at the October meeting.</p> <p>Suggested proposals of Case Studies for EDS Evidence to support the EDS Goal 1 Better Health Outcomes were made to the forum</p> <ul style="list-style-type: none"> <li>• Outcome 1.1 A range of Equality Impact Assessment and how the CCG ensure services are delivered considering the protected groups</li> <li>• Outcome 1.2 Eclipse and Continuing Health Care</li> <li>• Outcome 1.3 Eclipse and Stroke</li> <li>• Outcome 1.4 Safeguarding and Serious Untoward Incidents</li> <li>• Outcome 1.5 Bowel Cancer Screening</li> </ul>	

	<p><b>Equality and Inclusion Strategy 2017/2018</b> The strategy has been updated with some very minor changes and uploaded onto the CCG's E&amp;I page on the website.</p> <p><b>E&amp;I Training</b> The CCG's Governing Body undertook an E&amp;I Development session in February 2018 E&amp;I mandatory training has been arranged for 4 dates during November 2018</p> <p><b>E&amp;I Annual Report 2017/2018</b> This report is awaiting final approval by the Governing Body in July, the report will then be published on the CCG's website</p> <p><b>Equality Impact and Risk Assessments (EIRA's)</b> An overview was provided in the E&amp;I update on the status of all the EIRA's that the CCG are undertaking and of the Pan Lancashire Clinical Policies and STP EIRA's</p> <p><b>Guidance for Ramadan (MLCSU)</b> A guidance document had been produced by the CSU and distributed to the CCG's to be shared with CCG staff via the staff newsletter.</p> <p><b>Workforce Race Equality Standard (WRES) Report 2018</b> WRES report was presented and was approved to be presented to the Quality and Engagement Committee on 10 July 2018. Statistics presented in the report were not much different to the 2017 WRES report.</p> <p><b>Lancashire LGBT Awareness Session</b> Dr Lewis Turner, Lancashire LGBT will be attending the Clinical Leads meeting in September to deliver a session on raising awareness to the Clinical Leads on the issues and health inequalities relating to people who are LGBT and the work that Lancashire LGBT do.</p> <p>CB would provide YJ with the contact details of Dr Turner in order to email and find out if they had a representative to replace Travis Peters who had moved on to another organisation.</p>	<p>CB/YJ</p>
<p><b>13. Health Scrutiny Update</b></p>	<p>SM provided a revised Work Programme for 2018/19.</p> <p>SM reported that they had been looking at mental health recently and felt that it was going in the right direction – they aspired to a 0% target on suicides. They had received many compliments about the Directory of Services known as FYI.</p> <p>The Health Scrutiny had an action plan to tackle domestic abuse in three of the deprived wards in Blackpool.</p> <p>On the subject of Obesity SM reported that this appears to be going in the right direction.</p>	

	<p>SM commented that the Stop Smoking Campaign finished seven months ago. A new service was being looked at.</p> <p>It had been noted at the Scrutiny Committee that more young people were turning up at the Carer Centre. SM asked if the Neighbourhood Hubs were monitoring progress. HW advised that this was being picked up by a steering group.</p>	
<b>14. Blackpool Advocacy/ Empowerment Update</b>	<p>DE had asked a colleague to provide a report on the Health Complaints received by the Blackpool Advocacy Services. This report covered activity from April 2017 to March 2018. DE asked what the members would find useful and HW mentioned that it would be useful to know the key themes of the complaints. DE would give a lot more feedback at the next meeting.</p>	<b>DE</b>
<b>15. Minutes for Relevant Groups</b>	<p>Copies of minutes for the PPNG held on 23 May 2018 and Adults Social Care and Health Scrutiny Committee held on 9 May 2018 had been provided for information.</p>	
<b>16. Volunteer Expenses Policy</b>	<p>This had been provided for information only. It had been approved by the Governing Body.</p>	
<b>17. Any Other Business</b>	<p><b>Joint AGM</b> – HW reminded members that the Joint AGM was being held on 5 July 2018 commencing at 9.30am in the Education Centre at BTH. All were welcome to attend.</p>	
<b>18. Declaration of Confidentiality</b>	<p>That with the exception of any agreed items to be submitted to the CCG Governing Body meeting held in public, all other items should be regarded as confidential.</p>	
<b>19. Date Time and venue of Next Meeting</b>	<p>The next meeting would be held on Wednesday, 1 August 2018 at 2.00pm in the Pitch View Room, Blackpool CCG.</p>	