

**Enfield CCG Governing Body Meeting 20 March 2019**  
**Questions and Answers relating to items on the Governing Body Agenda**

**Question 1 (Mr Richards)**

Why are the public questions, which were asked at the last meeting on 23/1/19, not associated with the minutes? This is particularly important as the CCG made mistakes in reporting questions 22 & 26, even though the CCG replies were correct. Are the questions & answers accessible on the website? Where?

**Response by the Lay Member for Governance and Vice Chair:**

The responses to the public questions for Governing Body Meetings are published on the corresponding page for each meeting. The minutes and questions are not linked together as the minutes of the previous meeting are in draft form and not yet available to be published, whereas the questions are available from the day of the meeting. Please see web page: <http://www.enfieldccg.nhs.uk/about-us/23-january-2019.htm>

**Question 2 (Mr Richards)**

Agenda item 2.1 Minutes of the meeting on 23/1/19.

Page 14 (of 137) - point 5.1.3 - How can the public access the "Children's Continuing Healthcare Policy" ?

**Response by the Director of Commissioning:**

Enfield CCG follows the national framework for Continuing Care. Please see our web page <http://www.enfieldccg.nhs.uk/nhs-continuing-healthcare-funding.htm>

Within that document there is also a link to view the national framework

<https://www.gov.uk/government/publications/children-and-young-peoples-continuing-care-national-framework>

**Question 3 (Mr Richards)**

Agenda Item 2.2 Matters Arising and Action Log.

Action Ref GB/039/18 - how are the public who do not have access to their own computers, expected to access the strategy document? If they print the 40-page document it could cost at least 5 pounds.

**Response by the Director of Primary Care Commissioning and Deputy Chief Operating Officer:**

The CCG is committed to reducing its carbon footprint and has stopped printing documents wherever possible, distributing information electronically wherever possible.

**Question 4 (Mr Richards)**

Agenda item 6.2 Integrated Performance and Quality Report

Page 47 (of 137) - Latent Tuberculosis - this report is the same, word-for-word, as was

submitted to the GB on 23/1/19 ! What has happened as the result of the escalation and the review by the Contracting team and Pathology and Hospital providers ?

**Response by the Director of Transformation, Planning and Delivery:**

The CCG and the GP Federation have submitted a new plan to NHS England that will overcome the technical difficulties experienced in 2018/19 and ensure Latent TB screening is undertaken within the Enfield borough in 2019/20.

**Question 5 (Mr Richards)**

Agenda Item 6. 2 Integrated Performance and Quality Report

Page 50 (of 137) - Ambulance conveyance to A&E from Care Homes - which were the original 4 (of the 10) homes to implement "Trusted Assessor"? Has it's implementation in those 4 homes achieved positive results?

**Response by the Director of Commissioning:**

The four homes are Autumn Gardens, Murrayfields, Parkside and Woodbury. The implementation in these homes has seen a positive improvement including:

- Reduction in hospital length of stay
- 100% of Enfield care homes now receiving a same day referral rate for their patients

**Question 6 (Mr Richards)**

Agenda Item 6. 2 Integrated Performance and Quality Report

Page 53 (of 137) - Dementia diagnosis - have the "data issues with some Medicus Heath Partners practices" been resolved ?

**Response by the Director of Primary Care Commissioning and Deputy Chief Operating Officer:**

The data issues for the Medicus Health Partners GP practices are still ongoing following the migration of clinical databases. The CCG's Primary Care Team is continuing to work with Medicus Health Partners to resolve this matter.

**Question 7 (Mr Richards)**

Agenda Item 6.2 Integrated Performance and Quality Report

Page 56 (of 137) - ECGG Mixed Sex Accommodation - "Contributing factors and mitigating actions is covered more in the JCC Acute Commissioning Report". Please advise me of the page number, as I have not been able to find it in the report(s) to the JCC meeting(s) including the one held on 7/2/19.

**Response by the Director of Transformation, Planning and Delivery:**

Mixed sex accommodation update was not included in the JCC report. This omission will be rectified in the next report. The majority of the breaches are taking place at Barnet Hospital and relates to patient flows from ITU. This is being monitored through monthly contract review processes.

**Question 8 (Mr Richards)**

Agenda Item 6.2 Integrated Performance and Quality Report

Page 70 (of 137) - Patient Experience & page 76 (of 137) - FFT - has the external review report by the Patients' Association been published ?

**Response by the Director of Transformation, Planning and Delivery:**

The findings of the external review and action plan will be shared with the Clinical Review Working Group at Enfield CCG.

This report was commissioned by North Middlesex University Hospital (NMUH) NHS Trust. You may want to contact the Trust regarding your request.

**Question 9 (Mr Richards)**

Agenda Item 6.2 Integrated Performance and Quality Report

Page 115 (of 137) - Diagnostics - what will be the cost of the "240 direct access echocardiography investigations""outsourced to a private provider" ? Who will meet the cost ?

**Response by the Director of Transformation, Planning and Delivery:**

The cost of the 240 echocardiography investigations is the responsibility of RFL and this would be managed by the Trust through a sub-contractual relationship with the private sector provider.

**Question 10 (Mr Richards)**

Agenda ítem 7.1 - Governing Body Assurance Framework & Corporate Risk Register.

Page 124 (of 137) - CRR Risk Tracker - Datix ID 375 - what is the significance " that the CCGs annual report has been signed off" to the risk of maintaining Safeguarding Children standards ?

**Response by the Director of Quality and Clinical Services:**

This question relates to one element of the action plan for that risk. It relates to our internal governance of the risk in ensuring the CCG Quality and Safety team and Governing Body have oversight of potential issues.

Part of our assurance for the performance management of the providers is to produce a CCG safeguarding annual report. The annual report includes an overview of each providers safeguarding compliance. The report is presented to the Quality and Safety committee by the CCG Safeguarding team.

The committee reviews the draft report in detail and provides challenge to the safeguarding team in ensuring we demonstrate our activity with providers to assist them to maintain their safeguarding arrangements. It is also an opportunity to flag any issues that need escalating via other routes such as the Clinical Quality Review Groups directly with the providers.

Following the presentation of the draft annual report, we may need to add detail or clarify sections of the report including actions we are taking with providers. The report is then signed off for final reporting to the Governing Body.

### **Question 11 (Over 50s Forum)**

On August 24 2015, following an Over 50s Forum request, the CCG Chair, Dr M Abedi, wrote to the NHS England chief executive to protest at the £200 million national cut that year in Public Health Allocation (PHA) which was then 13.6% below the Department of Health's own target figure. The gap between Enfield's PHA and the London average was then £24.

Under the PHA for the coming year, Enfield will receive £47 per head - the 10th lowest in London - compared with a London average of £73. A gap of £26. So far from closing, the gap is getting worse. One of the perceived aims of our NCL consortium of CCGs is to reduce health inequalities between the one million plus residents in the five boroughs.

Yet we find that in 2019-20 Islington is to receive £103 per head, Camden £100 and Haringey £69 per head - almost 50% more than neighbouring Enfield's £47. So will the CCG Chair write and seek a meeting with the Secretary of State for Health and Social Care to emphasise that this continued PHA underfunding can only result in increased pressure on our already under-resourced and under-funded NHS services?

#### **Response by the Lay Member for Governance and Vice Chair:**

Public Health budgets sit with London Borough of Enfield and Enfield CCG has no direct influence on this. We are however, very much aware that budget impacts are extremely challenging for London Borough of Enfield. The CCG is committed to being supportive of any lobbying undertaken by colleagues in the London Borough of Enfield on this issue.

### **Question 12 (Over 50s Forum)**

#### Agenda Item 3.3 & 8.3

Can patients concerned by the withdrawal of surgery blood tests be updated on whether a replacement service will be operational from April 1st when the Royal Free Trust is withdrawing this facility?

I am unable to find the "printable PDF" on your website. If it is indeed available, how is somebody without their own computer to know this and are they required to print it off?

#### **Response by the Director of Primary Care Commissioning and Deputy Chief Operating Officer:**

From 1 April 2019, the Royal Free London NHS Foundation Trust will no longer provide a practice based phlebotomy service in Enfield. Blood testing has been provided by the Trust at a number of Enfield GP practices as part of a historic arrangement put in place by the former Barnet and Chase Farm Hospitals NHS Trust (acquired by the Royal Free London in 2014). This arrangement was specifically for these practices' patients only.

From 1 April 2019 this arrangement will end and the Royal Free London will be providing blood tests from Chase Farm Hospital, Barnet Hospital, the Royal Free Hospital and Cheshunt Community Hospital (until 31 July).

Information for patients about the phlebotomy service is available via the Royal Free London website: <https://www.royalfree.nhs.uk/services/services-a-z/blood-tests/>

North Middlesex University Hospital NHS Trust provides a phlebotomy service at a number of GP practice locations in Enfield (as well as the North Middlesex University Hospital site) and can be accessed by any patient registered with an Enfield GP practice. These include:

- Winchmore Hill Practice
- Forest Primary Care Centre
- Evergreen Surgery
- Freezywater Primary Care Centre
- Grovelands Medical Centre
- White Lodge Medical Practice

Details about this service are available on the North Middlesex University Hospital NHS Trust website: [www.northmid.nhs.uk/Our-Services/Blood-tests](http://www.northmid.nhs.uk/Our-Services/Blood-tests)

### **Question 13 (Over 50s Forum)**

#### Agenda Items 6.2 & 8.3

The CCG's "Single Offer" £1.2 million contract with Enfield GPs has been operational for over one year during which time 303 patients have been diagnosed with AF and 9,225 pre-diabetes cases have been identified. The "Single Offer" contract has now been extended by a further year until March 31st 2020.

How much of the £1.2 million original contract has been distributed to GPs?  
Is there an additional cost above the £1.2 million attached to the extended contract?  
Was the contract subjected to any independent cost - benefit scrutiny before being extended?

#### **Response by the Director of Primary Care Commissioning and Deputy Chief Operating Officer:**

All of the £1.2m original contract has been assigned to GP's. There is no additional cost associated with the extension of the contract. The awarding of contracts are managed and reviewed regularly through the CCG's Procurement Committee and the contract was extended in line with the CCG's procurement process.

### **Question 14 (Over 50s Forum)**

#### Agenda Item 6.2

Although the extended hours at access hubs offering GP appointments are being taken up, there is some slack reported at weekends and an extremely poor DNA performance. Will the CCG therefore consider printing a new, updated poster and leaflet to be available at each surgery and distributed to every attending patient to encourage still better use of the service.

#### **Response by the Director of Primary Care Commissioning and Deputy Chief Operating Officer:**

New/updated communications are being developed for the extended access service in 2019/20. We want the extended access services to be utilized as effectively as possible

and are working with local stakeholders to reduce the DNA levels.

**Question 15 (Over 50s Forum)**

In view of the new plan to form networks of surgeries has the CCG undertaken a survey of both the staffing and the premises upgrading required to make this effective? Will you publish the findings?

**Response by the Director of Primary Care Commissioning and Deputy Chief Operating Officer:**

Local practices will need to submit an application for the Primary Care Networks that they wish to establish. As part of this process the CCG will need to consider both the staffing and premises requirements.

**Question 16 (Over 50s Forum)**

Is the CCG able to tell us the over 65s take-up of the Flu vaccine this winter?

**Response by the Director of Primary Care Commissioning and Deputy Chief Operating Officer:**

The flu uptake for the over 65s is currently 69%.