

Date of Meeting	29 January 2014, University Medical Practice
Attendees	<p>Carol Munt, (Chair) Dr Lister</p> <p>Tom Lake, Pembroke Surgery</p> <p>Shaheen Kausar, Chatham Street Surgery</p> <p>Libby Stroud, Pembroke</p> <p>Sheena Masoero, Healthwatch</p> <p>Mike Spong, Chatham Street Surgery</p> <p>Martha Klein, London Street Surgery</p> <p>Christopher Mott, Milman Road (Dr Kumar) Surgery</p> <p>Douglas Dean, Westwood Road</p> <p>Dr Ishak Nadeem, GP, Grovelands Medical Practice and CCG Governing Body</p> <p>Karen Grannum, NHS South Reading CCG</p>
Apologies	Apologies were received from: Laurence Napier-Peele, Helen Andrews and Joan Lloyd.

1. Minutes of the Last Meeting and Matters Arising

1.1 The minutes were approved.

1.2 Sheen Kausar gave an update on the previous Nepali health event in November last year. Ninety people over three days attended and received health checks, diabetes information and lifestyle advice. Another event will take place between 17-20 February 2014. KG agreed to ask the Management Executive for clinical support.

Action: Karen Grannum to ask Management Executive for clinical support [**post meeting note:** This was raised at the meeting on 5.2.14. A request will be made to nurses at their quarterly meeting on 12.2.14].

2. Presentation: Role of Public Health

Kim Wilkins, Senior Public Health Programme Manager at Reading Borough Council, gave a presentation on the role of Public Health [attached with the minutes]. She said there are three domains of Public Health (health improvement, health protection and health services) and that it is a broad discipline. It is evidence based and driven by approaches that include: population, partnership, evidence, prevention and health inequalities. A particular focus is on the 'upstream working', looking at the factors that contribute to ill health.

Q: What is the picture across Reading?

A: Reading has seven years life lost between the deprived and privileged populations which is in line with the national pattern.

Q: How do you decide on your priorities?

A: We use the Joint Strategic Needs Assessment (JSNA). This is a mechanism to pull together all the health and wellbeing needs of the population. The production of the document is a statutory requirement and should be used to inform the local priorities of the Health and Wellbeing Board and influence health and wellbeing need in plans. It is published although still in draft form at this stage but will be signed off on 25/26 March 2014. It is developed across Berkshire and will be a web based resource to make it more user-friendly.

Q: Why can't it be in paper format for those who don't have online access?

A: The new format should be very easy to use and therefore more accessible than previous versions. It will contain CCG and Ward level data. There will be a paper summary document and sections are printable.

Q: Why is there no reference to either 'health or wellbeing' in the document title?

A: This is a good point. The title is taken from the Health and Social Care Act, but should be added into the Council online search terms so it is easy to find.

Q: Does it include information or initiatives?

A: Both. There are some statistics and tables for people who want detail, for example Commissioners. However, there are also shorter topics, kept succinct for people who are interested only in top level information. It is a challenge to meet the needs of everyone as there are a lot of expectations to meet.

Q: So this document has little value to the 'average man on the street'?

A: Possibly, but it needs to be produced and used. It is acknowledged that it is not perfect, but it does represent the best there is. It will, for the first time, include a section on carers.

The meeting thanked Kim for attending and giving an excellent presentation.

3. Eye clinic appointments

Carol Munt introduced this item by explaining that a delay in eye appointments can cause blindness which is unacceptable. She explained that there were ongoing issues with the service at the Royal Berkshire Hospital due to a lack of trained ophthalmic nurses and consultants resulting in a reliance on locum cover. Although the acute service seems to be operating well, Referral to Treatment times for routine appointments are not.

Dr Ishak Nadeem updated the group. He said that GPs will triage in an emergency, but there is a problem with routine waits. The Governing Body Secondary Care Consultant, Dr Derek Fawcett, has been working with the department to increase the number of appointment slots at weekends to reduce the backlog. The waiting times are being monitored through the Planned Care Programme Board (led by Newbury CCG) and at our Governing Body meetings.

The Patient Voice agreed to revisit this issue in six months.

4. 2014/16 Plan on a Page and PPE Plan on a Page

Dr Ishak Nadeem produced the first submission of the CCGs Plan on Page for the Group. He acknowledged that this is not yet in 'patient friendly' language as it has been produced for an internal NHS audience. A patient version is currently being worked on and will go to Patient Voice when near completion.

The planning documents comprise a five year strategic plan (covering the four Berkshire West CCGs) and a two year operational plan (which all four CCGs will produce). There is a strict planning timetable laid out in the NHS England document: *Everyone Counts – Planning for patients 2014/15 to 2018/19*. Operational and strategic plans will be discussed at the Health and Wellbeing Board on 14 February. They are still documents in progress with final sign off for the operational plan on 4 April 2014 and the strategic plan on 20 June.

Christopher Mott added that through the planning guidance he hopes there will be a PPE subgroup to bring about the public engagement element. The patient is extensively mentioned in the planning guidance but little in the way to 'how' to engage. The PPE Plan on a Page went to the Management Executive and when complete will be incorporated into the operational plan.

5. Q2 Report of findings from GP surgery visits

Sheena Masoero, Healthwatch Reading, presented Q2 of her report to improve access to Patient Participation Groups (PPGs). She reported that she has visited a number of surgeries to look at their information about PPGs and ask the Reception staff questions around what they are and how to join. She has captured these findings in her report. There is information about how to join PPG groups on the Healthwatch website: <http://healthwatchreading.org.uk/patient-participation-groups-ppgs-2>.

6. Any other business

6.1. Carol Munt reported that the Forget Me Not symbol is now used on the elderly care ward at Royal Berkshire Hospital to identify patients who have dementia (and delirium) .

6.2 Carol Munt recently attended a conference by the ISCG in London regarding electronic patient records. There is wide public concern over confidentiality.