

Notes of the meeting of the North Tyneside CCG Patient Forum held on 23 July 2020 held by Microsoft Teams videocall between members from 11.00am.

Present: The meeting was chaired by Eleanor Hayward

Practice Representatives:

Beaumont Park	Victoria Mayes
Priory Medical Group	Susan Dawson
Priory Medical Group	Sandra Gillings
Collingwood Medical Group	Patrick Mayne
Northumberland Park	David Hall
Whitley Bay Health Centre	Heather Carr
49 Marine Avenue	Pat Bottrill
Wellspring Practice	Gillian Bennett
Park Parade	Ray Calboutin

In attendance:

Community & Health Care Forum	Michele Spencer
	Carole Reed
North Tyneside CCG	Lesley Young Murphy
North Tyneside CCG	Wally Charlton
North Tyneside CCG	Lynn Craig

Apologies

Collingwood Surgery	Peter Maitland
Wellspring Practice	Val Telfer
Whitley Bay Health Centre	Judy Scott
Priory Medical Group	Anne Carlile

Welcome and introductions

Eleanor thanked members for attending.

Confirmation of quoracy

It was confirmed that the meeting was quorate.

Declarations of interest

There were no declarations of interest.

Notes of the previous meeting dated 14 May 2020

The members had a copy of the previous meeting's notes which were agreed as a true record.

Matters Arising

Lesley informed the members she was happy to take any questions they may have in relation to the COVID 19 answers given to the questions members submitted.

Q What is happening with the Cancer Treatment is it true that radiotherapy has been cancelled due to the pandemic?

A Any cancer treatment has an impact on the immune system the NHS does not have a blanket approach to this, some treatments have been delayed but, in the circumstances, it is the right thing to do. All cancer screening programmes will increase, and this will be a graduated response. The screening programmes have a recovery plan in place.

CCG update

Lesley informed members that the LIVI information leaflet will be delivered to all households in North Tyneside within the next two weeks.

The Future Care Programme Board comprises partners in the voluntary sector, Newcastle hospitals, CNTW, North Tyneside Council, the CCG and Healthwatch. Service providers discuss and decide priorities. As the Covid pandemic continues planned care has been temporarily paused except for the two week wait patients.

Lesley explained that she thought the system has coped incredibly well in North Tyneside during this difficult time and that mainly the right decisions had been made. Staff have worked together to overcome difficulties and everyone has stayed focused. The key is to have the right staff at the right time and place with the necessary skills. There is a meeting next week with NECS to look at common themes to ensure the right plans are in place. The CCG is also preparing for winter and potential cases of flu in light of a possible second wave of the Covid virus. Lesley is very proud to have been part of the North Tyneside system, everyone has been working together to ensure the best possible patient care. The pandemic has actually improved the system, and everything has been carried out quickly and decisively in North Tyneside. This is not to say that lessons haven't been learned but staff have done a phenomenal job, everyone will reflect on what was right and wrong.

Heather informed the members that she attended a virtual governors' meeting last night and Sir James Mackey gave a very upbeat progress report on the Northumbria Healthcare Trust and where things are going, his message came out that things are gradually getting back to normal.

Lesley said that because of the Level 4 incident, budgets had been changed within health and social care and the cost has to be met. The services are free at the point of delivery, but each has a cost, from a CCG point of view it was acknowledged that some planned investments have had to be put on hold. The consequence is that programmes will continue but systems will be reconfigured. In the longer-term hospitals will have block contracts, which will include mental health, instead of payment by results because the more people who are seen the more expense is incurred. Costs have been incurred to pay for PPE among other expenses, guidance plans are still to be finalised in terms of finance. A step forward will be taken within NTCCG, Newcastle, Northumberland and Gateshead to achieve an integrated care system. Transformation in IT will be GPs priority and support will be widened from a patient aspect.

Pat asked Lesley if she thought the block contracts were a positive or negative? Lesley replied she definitely thought it was a positive as it gives more stability to keep patients out of hospital and provides a bigger infrastructure and there are more local opportunities with a block contract after the Level 4 incident.

Lesley said CCG staff are continuing to working remotely, at home and in the office where necessary. The CCG have carried out a full risk assessment and everything is carried out in line with guidance.

Eleanor thanked Lesley and the CCG staff for all their work efforts during the pandemic and said they had done a remarkable job.

Working Groups Briefing

The working groups have all been meeting on MS Teams during the pandemic. Dr Katherine Hall has chaired the End of Life working group, Gillian attended the last meeting and it was mainly dominated by Covid -19 discussion rather than End of Life. The Comms and Engagement working group has been meeting once a month and have produced and distributed the latest newsletter, the next issue for September is in draft form, there is also a bulletin which is produced alongside the newsletter specifically for all practice PPG members, Michele gave all credit to the members for their time effort and enthusiastically embracing the technology. The self-care working group's last meeting was cancelled and because it is quite a hands-on active group that is hard to carry out on a Teams call.

Some members attended the recent Strata presentation and although it didn't focus on North Tyneside services it gave an insight into how the system would work. Wally said he was more than happy to discuss issues around this. Members thought the demonstration should have been more North Tyneside based rather than based around Montreal, Canada which is their head office. Some members said they had struggled to understand the facts. Wally explained that Strata is basically a capacity and demand tool to ensure patients go to the right place at the right time and to transfer information efficiently and quickly.

Lesley gave a practical example of how Strata works, for instance if a district nurse does a home visit and identifies the patient's needs and whether they need an occupational therapy assessment to stop that person ending up in casualty. She would ring Care Point as a single point of access and key the relevant information into Strata to see which clinician is available to attend to the patient. This is particularly relevant in complex cases with older people. A paragraph about the patient's condition would be written to identify what services can be offered and identify if a home visit is needed. All available services will pop up on Strata to what is out there and if they require domiciliary care. At present a lot of time is wasted with social workers doing their reports beforehand, the benefit of Strata is its quickness. Staff will work together to tailor the care that is required. Wally and Lesley have spent five years tracking this system. Wally agreed it was disappointing they had used the Canadian model because when Strata gave a CCG internal presentation it was based on North Tyneside. Wally said he would pick this up with Clint who is the Strata Chief Executive. He explained that Strata presently has 22,000 patients on its frailty register it has been a massive piece of work mapping out the services.

Pat said Lesley and Wally's Strata explanation had been very helpful and made things much clearer, although she raised that there is a Falls Service in North Tyneside during the presentation and it wasn't clear if that was part of the system, Wally will discuss this at the weekly meeting held with the Strata Project Manager. Wally confirmed that Strata is definitely coming and the CCG are most certainly deploying it. The key is that local people will be able to access local services and be put on the right pathway. The context of these services comes from the Older People's Pathway from 2014, although it is in situ there is still a fairly long road ahead. Care Point are involved and have had three or four meetings with the Strata frontline staff.

Wally informed the members that LIVI has recently gone live with a soft launch, it's out there and there has been a 100% sign up from North Tyneside GPs. He reiterated that a LIVI leaflet drop is imminent in the borough.

Patrick asked how easy it would be to get an appointment and Wally explained as long as he had the App, which is available on Iphone, Android and Ipad, he could get access to a GP. There will be issues to resolve that is why it has started with a soft launch. LIVI has a lot more benefits than some other software packages. Ray disagreed about the availability of the system on certain iPads especially if people have older equipment.

Sandra has downloaded the LIVI App and found it to be very straight forward. Wally confirmed he had looked through all the comments asked for from members over the past few months and Michele has spoken to Gary Charlton regarding the feedback on the leaflet.

Patrick said the logins for LIVI at his surgery were relatively low and therefore is enough being done in advertising the system. Twenty-year olds don't really bother going to their GP so would perhaps need more encouragement.

Michele confirmed that obviously there has been no Patient Participation Groups (PPGs) in GP surgeries but if restrictions continue, they may look at doing a Teams videocall meeting in early autumn. She has liaised with a couple of the practices and the process is underway, she feels sure others will follow suit as this will give an opportunity for catch-up. Susan said the Priory Medical Group were certainly aiming to do this.

Lynn Craig

Lynn was invited to the Forum to give an update on the Integrated Frailty Pathway. There has been a hiatus on the pathway because of Covid 19 but from the start of June the staff have really picked things up at pace. There is an Executive Group and four Project Groups one of which is the Comms and Engagement, the second workshop took place with representatives from the Patient Forum; the feedback although a little bit late will be available this week. This will be put on the agenda for next week's meeting. The procurement for the 40 Intermediate Care Beds is progressing it has no set timeline but ideally it will be underway by April 2021. This is led by Mathew from the CCG and clinicians and staff will take place in a videocall meeting next week to discuss Strata which has been identified as a capacity and demand tool. There has been some additional investment into the IT Telephony Aid Group which will map processes and develop the system so that integration can be more robust and straightforward. The telephone system information has been shared with Care Point to ensure the service is undertaken by the right staff in the right place with the right expertise. They are currently looking into a single clinical system of shared patient records which is a big ask. There are three sub-streams within the streamlined pathway, Alex Kent is the lead on the Clinical Pathway Group which will develop the system processes. Services will re-group to discuss feedback from the March event in September, this will be parallel with Strata. There is a huge amount of work going on to produce the best model of care that works. Lynn confirmed there will be an opportunity for members to join the Clinical Pathway and she will ensure invitations are sent out. There is a Teams meeting at 8.30am next Thursday. The Integrated Frailty Service is working closely with the CCG and Heathwatch giving an opportunity to provide frailty services for the growing elderly population.

Hear My Voice

The Hear My Voice (Sensemaker) GP Access survey closed with 619 responses, Covid 19 did impact on the planned community group work. The purpose of Sensemaker is to gather people's stories about their health experiences and the strength of Sensemaker is that people can share their stories and not just statistics. Feedback from patients can be gathered on a whole raft of service areas and will be an evidence-based process to inform health care services in North Tyneside. Sensemaker was first used three years ago in care homes across North Tyneside and proved to be very useful to improve services. The initial analysis has been shared with the CCG and members.

GP Survey

Members confirmed they had also received and read the GP Survey. There is an analysis link that enables patients to see how their GP compares to others in North Tyneside. Susan said that the number of patients surveyed at Priory Medical Group is very small in relation to the

numbers of patients they have, for example, Priory have over 15000 patients but only 105 surveys were returned out of 254 sent out.

Heather asked about the comparisons sheet which had already been sent out, Michele will re-send it out today.

Any Other Business

Lesley and Michele recently took part in a Death Café which was facilitated on Teams. The experience was quite uplifting and was a good way of having a space to consider and reflect. It was not all doom and gloom and prompted conversations about life and death. During the Autumn there will be the opportunity for members to take part.

Date and time of next meeting

Venue to be arranged

Thursday, 10 September 2020

11.00am to 1.00pm