**Newcastle Gateshead Clinical Commissioning Group**

**Newcastle West Patient Forum**

**Thursday 16 March 2017, 2- 4pm**

**Beacon Centre, Westgate Road, Newcastle.**

**Minutes**

**Attendees**

David Forrester (Chair) Denton Turret Medical Centre

Susan Wheatley Practice Manager Cruddas Park Surgery

Mandy Kirton Practice Representative Cruddas Park Surgery

Malcolm Oliver Patient Representative Throckley Primary Care Centre

Suzy Ballantyne Patient Representative Denton Turret Medical Centre

William Lynn Patient Representative Parkway Medical Group

S H Patient Representative

Dan Duhrin Involve North East

Rev J Gordon Wynne

**Apologies**

Linda Taylor Assistant to PM Throckley Primary Care Centre

**In attendance**

Heather Harrison (minutes), Alison Thompson CCG, Hilary Bellwood CCG, Barbara Douglas Quality of Life Partnership, Lauren Hoy Quality of Life Partnership

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| **Item** |  | **Action** |
| **1** | **Welcome and Introduction** David welcomed everyone to the meeting. Numbers are still dwindling, if messages for the CCG were taken back to Practices PPG groups then it may encourage better participation. |  |
| **2** | **Notes from Previous Meeting** The previous minutes after some minor amendments were agreed to be an accurate record of the meeting |  |
| **3** | **‘You said, we did’**Alison updated the group with work that has been on-going recently.1. Little Orange Book – this has been sent out to many people and is a great resource for parents of young children, ages 0 – 5 years, it is now available to download from the CCG website click this link to take you to the download page <http://www.newcastlegatesheadccg.nhs.uk/wp-content/uploads/2017/02/CCG_Booklet_web-1.pdf>
2. Engagement Event last November at the Lancastrian Suite in Dunston looked at the existing structure of meetings and how groups will continue in the future, whilst making the best use of the resources that we have. Chris Piercy is currently reviewing the report Involve North East produced from the day and it is hoped to share information with the current groups soon.
3. End of Life engagement with seldom heard groups work is now finished and Involve North East have produced a report on the work. It was a really positive piece of work with our partners talking to over 220 people. A meeting is scheduled next week to look at recommendations and timescales.
4. Deciding Together work that was done last year has now finished the consultation process, we are working with NTW and providers to look at the priorities and timescales for implementing the Deciding Together decision.
5. Governing Body meetings are open to the public and you are all invited to attend if you wish to do so, the next meeting is on 28 March 2017 and the papers are on the CCG website <http://www.newcastlegatesheadccg.nhs.uk/about-us/governing-body/meeting-papers-and-dates/>

Various headlines from national newspapers were discussed with the following questions being asked.AT/HH will take these questions back to the CCG:* Different ways of communicating with patients is sometimes difficult, it was felt that more staff should be trained in the use of BSL (British Sign Language) especially for end of life patients who may need to communicate and where a delay in finding an interpreter could cause extra distress.

Foreign nationals, what is the status now as the how payments are received for people accessing care who do not live in the UK?**Question 1**A recent article stated that the eight-minute target for ambulances to reach life-threatening emergencies is being relaxed in a trial that lets paramedics arrive as quickly as they can. Is this true in Newcastle and Gateshead? How does the CCG monitor ambulance response times? What is our average response time?**Response**This link <https://www.england.nhs.uk/ourwork/qual-clin-lead/arp/> details the process/protocol that NEAS follow for our area.  The letter from Keith Willetts will be helpful to read also.**Question 2**A recent article stated that almost half of hospitals are failing to meet Government health and nutrition standards for the food they serve and that a  Department of Health review found that only 55 per cent of hospitals in England are 'fully compliant' with nutrition standards set by the British Dietetic Association. What is the situation in Newcastle and Gateshead? What is the level of complaints and how does the CCG/Trust deal with them? Is below standard food an issue in our area?**Response**This isn’t a commissioner contract issue and is the responsibility of each provider. Consequently, the CCG has not received any complaints about food. Providers do ask about food in their patient surveys and this would be reported to their boards if any issues or themes were identified. There has been a CQUIN for the past 2 years which seeks to reduce “unhealthy” food in hospital outlets (i.e. high sugar/ fat content), but this doesn’t extend to the meals provided on wards.**Question 3**Another article states that according to a  study by the Health Service Journal,  214 hospitals in the UK failed to meet their own safe nurse-staffing levels for daytime shifts in October 2016. Some 190 – 85 per cent – did not hit their targets for night-time shifts.  What is the situation on staffing levels in our area?**Response**Newcastle Hospitals publish all their staffing levels in monthly reports on their website and are discussed at the Trust Board and at the regularly quality review group meetings with the CCG. Local Trusts acknowledge that recruitment of nursing and care staff is challenging, however they assure us that the processes in place for monitoring staffing levels are robust.**Question 4**In an article about mixed sex wards it states that the number of patients placed on mixed-sex wards has soared by 70 per cent in a single year despite a Government promise to cease putting patients in mixed sex wards. More than 7,100 patients were put on a mixed ward in 2016 which was 70 per cent higher than the number in 2015 and three times higher than in 2014.. Are mixed wards making a comeback? What’s the practice/status of mixed wards in our area?**Response**Mixed sex accommodation is not an issue locally. None of the local acute hospitals have reported any for some time (at least 2 years to my knowledge**Question 5**A recent article says that NHS doctors have been told not to call pregnant women ‘expectant mothers’ because it might offend transgender people. The warning comes in official guidelines issued by the British Medical Association to its 160,000 members, which says mothers-to-be should be referred to as ‘pregnant people’ instead. The controversial advice to doctors in hospitals and general practice comes just weeks after it emerged that a patient who was born a girl but is changing to a man put his operation on hold to have a baby. Have health professionals, including GPs been told to follow this advice in our area?**Response**We have no plans to monitor its adoption. |  |
| **4** | **Information Now Website**Lauren Hoy from Quality of Life Partnership gave a presentation about the new Information Now website, the website was soft launched on Tuesday for people over the age of 50. This is a very good resource for people to find information about Newcastle. It is a one stop shop for finding out what is happening in the area, there are lots of contact details for companies and organisations with groups and courses that people might like to access. It was felt to be a very good point of reference for people of all ages. As it is only online access, it was felt that Age UK would be a good place to ask for telephone help for those that do not have internet access. The CCG and Council fund this website and it would be good to promote this via PPGs. The official launch of the website is 26 April. The link to the website is <http://www.informationnow.org.uk/>  |   |
| **5** | **Connected People Conference update** Barbara Douglas gave an update about the connected people event that took place last year. It was initially going to be called Social Isolation, but felt it would be better to show how people and groups could better connect with each other and maintain good quality relationships. Social relationships are important for health and wellbeing no matter our age. Work was undertaken with groups and 19 posters were produced, 140 participants attended and worked together during the day. The aim was to raise awareness of the importance of social relationships and how this impacts on our wellbeing. There was positive feedback received and people made new connections. Some new initiatives were started, one being Canny Cities, which are safe places around the city for people feeling they are having a bit of a wobble, to stop and gather themselves if they are having a difficult time. Alastair Cameron at Launchpad has been instrumental in getting this off the ground he can be contacted on the following link <https://launchpadncl.org.uk/2016/09/25/next-steps-and-next-meeting-for-canny-city/> . (Canny City – Alisdair Cameron at Launchpad - alisdairscameron@gmail.com) Making waiting rooms a more welcoming place for people to make new contacts. On-going discussions are still taking place on how we measure connectivity at population level. To find out more about this please visit <http://www.newcastlegatesheadccg.nhs.uk/get-involved/connected-people-connected-communities/> The details for the Meditation Centre are:Rev Dr Nicholas Buxton – buxton.nicholas@gmail.com   Their website is <http://www.justmeditation.org/> |  |
| **6** | **Draft Sustainability and Transformation Plan (STP)**Hilary Bellwood returned to the forum to update members on what is happening with the STP work. After the last meeting the plan was updated to reflect the language changes suggested. There are 4 distinct work streams 1. Optimising the Acute sector
2. Communities and Neighbourhoods
3. Mental Health
4. Prevention

Each work stream is meeting and developing their own plan and meeting with providers and stakeholders. The feedback is being reviewed and will be put into a summary document. For the next phase of consultation the CCG will work with Health Watch and the Voluntary Sector are part of the planning processes. We hope to have another update of the plan by May and this will be sent out again for comments, with the final plan hoping to be finalised by July, which will then be sent out for consultation. |  |
|  | **Any other business**As there was no more business to discuss the meeting was closed. |  |