

Notes of Inaugural General Meeting

Date: 09 December 2015
Time: 5.30pm – 8pm
Venue: 336 Brixton Road



Present:

Members from AT Medics, Brixton Hill, Clapham Family Practice, Clapham Park, Dr Masterton & Partners, Herne Hill Road, Hurley, Paxton Green, Riverside Medical Centre, Springfield Medical Centre, Stockwell Group, Streatham Common, Streatham High, Streatham Place, Deerbrook, The Exchange, The Vauxhall, Valley Road, Vassall Road & colleagues from Lambeth Clinical Commissioning Group (CCG), Lambeth Council and Southwark PPGs

Meeting commenced at 5.40pm

	Agenda	Action
	<p>Welcome</p> <p>Sandra Jones (SJ) welcomed attendees, Cllr Jim Dickson & colleagues from Southwark Patient Participation Groups (PPGs) to the meeting. She outlined the running order and introduced the individual members of the Lambeth Patient Participation Group Network (LPPGN) steering group.</p> <p>Minutes of the last meeting</p> <p>Agreed as a true record and approved</p> <p>Annual Review</p> <p>SJ reflected on the past year and highlighted significant points from the Annual Review including PPGs becoming more structured and effective in the way they dealt with their partners. She mentioned the successful TV initiative, championed by Jenni Rodgers and David Del’Nero, which will see TV screens installed in all practices in Lambeth by end March 2016.</p> <p>SJ outlined the important areas of work for the Network in 2016:</p> <ul style="list-style-type: none">• Infrastructure<ul style="list-style-type: none">○ Becoming an incorporated organisation○ Pending charity status○ Focus on communication – the flow of information not only from above but bottom up.• Development<ul style="list-style-type: none">○ Wai Ha will continue to work with PPGs, in particular those where none exist○ The introduction of the Gold Standards and Toolkit○ Providing networking opportunities to share good practice and to involve more young people to PPGs○ Identifying themes and issues via PPGs so they can be taken	

	<p>into account and addressed by decision makers</p> <p>SJ asked for volunteers interested in being on the Networks’ Policy sub group (formerly Policy Task & Finish Group) where the remit remained:</p> <ul style="list-style-type: none"> • Being strategic • Continuing to work with and have a voice at Local Care Networks (LCN), Task & Finish Groups, Primary Care Development Board (PCDB) and Engagement, Equalities and Communications Committee (EEC). <p>Sandra indicated an increase in attendee numbers at Network meeting and formerly thanked all members of the Steering Group, Catherine McLoughlin, Sam Meikle, Graham Baker, Wai Ha Lam, Cheryl Alfred for their commitment and work in the past and also Healthwatch for hosting the Network.</p> <p>She indicated the Network were in talks with CCG about 2016/17 funding and acknowledged and thanked Antoinette Scott, Therese Fletcher and Catherine Flynn.</p> <p>Election of Board of Directors (5.55pm)</p> <p>Catherine McLoughlin (CM) presided and informed the meeting there were eight nominations – six from the existing steering group members and two new nominees (Alison Angus and Patrick Nyikavaranda). She asked the meeting whether they were happy for the existing six members and two new nominees to be elected as directors, in the spirit of continuity. The meeting voted unanimously for all eight nominees to become directors of LPPGN.</p> <p>Appointment of Auditor</p> <p>The meeting agreed to give the new directors the mandate to appoint an auditor in the coming weeks.</p> <p>It was agreed that the directors would meet before Christmas to assign board roles and responsibilities.</p> <p>IGM closed at 6.00pm</p>	
	<p>Meeting reconvened at 6.37pm, chaired by SJ. Each meeting attendee introduced themselves shared which PPG they were from.</p>	
	<p>Key Note Speech – Adrian Mclachlan</p> <p>SJ introduced Adrian Mclachlan (AM) - GP at Hetherington and Chair of Lambeth Clinical Commissioning Group (LCCG) and Cllr Jim Dickson (JD),</p>	

<p>Cabinet Member for Health & Wellbeing and Chair of the Health and Wellbeing Board.</p> <p>AM presented that he has been a GP for 27+ years. He used a presentation (IGM 9 December 15 - LPPGN Presentation final.pdf), which showed the NHS having to deal with a £30bn funding gap, with a £120k under-investment in GP practices.</p> <p>He outlined 4 key documents which shape the work of Lambeth CCG:</p> <ul style="list-style-type: none">• Five Year Forward View – what is needed to survive?• Better Health for London – What’s needed in London• GP Framework – Making care accessible, proactive and coordinated for every patient.• 5 Year Strategy for Lambeth – informs healthier together initiative <p>AM commented that LCCG is committed delivering services in partnership focusing on:</p> <ul style="list-style-type: none">• Prevention• Being People Centred• Consistent• Integrated• Innovative• Offering best value <p>AM talked about how PPGs could possibly work collectively based on location, rather than by individual practices, which would mirror the model adopted by the new GP Federations. He mentioned the development of 4 hubs across the borough, offering extended opening hours (8am – 8pm, 7 days a week) to enable patients to get access to services, when their own practice might be closed or unable to offer an appointment. Care needs are being delivered by Local Care Networks (LCN) to bring a number of services together to ensure that standards reflect not only national but the local vision.</p> <p>AM mentioned the significance of care needs provision moving into the digital age, e.g. patients being able to book appointments online. The hope is that by end of 2015, at least 3% of patients would be accessing and booking appointments online. The CCG are looking at how to make accessing services and information easier for patients, e.g. by offering free Wi-Fi in surgeries, information TV screens, etc.</p> <p>SJ thanked AM for his presentation and introduced Cllr Jim Dickson</p>	
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	<p>Key note speech – Cllr Jim Dickson</p> <p>JD thanked the meeting and outlined the council’s remit of working in partnership with the community and strategic partners to provide services. He confirmed future involvement in delivering services meant cross working relationships (e.g. CCG, Council, the Network & PPGs). On-going budget constraints made providing care difficult – with a £2m shortfall 2015/16 & a further £4m expected in 2016/17.</p> <p>JD mentioned some positive outcomes through good partnership relationships including the mental health and living well collaboration; also Early Action Investment – the LEAP programme, which looks at the health and well being of children from pre-birth to age 5. He also mentioned the integration of health and social care services, which is tasked to ask the question who uses these services and what do people want?</p>	
	<p>Q & A</p> <p>SJ opened the floor for questions to AM & JD</p> <p>Question: Concerns about air pollution, can the CCG & Council ensure funds were made available and spent correctly to tackle this issue? Do residents really know the facts about air pollution in their area?</p> <p>Response: JD agreed there were challenges but hoped influence would bring about change. He is a strong advocate that by devolving powers to London - London can tackle its own issues and decide how best to provide services.</p> <p>Question: What is the Health and Wellbeing board?</p> <p>Response: It is a partnership of services (CCG, Council, Adult Social Care, Children’s Services, Housing, the Police & Healthwatch) who are looking at areas of commonality, to find a single approach to providing better Health & Wellbeing services in the borough.</p> <p>Observation/Comment: Financial hardships aside, the PPGs and Network have structures and standards in place and are a valuable resource which should be used to greater effect, to highlight issues and to support the work of the CCG & health providers.</p> <p>Question: In the spirit of co-design, what mechanisms are in place for individuals to get involved in having a say in what services they want for their own health and care needs?</p> <p>Response: Partnership working is key to ensure people’s needs are met. Healthwatch are currently looking at Citizens Boards for Health & Integrated Care. Through the Citizens Forum the process on how people can access care needs will be made clearer. This is a dramatic change in</p>	

<p>the traditional relationship between a GP and a patient. The individual relationships with the patient and who delivers the care is moving to a more partnership approach, involving a wider range of care providers. Initiatives such as the Living Well collaboration support for carers and diabetes awareness all link into the idea of care provided by partners. In addition people will be asked what can they do for themselves?</p> <p>Question: If the plan is for at least 3% of patients booking appointments on line by the end of the year, the reality is some distance away. One patient’s experience is they are told by their practice that they cannot book appointments online; they have to go into the surgery. There is disparity between what the CCG hopes to achieve through digitisation and what is happening in reality.</p> <p>Response: All practices have the ability to offer this service to patients. Patients, through their PPGs is one mechanism to voice issues or concerns and should be asking why these choices are not being made available. There are real concerns over equality of access (people who do not have internet access/computers/smartphones would not be able to benefit from this digitisation service). It is crucial that the flow of information happens from patients, PPGs and the Network so decision makers know the issues and barriers people are facing.</p> <p>Question: How can PPGs and the Network’s concerns about primary care services be heard by NHS England? How can we get our voices heard?</p> <p>Response: As things move towards a co-commissioning approach to service delivery, it is likely that NHS England will become less involved in decision making – which should mean PPGs & the Network have a clearer voice with the commissioners like CCG, the council, etc.</p> <p>SJ thanked AM & RD for this contribution and commented that the discussions were encouraging and positive.</p>	
<p>Gold Standards and Toolkit launch</p> <p>Priscilla Baines (PB) has been a longstanding member of the Toolkit Task & Finish group who had worked with Sam Meikle to create the Gold Standards and Toolkit.</p> <p>PB explained the Gold Standards were a set of ideals outlining the best features of an effective PPG, with the Toolkit being a set of guides and suggestions on how PPGs could do things from starting out, to growing and developing. PB introduced & thanked Sam Meikle (SM) for her hard work, time and persistence in putting the documents together.</p> <p>SM gave a presentation in brief on both documents. The Toolkit has a</p>	

	<p>clear content page allowing PPGs to choose an area they are addressing and use the templates and guides to help them achieve their outcome. The Network will be issuing a hard copy of the Toolkit to each of the 47 surgeries, as well as making it available online in the New Year via their website, which is under construction.</p> <p>There followed table discussions around what PPG could use the Toolkit for.</p>	LPPGN
	<p>Close</p> <p>PB thanked the attendees, speakers and presenters, steering group and staff. The meeting closed at 8.10pm</p>	