

**CCG BOARD
PART I
MEETING ON 26th OCTOBER 2016**

Title of Report:	Clinical Engagement Update (held on the 13 September)
Board Sponsor:	Chair Thurrock CCG
Prepared by :	Dr L Grewal
Committees previous consulted:	n/a
Executive Summary:	<p>Pre diabetes presentation on service, Healthier you programme for diabetes prevention Give patient contact number they call service, (add presentation) Referral packs will come out in next 2 weeks</p> <p>Finance update from CFO Ade Olarinde re last year we ended in small surplus of £28,000.</p> <p>Running cost of CCG was underspent and so was programme budget, (commissioning services) offset by QIPP savings of 80% of predicted. Good work by the CCG members and organisation has enabled this satisfactory position.</p> <p>Next year and beyond appears will be more challenging. Dr Grewal stressed importance to have vigilance regarding quality of all services so if you have any issues please contact CCG on practice concerns email Christine.celentano@nhs.net</p> <p>AF pathway was introduced by Dr Raja, prevalence thought to be in THURROCK of 2% but register is closer to 1.2%, may be missing 1000 patients. Also once diagnosed only half AF patients are anticoagulated. Our number of patients on NOAC and warfarin are low, aspirin is not good enough. Warfarin monitoring and control and convenience may be difficult for patients.30% of patients stop warfarin within year. Patient choice & Compliance is issue hence NOAC pathway. Caveat for NOAC rheumatic fever, renal failure, metal valve, elderly dose adjustment. sparctool.com good web tool.</p> <p>Community GP Hubs data from April 2015-August 2016, 35% vacant appointments for GP, 55% for nurses. Patients not happy as no referrals but no secretarial service, however - no blood tests and investigations , medical certificates and medication reviews may be looked into by the hub team. Please encourage practices to be aware of these hub appointments</p> <p>Social prescribing referring patients to voluntary and community sector for example lonely patients. Pilot in tilbury and Purfleet to look into initiating by practices ideally hoping to reduce the patients attending GP surgery and</p>

	improve these patients quality of life. Due to go live in those areas in October 2016	
Financial / Resource Implications:	None	
Fit with CCG strategy/objectives:	n/a	
Risks identified / Outcome / Link to BAF:	n/a	
Actions Required:		
Recommendation to the Committee:	To be noted by the board	