

Patient and Public Engagement Steering Group

Six monthly report April – September 2018

The PPE Steering Group was set up as the Involvement Steering Group nearly five years ago, with the first meeting in March 2014. The membership has changed over time but remains a wide range of representatives from the voluntary sector, local authority, Healthwatch Hampshire and PPGs from across west Hampshire.

The PPE Steering Group is chaired by the Board's lay member for patient and public involvement with support from the engagement manager; details of membership are in the terms of reference attached.

ISG bi-monthly meetings

May 2018

The agenda included:

- CCG update – Highlights from the annual report
- NHS Continuing Healthcare and Personal Health Budgets update – the group were asked for support to increase attendance at CHC drop in sessions for patients and carers.
 - **Outcome:** Representatives from the voluntary sector and Healthwatch agreed to circulate information and encourage people to attend. The group asked for information on personal health budgets, this was circulated with the minutes.
- Healthwatch Hampshire update – two reports about to be published, on self-care and the deaf community.
- West and South locality plan – the refreshed plan was shared with the group for comment and feedback. The presentation was circulated to the group after the meeting.
 - **Outcome:** Patient input to the South West locality plan
- The group were asked for suggestions for the AGM
 - **Outcome:** Input to AGM plans – increased focus on self-care and prevention
- A member asked if annual health checks are promoted in GP practices, as reported take up is low. Information was circulated to the group after the meeting.
- Plans for extended access to GP appointments were shared with the group for comment.
 - **Outcome:** Promotion of extended GP access service to patient groups

July 2018

- Heather Hauschild attended the meeting to take questions from the group. HH gave an update on the refreshed CCG strategy and presented the key points.

Healthwatch Hampshire asked about the recent NHS England CCG assessment report and why WHCCG was rated as requires improvement. Heather explained it was due to our financial position.

A member asked about preventative work around mental health and asked about working with partners in the voluntary sector who have a lot to offer. Heather explained that the relationship with the voluntary sector is in the strategy but in her brief summary she had not made that explicit. A dialogue with voluntary services is key to the future success of our plans.

Local delivery systems will include all agencies. She further explained that the plans are aligned with those of the STP and there is no conflict between the two strategies. Since May CEOs and senior officers have been working together to build a system from the bottom up. GPs are forming clusters with a population of 20,000 – 100,000 and health is working collaboratively with social care to provide joined up services.

- Integrated Intermediate Care (IIC) – Fran White explained the principles behind IIC and showed the group a presentation aimed at patients and the public.
 - **Outcome:** Two group members offered their help with a focus group as they had experience of supporting people with complex needs.
- School wheelchair clinics review – Stephen Trembath explained the review and gave a brief presentation. It was suggested he contact Hampshire Young Carers to get a different viewpoint. The wider service review was circulated to the group.
 - **Outcome:** Wider circulation of the school wheelchair services review
- The group were also reminded of the CCG AGM in September and encouraged to attend and bring other patient representatives.
 - **Outcome:** Increased attendance at the AGM by patient and voluntary sector representatives

September 2018

- Personal Health Budgets

Meriel Chamberlain explained to the group how Personal Health Budgets (PHB) work, they are offered to people who have been confirmed as eligible for Continuing Health Care (CHC) funding. She outlined the three types. She went on to explain the Discharge to Assess programme to the group. A pilot is running currently.

- **Outcome:** Wider circulation of CHC plans and support for patient involvement.

- The Terms of Reference were reviewed and some amendments suggested. A draft will be brought back to the next meeting.
 - **Outcome:** Continuous development of the ToR to ensure groups is active and current
- Medicines Management - Neil Hardy talked to the group about current protocols in medicines management. He advised that the flu vaccination is released in September and has an efficacy of more than three months. NH explained how some medicines are no longer appropriate to be prescribed by GPs, including homeopathic and herbal remedies. He spoke about antibiotic prescribing and education for patients
Polypharmacy – a form has been developed to support patient discussions about medication with GPs. The foldup cards were shared with the group.
 - **Outcome:** Distribution of medicines management cards and wider promotion of pharmacy plans

Outside the meetings ISG members commented on poster designs for the extended GP access service and helped promote surveys for patient involvement and our annual provider survey.

Development of group going forward

- Major review of the Terms of Reference – in appendix
- Review of membership
- Development of ability to report to Board
- Ensuring commissioning managers are aware of the PPESG and best practice in patient and public engagement.