

**Commissioning Reference Group
12th September 2017
The Beehive, Grays**

Present:	Mr A Hudson (AH) Chair	CRG Chair/Stifford Clays Medical Centre, PGG
	Ms L Corbishley (LC)	PPI Lay Member
In Attendance:	Judith Harding (JH)	TCCG, Dietetic Prescribing Advisor
	Louise Banks (LB)	TCCG, Head of Communications
	Ms M Scrobotovici (MS)	Thurrock Council, Healthcare Public Health Improvement Manager
	Mrs Kim James (KJ)	Healthwatch Thurrock
	Tony Davis (TD)	Healthwatch Thurrock (Independent Member)
	Andrea Valentine (AV)	Healthwatch Thurrock
	Kevin Brice (KB)	SCMP PPG Vice Chair, PPG Network Lead
	Ben Dubois (BD)	Local Area Coordinator, Thurrock Council
	Dr P Ambikapathy (Dr A)	Retired GP
	Olga Benson (OB)	Retired, TOFF Member
	Terry Brown (TB)	Community Forum
	Christine Ludlow (CL)	Thurrock Centre for Independent Living, Horndon PPG representative
	Jane King (Minute Taker)	TCCG, Business Support
Apologies:	Gill Booth RN	
	Dr A Bose	
	Maureen Cushing	
	Yash Gupta	
	Alan Harmer	
	Christine King	
	Dr Yad Varma	

1.	Welcome & Apologies
	AH welcomed all to the meeting. The apologies were noted above.
	AH asked if there were any declarations of interest not already on the register, none were noted.
	A Member of the floor advised that the last two sets of minutes had not been uploaded to the TCCG website. It was agreed this would be looked into and actioned. ACTION: LB to check.

2.	Conflict of Interest
	None noted.
3.	Minutes of the meeting held on 11 July 2017 and Action Log
	The minutes for the previous meeting were agreed. There were no actions.
4.	<p>Tube Feeding</p> <p>AH introduced Judith Harding, Dietetic Prescribing Adviser, TCCG, who gave a presentation on Thurrock's Tube Feeding Service. JH explained that a decision had been made to procure a single supplier for the enteral feeding service and equipment supplier for adults and children across mid and south Essex. The primary aim of the project is to improve enteral feeding services for patients.</p> <p>JH advised that throughout the procurement process there will be communication and engagement work with patients and stakeholders. Patients will be asked to complete a questionnaire prior to the service specification being finalised and invited to spend time with bidders to trial their products and ask any questions they have in order to capture feedback. A number of different patient groups will also be invited to trial the equipment in different settings (eg hospital/home). TCCG recognises that it is an anxious time for patients and carers.</p> <p>OB asked if tube feed training is provided in schools? JH confirmed that Nurses do go into schools to do staff training.</p> <p>CL asked if patient feedback on the current supplier had been collected over the past four years. JH confirmed that it had; every patient is given a mini questionnaire six weeks after discharge and, additionally, all patients receive an annual questionnaire. Local clinicians have opportunity to add questions to tailor the questionnaire.</p> <p>AH asked whether there was a large number of tube feed fed patients in Thurrock. JH advised that there are approximately 150 patients in Thurrock who require tube feeding due to various medical conditions, some with short term requirements but also those with life-long conditions.</p> <p>AH asked if major changes are expected as a result of a change of provider. JH advised that the current TCCG service delivery plan has been developed over time and includes requested changes that have been cemented into the service specification.</p> <p>LC asked whether technology had changed or improved the service over time. JH confirmed that IT investment has enabled Nurses to scan good quality paperwork direct to patient records and electronic invoicing is to be introduced at the end of the year. Additionally, a patient facing portal is available, providing a stock check facility and requirement confirmation which is included in the service specification.</p> <p>TD enquired whether a variety of feeds was offered to patients. JH advised that where there is a clinical need or where the patient does not get on with a particular feed, alternative feeds can be arranged from another supplier. When this happens, however, the patient will not benefit from the whole company service – eg the current supplier provides a travel service where portable travel equipment can be provided.</p> <p>KB asked why contract lengths differ and whether longer contracts are the better option. JH advised that contract lengths depend on the contract offered by the provider and explained that it can be difficult or unpractical to negotiate longer contracts or fix prices for long periods due to economic uncertainty.</p>
5.	NHS England Communications
	AH introduced Louise Banks, Head of Communications, TCCG, who delivered a presentation on

behalf of the STP outlining current developments. In particular:

- There are no plans to close A&E departments at the three local hospitals.
- There will be a bigger emphasis on prevention, health campaigns and self-care information along with joined up services linked to GP hubs and hospital stays.
- Locality development, eg practice groups working together, integrated social care, community care, mental health services and the voluntary sector.
- Outline of future hospital services.

KJ raised concerns regarding the financial cost of integrated care plans to the voluntary sector and how this will be funded.

TD asked about Healthy Living Centres. AH hoped to be able to get someone to attend the next meeting to provide an update on Healthy Living Centres.

OB raised concerns about the cost of providing equipment to three separate A&E Departments. LB explained that despite the cost implications, there are also benefits to having three A&E hospitals including critical patients having shorter journeys to receive emergency care.

TD raised concerns as to whether paramedics would be able to provide adequate support for lengthy journeys to A&E if there was just one central A&E hospital.

LC said that it was good that concerns regarding A&E closures had been taken on board and the decision taken not to close any A&E departments.

OB asked about end of life care. LB explained that a 'Dying Matters' event took place in May. AH suggested 'End of Life' as a future topic for the CRG.

6. Hypertension & AF Detection Programme/Self-Test

AH introduced Monica Scrobotovici, Healthcare Public Health Improvement Manager, who presented a slide show on the Hypertension and Atrial Fibrillation detection programme in Thurrock. MS explained the aim is to improve access to hypertension and irregular pulse screening services, increase the number of people living with the condition who understand their condition and receive appropriate medication which will help reduce complications and pressure on secondary and social care.

A 6-month pilot is currently taking place in five local pharmacies whereby residents can be invited by the pharmacist or healthcare assistant to have their blood pressure checked if they are considered to be at risk. Anyone registered with a Thurrock GP also can ask the pharmacy staff to check their blood pressure and pulse. If the results are positive on three separate occasions (after ruling out any false positives) a GP referral will be made for further investigations and treatment. If the pilot is a success it will be replicated across the borough.

Another programme is being planned where patients will be able to test themselves in the GP waiting area or be selected based on risk factors and get tested by a healthcare assistant before they see their GP.

KB asked whether patient participation groups can assist with feedback on self-use machines? MS confirmed that this would be helpful. The CCG have already had feedback from one Practice, who reported that the machine was not being used properly, resulting in inaccurate readings, therefore the Practice decided to stop using the machine.

Dr A suggested that it would be good to employ volunteers in the community to offer practical assistance with the project. MS confirmed that volunteers in the hub had been trained to guide individuals through the process if needed and TCCG are currently advertising for a volunteer role for this purpose. Information would be provided to LC to disseminate. **ACTION: MS to follow**

	<p>up.</p> <p>TD was concerned that the system is reliant on someone to get themselves a doctor's appointment in cases of positive results, could there be a fast track appointment system? MS advised that a healthcare assistant or nurse at a practice can be the first port of call to start treatment process. MS acknowledged that Practices are expecting a higher number of patients to request appointments due to community testing.</p> <p>OB suggested that patients should be taught how to relax before having their blood pressure tested. Dr A suggested that yoga should be offered as an alternative to statins in reducing blood pressure.</p>
7.	<p>AOB</p> <p>KJ advised that the Healthwatch contract had been out to tender and had been won by the current provider, CBS, who would continue to provide the service for another three years.</p> <p>AH advised that the Thurrock CCG Annual General Meeting would be held between 10.00 am – 11.00 am on Wednesday, 27th September 2017 at High House, Purfleet.</p> <p>A Living Well event will be hosted by CCG on 27 September 2017 between 6.00 pm – 8.00 pm at the Civic Offices.</p> <p>AH also advised that from 13th September 2017 the telephone number for the Blood Test Booking Service will be 01702 746065.</p> <p>OM found there was little information available on kidney problems and TB felt there was not a lot available on cholesterol.</p>
8.	<p>Items to Escalate</p> <p><u>Board Assurance Framework</u> There were no items to escalate to the Board Assurance Framework.</p> <p><u>To other Committees and Board</u> There were no items to escalate to other Committee's / the Board.</p> <p><u>From other Committees and Board</u> There were no items escalated from other Committee's / the Board.</p>
9.	<p>For information</p>
	<p>Phlebotomy Services – to be discussed at the next CRG Meeting.</p>
	<p>Date of Next Meeting</p>
	<p>14 November 2017</p>