


PATIENT PARTNERS BOARD
Minutes from the Meeting held on Tuesday 27 September 2016
Meeting Room 1, Walshaw House

Present:	Michelle Pilling	(MP)	Deputy Chair/Lay Advisor, Quality & Patient Engagement (Chair)
	David Rogers	(DR)	Service Partner, Communication and Engagement
	Joyce Hargreaves	(JH)	Hyndburn Locality Patient Representative
	Prudence Alderson	(PA)	Hyndburn Locality Patient Representative
	Heather Mulley	(HM)	Burnley Locality Patient Representative
	Neil Beecham	(NB)	Burnley Locality Patient Representative
	Malcolm Beck	(MB)	Burnley Locality Patient Representative
	Barbara Ashworth	(BA)	Rosendale Locality Patient Representative
	Andy Laverty	(AL)	Rosendale Locality Manager
	Jim Duxbury	(JD)	Ribblesdale Locality Patient Representative
	Susan Lockett	(SL)	Ribblesdale Steering Group Representative
	Amanda Higgins	(AH)	Project Officer, Healthwatch, Lancashire.
	Jerry Stanford	(JS)	Airedale Governor Pendle East and Colne
In Attendance:	Lisa Rogan	(LR)	Head of Medicines Management
	Angela Harlow	(AH)	Communications
	Debbie McCann	(DM)	Executive Assistant
Apologies:	Ronnie Barker	(RB)	Rosendale Locality Patient Representative
	Mary Thomas	(MT)	Pendle Locality Patient Representative
	Diane Owen	(DO)	PPG Irwell Medical Practice
	Shakil Salam	(SS)	Carers Link
	Naz Zaman	(NZ)	Lay Member, Equality & Inclusion

Min Ref:		ACTION
16.063	<p>Welcome and Introduction</p> <p>The Chair welcomed everyone to the meeting and introductions were made. The Chair advised that Heather Mulley had resigned her post on Burnley Steering Group and would therefore not be attending future Patient Partner Board meetings. Sincere thanks were offered to her for her support and valuable contribution to the group.</p>	
16.064	<p>Apologies</p> <p>Apologies were noted as listed above.</p>	
16.065	<p>Minutes and Actions of the meeting held on 26 July 2016</p> <p>The minutes of the meeting held on 26 July 2016 were approved as an accurate record and the action matrix was updated and is attached for reference.</p>	
16.066	<p>Matters Arising</p> <p>There were no matters arising not already covered on the agenda and no declarations of interest.</p>	

<p>16.067</p>	<p>Diabetes Model</p> <p>LR provided a progress report for the Diabetes Integrated Service Redesign in East Lancashire and the presentation is attached for reference.</p> <p>Following a protected learning event in April 2015 volunteers were asked to become involved in a Diabetes Task and Finish Group responsible for the development of the new service model across East Lancashire. The group has met every four weeks since June 2015 to develop a clear implementation plan with timescales and a new service model based on the clinical evidence and outcomes. East Lancashire has similar demographics to Leicester so the same model has been adopted.</p> <p>The service specification has three different elements:</p> <ul style="list-style-type: none"> ▪ Primary Care – Enhanced Diabetes Care – it is envisaged that Practices will provide enhanced care following mentorship and training including initiation and management of all treatments in line with NICE Guidance, locally approved guidance and the Health Economy Joint Formulary. ▪ Community Specialist Diabetes Care – supporting appropriate secondary to primary care shift of activity creating care closer to home ▪ Structured Diabetes Education to be delivered through either primary care, specialist team or other provider <p>Alongside the work of the Task and Finish Group the following enablers had to be developed:</p> <ul style="list-style-type: none"> ▪ A workforce and development strategy to ensure the primary care workforce was in a position to take on additional roles and responsibilities in diabetes management. ▪ An IT and estates strategy ▪ A communications and engagement strategy to ensure patients were involved in the process <p>Data on diabetes prevalence and activity across primary, secondary and community care was analysed alongside skill mix within existing clinics and services.</p> <p>The referral process for primary care has been developed to enable a central responsive assessment and triage. Patients will be reviewed quickly and referred on to the most appropriate service.</p> <p>The diabetes task and finish group due to become the Diabetes Governance and Performance Committee will continue to meet on a regular basis to review the outcomes from delivery of the new service model and track improvements over time both for primary care and the specialist service.</p>	 <p>5 Master Presentation _Diabet</p>
<p>16.068</p>	<p>Engagement around the prescribing of gluten free products</p> <p>As part of our regular reviews of services we commission it has been identified that we would like to review our policy on the prescribing of gluten free foods. East Lancashire CCG is proposing to stop prescribing gluten free foods.</p> <p>The NHS spends about £25 million a year on prescribing gluten free food. In 2015-206 East Lancashire CCG spent £206,000 on gluten</p>	

	<p>free products through the NHS. This can be re-invested into alternative patient services.</p> <p>We are inviting local patients, stakeholders and local clinicians to tell us their views on our proposal to stop prescribing gluten free foods by completing a questionnaire during a six week on line consultation. The responses will be used to produce a report which will help to inform the CCGs final decision.</p> <p>A draft questionnaire will be circulated to members for feedback on the proposal and structure of the questions to Angela Harlow by 14 October at angelaharlow@nhs.net</p> <p>Focus groups will be arranged with patients and the Coeliac Society will be contacted for feedback.</p> <p>Following discussion the following comments were noted:</p> <ul style="list-style-type: none"> ▪ Gluten free products are widely available at affordable prices ▪ 4 weeks was agreed as sufficient time for consultation <p>The Chair thanked Lisa Rogan for attending and she left the meeting at 4.25pm.</p>	DM
16.069	<p>New Models of Care Consultation – Next Steps</p> <p>DR provided members with the initial headline results of the East Lancashire Primary Care Consultation.</p> <p>The 12 week consultation was undertaken between April and July 2016. 2129 responses were received via an on line survey as well as paper surveys and interactive podiums in GP surgeries and 130 from ELMS service users and 84 Fairmore users to inform provider contract reviews.</p> <ul style="list-style-type: none"> ▪ Over a third of responses were from Hyndburn residents and a small proportion of responses came from people who live in Blackburn with Darwen or other areas outside of East Lancashire. ▪ There have been high levels of agreement with the principles which have informed the Primary Care model ▪ 70% of residents agree with the proposed Health Hubs model as an alternative to the current HAC arrangement. ▪ 75% of residents agree with the proposed new model of Primary Care in East Lancashire ▪ Access to local services, GPs and staff is very important to residents ▪ There is some praise for the current walk in centre arrangements and strong views that it should not close. <p>A full consultation report will be taken to the September Primary Care Committee and Governing Body.</p> <p>Congratulations were offered to David Rogers and his team with regard to the Consultation Programme.</p>	

16.070	<p>PPG Workshops It was agreed to arrange a workshop in late January to which all practices will be invited to discuss the development of PPGs.</p>	
16.071	<p>Healthy East Lancashire Photograph Competition Angela Harlow from the Communications team attended to introduce the Healthy East Lancashire photograph competition. The public have sent in photographs depicting what Health & Wellbeing means to them. 14 pictures will be chosen to be included in a calendar. Packs will be circulated out to the group for members to vote with clear instructions.</p>	DR/AH
16.072	<p>Items for Information</p> <p>16.073.1 Locality Map</p> <p>16.073.2 STP Engagement Guidance</p> <p>These items have been circulated for information and taken as read. Comments and feedback welcome.</p>	
16.073	<p>Any Other Business and Close</p> <p>16.073.1 Future Meetings A schedule of meetings for 2017 will be circulated with the next agenda taking into account members diary preferences.</p>	DM
16.074	<p>Date and Time of Next Meeting PPG Workshop – 25 January 2017 – Training Room, Walshaw House</p>	