



**Enfield**

Clinical Commissioning Group

# Feedback Report on the Patient and Public Engagement (PPE) Event

Wednesday 10 October 2018 1:45pm - 4:45pm  
Executive Suite, Dugdale Centre, Enfield

## 1.0 Introduction

NHS Enfield Clinical Commissioning Group (CCG) held its second patient and public engagement (PPE) event of the financial year 1 April 2018- 31 March 2019 on Wednesday 10 October 2018.

We hold three PPE events a year which are planned around our commissioning cycle and support the CCG's delivery of both the collective and individual participation duties as described in the Health and Social Care Act 2012.

Our PPE events help the organisation to update the public on local and national priority areas of work as well as enabling participants to get involved in shaping the development of our current services and our future commissioning plans. The events are always aimed at improving the quality of local health services and understanding how we can best shape services around the needs of our patients.

PPE events are widely advertised using our website, via Twitter @EnfieldCCG, through our stakeholder email distribution list, patient participation groups, member practices bulletins and local newspaper advertising. Based on feedback from participants at previous events, our PPE events are led by GPs and are workshop focused.

25 people attended this event. Full details of the Presentations and workshops can be found on our [website](#).

## 2.0 Theme of the event

The theme of this event was **“Help us to develop our Commissioning Plans”**. This theme was selected as this is the time of year that NHS organisations develop their priorities for investment for the next financial year.

### **3.0 Corporate Update**

Teri Okoro, Lay Governing Body Member for Patient and Public Involvement welcomed everyone to the event and introduced Dr Mo Abedi, Chair of Enfield CCG.

Dr Mo Abedi, Chair of Enfield CCG provided a corporate update including an update on the CCG's challenging financial position. He thanked Teri Okoro, as this is her final PPE event as her role as Governing Body Lay Member for PPE is coming to the end of its term.

### **4.0 North Central London (NCL) Primary Care Strategy**

Dr Chitra Sankaran presented the NCL Primary Care Strategy and gave an overview of its development and the current context.

Primary Care across North London has historically had variable levels of investment and nationally, there are many challenges facing general practice.

Local GPs have helped to develop this overarching draft strategy and GPs from each borough are members of the steering group.

Locally, CCGs have been engaging on this strategy and the comments have been collated and will be reviewed and included in a revised high level strategy document for NCL.

The participants commented that:

- Amount of money per head of population lower than in other parts of London
- Comments about equity of future funding
- Self-care is also important

Members of the public expressed an interest in being engaged in a more planned way for the next phase of strategy development, which will have a local borough focus.

### **5.0 NCL Orthopaedic Review presentation**

Anna Stewart, Programme Manager and Colin Beesting, Communications and Engagement Lead presented the NCL Orthopaedic review.

Within the planned care workstream of the STP there are four musculoskeletal projects, of which this review of elective care is one.

The review has been established by North London Partners in Health and Care. The review covers services in Barnet, Camden, Enfield, Haringey and Islington

The NCL STP thinks that there may be opportunities to improve adult elective orthopaedic surgery in north central London by consolidating services onto fewer sites. We are undertaking a review of these services to see if these improvements can be achieved

A review group led by local clinicians is coordinating the development of how this kind of care could be delivered in the future. Clinical commissioners will make decisions on where and how this happens.

At the moment, orthopaedic care is good across NCL but it could be improved.

There has been wide ranging engagement – with GPs, patients, Healthwatch and local politicians. This review focused on improving outcome and experience. The review doesn't have a savings target.

This is the first time the STP partnership has done a review of this size. Membership of the review group includes patients and the aim of the project is to improve care for patients.

There are currently 23,000 operations per year across NCL, most are day cases.

There are three private providers and one specialist provider, as well as all the other NHS hospital providers across NCL. Consolidation of sites could have benefits for patients and improve care.

South West London have already developed a centralised model of care and the NCL review is based on the South West London Elective Orthopaedic Centre (SWLEOC) model.

**Questions asked:**

Q: Are improvements to care completely dependent on site rationalisation?

A: It's a spectrum – some things could be further improved by collaboration, others by concentrating on fewer sites. Society of Orthopaedics – have identified key quality factors.

SWOLEOC - surgeons employed by local trust and involved in emergency care as well

Comment: It's important then to say that current care is already good, but could be improved.

Q: There could be issues with registrars with SWELEOC model they could have a lot of emergency patients, but not planned care – affecting training.

A: The Royal Free is an example of a local hospital who concentrates some activity

on particular sites and organises registrar education around this.

Q: How does this consultation fit with the Adherence to Evidence Based Medicine Consultation (Enfield 2017).

A: Any thresholds already agreed by commissioners would be included in the new care model. This review could take a few years to deliver change.

Q: How does this affect patients from South Hertfordshire who use our local hospitals, particularly Chase Farm?

A: We have spoken to CCGs in the surrounding areas about commissioning intentions and will continue to engage with them.

Q: SWOLEOC – what data has been published?

A: Good feedback generally from patients, GPs and consultants.

Q: Pre-operative/post-operative care – where is that delivered?

A: Not decided – would depend on centres.

Comment: Community transport provision may affect people's decision.

Q: What hasn't worked well in SWOLEOC?

A: There are more examples of this at the Lister than at SWOLEOC. Evidence from around the country will be reviewed.

Q: How far would you have to travel? Maximum number of miles.

A: The pre-consultation business case if developed would include transport business case.

Q: What is the timeline?

A: We are in the pre-consultation phase. If proposals are worked up, there would be an 18 months' work up before a consultation phase.

## **6.0 Commissioning Plans 2019-2020**

Graham MacDougall, Director of Commissioning presented an overview of Enfield CCG's commissioning intentions.

Every year we produce commissioning intentions that describe to local providers how we as an organisation intend to shape local healthcare services.

Commissioning intentions describe what services we want to buy and the health outcomes we wish to achieve for our local population.

Our Commissioning Intentions demonstrate how we will respond to our local population's health needs, local clinical priorities and the national priorities for the NHS as outlined by NHS England.

### **Questions**

Q: Do we have community matrons?

A: Yes, but the model may be changing

Q: Is there an I CAN navigator?

A: Age UK already provide some services

Q: How can we reduce A&E attendances

A: The NHS doesn't have a consistent out of hospital offer that can compete with the A&E brand which is popular with patients

## **7.0 Medicines Management – Encouraging self-care workshop**

During this session, there was an update of key national changes including: national consultation regarding prescribing of over the counter medicines and changes to prescriptions and the minor ailments scheme, which NHS England intend to decommission by the end of March.

The CCG is asking local GPs to follow NHS England guidance regarding over the counter medicines and asking patients to purchase simple treatments such as paracetamol, which is much cheaper to buy than it is to supply on NHS prescription.

### **Comments:**

- More patient education is needed – perhaps starting at school?
- Different populations have different needs
- If people don't get pain relief, they may attend A&E.
- What about financial circumstances? And not just unemployed people.
- Do local practices have social prescribers?
- Aware of patients asking NHS 111 for medication if GP won't prescribe – we don't have the data on this.

## **8.0 Questions for the Governing Body**

Patients asked a range of questions to the Governing Body about the local NHS.

Q: There are a huge number of meetings and committees at the CCG and across NCL. Can back office efficiencies be made?

A: We are looking at lots of efficiency changes and savings, including having these meetings at Holbrook House next year. The CCG is rationalising the use of

equipment, services, IT and printing. We are reducing the number of meetings and any duplication of staff attending them.

Q: A lot of practice nurses have a higher qualification – will the CCG be financing the GPs to give a pay rise to nurses?

A: We are now in a co-commissioning arrangement for primary care. It's a capitated budget for the size of practice and patient group. The CCG is trying to support practice nurse development. Nurses are directly employed by their GP practice.

Q: Are there GP federations in Enfield?

A: Yes, we now have one - Enfield Healthcare Cooperative Limited. All practices in Enfield are now working together to support pathways that meet the needs of the local population

Q: Does the CCG have any clout with the GP practices in terms of improving services particularly access?

A: Under the federated model, practices can work closer together to respond to patient needs and workforce challenges. Practices are now working together to provide extra evening and weekend appointments at the new primary care hubs.

## **9.0 Next patient and public engagement event**

The dates for PPE meetings in 2019 are being arranged. The venue for future meetings will be Holbrook House, Cockfosters.

For more information about PPE events or to join the CCG's stakeholder mailing list, please contact the communications and engagement team [enfccg.communications@nhs.net](mailto:enfccg.communications@nhs.net) or call 0203 688 2840.