

Improving Health Across Our Community
Tuesday 22 September 2015
Banks Leisure Centre

This Health Network Event, held in partnership with the NHS West Lancashire Clinical Commissioning Group (CCG), focused on improving health across our community. The event included West Lancs CCG's Annual General Meeting to which members of the public were also invited.

The event was well attended with 74 individuals from 33 different organisations present as well as seven members of the public. There were also 21 information stands from different voluntary and community groups as well as the private and statutory sectors.

Introduction – Greg Mitten, Chief Officer, West Lancs CVS

Greg opened the event by thanking everyone for attending and introduced the theme of the day – Improving Health across our Community. He said that the event will give an opportunity for delegates to inform the CCG and other health providers of their experiences in West Lancashire and how services can be improved.

He also discussed the role of the Voluntary, Community and Faith Sector (VCFS) in improving health across the community. He stated that the VCF sector is part of the solution and should be involved in shaping the health services.

Greg then introduced Mike Wedgeworth, former Chair of Third Sector Lancashire and current Chair of Healthwatch Lancashire.

Improving Health Across Our Community – Mike Wedgeworth, MBE, Chair of Healthwatch Lancashire

Mike introduced Healthwatch and gave a brief background to the organisation and explained that although Healthwatch are currently part of Lancashire County Council, they will become independent on the 1st April 2016. He then went on to discuss what Healthwatch does and its role and responsibilities and stressed the importance of working together.

Mike explained the role of Healthwatch is to ensure the views and experience of people of Lancashire is heard by those who commission, provide and regulate services. Healthwatch's strategy which has 4 key objectives:

- engage
- signpost
- gather and analyse information
- collaborate and challenge where necessary

They are currently carrying out a scrutiny exercise on people's views of residential care. Mike also stressed the importance of working together with the voluntary sector.

The full presentation is available on the health pages on the CVS's website – www.wlcvs.org.

Highlights, Annual Accounts and Plans for the Future – Mike Maguire, Chief Officer and Paul Kingan, Chief Finance Officer – NHS West Lancashire Clinical Commissioning Group

Paul Kingan gave an overview of the structure of the CCG in West Lancashire who have been in existence for two full years now following the shadow year. He explained some of the challenges such as geography as West Lancs patients often go to Merseyside or Wigan for treatment and explained which services the CCG commissions and that specialist services are commissioned through NHS England. He went on to stress that the CCG's 'mission' is to integrate services and work closely with specialist services and public health.

He discussed the CCG's Improvement Interventions:

- Cardiovascular disease (CVD)
- Cancer
- Respiratory
- Mental health / dementia

and explained that the aim is to catch these early and prevent them from escalating OR to manage them better further down the line.

Other areas of work include:

- Children and young people - health and wellbeing
- End of life care
- Primary prevention

Paul then discussed the breakdown of the budget. The budget for 2014/15 was £137.7 million with £76.9m of this being spent on acute care. In contrast £12.6m was spent on community care, the challenge being how this can be increased without reducing services in other areas.

More about this is included in the CCG's strategy which can be found on their website – <http://www.westlancashireccg.nhs.uk/>

Mike Maguire then discussed some of the highlights of the past year which included their work with Macmillan to support the many people who now survive cancer. Together the CCG and MacMillan are working on raising awareness of signs and symptoms for earlier diagnosis, educating GPs, increasing physical activity and setting up local information hubs.

Mike also talked about some of the new services including Cardiology – a new heart failure service in the community commencing in October 2015 with more clinics closer to patients' homes which should lead to less visits to hospital and shorter waiting times.

There are also two new 12 month pilot projects improving direct access to diagnostics which provide GPs with direct access to MRI scanning and ECG monitoring.

Mike explained that the CCG is also currently promoting the Choose and Book system which is a new electronic referral system offering a choice of date and time of appointment.

Other projects include the Community Paramedic Scheme offering alternatives to emergency care routes, the continuing Acute Visiting Service pilot as well as a North West Ambulance Service fire responder pilot running across Lancashire, with which Ormskirk fire station is involved.

Mike also discussed the challenges faced by the CCG, including workforce issues such as the shortage of GPs and practice staff and highlighted the work carried out around health inequalities and the Seven Wards in Skelmersdale report.

The presentation concluded with a look towards the future outlined in the Five Year Strategy.

To see the presentation in full go to the health pages on www.wlcvs.org

Following a networking lunch the event continued with a Question and Answer session. The panel consisted of Dr John Caine (Chair of WLCCG), Mike McGuire, Steve Winterton (Lancashire Care Foundation NHS Trust), Claire Heneghan (Chief Nurse), Rob Gillies (Southport and Ormskirk Hospital) and Jackie Moran (Head of Contracting, Performance and Quality). It was chaired by Greg Mitten, West Lancs CVS.

Various questions were submitted by attendees. Although the panel provided answers on the day, some queries and concerns will be followed up directly with individuals following the event.

The notes below provide a simple snapshot of the Q&A and are not an exact recording.

Q: Attendee asked which four GP practices will be offering the MRI scanning.

A: The CCG panel responded saying the practices are Parkgate, Dr Littler, Manor Primary and Stanley Court.

Q: Attendee raised concerns regarding difficulty in getting urgent appointment with GPs and how this difficulty threatens the intervention role that the VCFS sector can often have to support patients.

A: The panel explained that NHS England commissions GP practice services but that it can be difficult to standardise access. The response acknowledged the problem and invited the attendee to share more details after the event for the CCG to look into this fully. The panel also explained that the vision for joined up care would help manage those patients in crisis and that by making improvements to community services and having multi-disciplinary teams (MDTs) in place would ensure those patients would be supported and known to the MDTs. It was explained that the 5 year strategy was in place to support this but this would take time and not offer an immediate solution.

Q: A member of the audience asked what data the CCG has about Transverse Myelitis (TM) and asked for a show of hands in the panel and audience of how many people had heard of this condition.

A: The CCG chair talked about this condition and how it affects patients. He also explained how neuro falls into specialist commissioning (NHS England).

(The CCG chair and chief nurse had a direct conversation with this individual following the event to understand the difficulties they have faced.)

Q: A point was raised about access to GPs and whether this was a case for merging practices so a more comprehensive service could be provided.

A: The panel explained that it is not always the smaller practices that face more issues, and how local practice are self-employed and independent so the needs vary across West Lancashire. In the role of the CCG, the panel confirmed it can encourage best practice and practices to work together, and help with issues such as recruitment.

Q: An attendee raised a query about telephone triaging at their GP practice and how it can take over a week for a phone call back. Although the individual recognises this allows the

practice to see more patients, when someone is unwell this delay is deemed as unhelpful. A suggestion was made about the walk-in centres role in supporting this and also how recruitment as a national issue impacts this demand on practices.

A: The panel acknowledged that every practice develops its own approach and agreed that recruitment is a major issue both nationally and locally in West Lancashire.

Q: An issue was raised about services for military veterans including specialist advice and access to GPs.

A: Lancashire Care explained about its military veterans care contract with Pennine Care, which patients can self-refer to, as well as be referred via their GP.

Q: The attendee explained it had been advised going through the NHS was a “waste of time”. (Lancashire Care representative agreed to take up this query following the close of the panel Q&A in order to examine the circumstances and reach a solution. The CCG and CVS confirmed they were signed up the covenant to support veterans).

Q: Question was asked about whether the CCG commission alternative therapies, such as hydrotherapy and mindfulness, as well as drug based treatments. Attendee explained that patients with fibromyalgia would benefit from this.

A: The CCG chair stated that as a whole the NHS does not commission complementary therapies and that this is largely due to lack of scientific clinical evidence. The panel stated it appreciates the value placed on treatments like this but explained that this evidence needs to be pushed as national issue.

Q: Attendee asked why they need to go to Burscough to have an assessment at a foot clinic when the same service is offered in Hants Lane.

A: The panel acknowledged the issue and stated that this is a good example of what they are hoping to change. Southport & Ormskirk Hospital representative agreed stating that some services are very suited to a community setting but that ultimately what can be delivered will come down to availability of those skilled staff and other resources. The panel acknowledged the importance of addressing efficiencies to help tackle limited resourced. The benefit of the Choose & Book system was discussed.

Q: A question was raised about his personal circumstances in the case of his mother who needed test results from the GP practice quicker and how the delay negatively impacted them and the care that followed.

A: Panel explained that every practice will have its own approach to reading test results and how they deal with urgent ones. The individual was invited to share more details after the Q&A came to a close. The CCG chair explained that the IT is being put in place to help resolve issues such as this.

Q: The chair of the Q&A invited the Southport & Ormskirk Hospital representative to comment on the future.

A: The benefit of the new patient record system was explained, as well as other implemented systems. The rise in the use of technology was discussed, explaining how these efficiencies will mean staff can spend more time with patients and less time on bureaucracy. The CCG’s chief nurse explained about a new system called Flo, which will help people access support and information about themselves. The iPad system in Truro was discussed and the CCG stated it had visited the area to witness it first-hand. The chair of the Q&A also discussed the benefits of Rally Round to further help the community support themselves and each other.

Q: A question was raised about how the CCG can financially support the Voluntary sector.

A: The CCG's chief finance officer explained that one of the first things the CCG did was to give a significant grant to this sector via West Lancs CVS. It was stated that the CCG very much values the role of the voluntary sector in West Lancashire and will do its very best to provide additional funding in the future, subject to the financial constraints and challenges ahead. The panel acknowledged the role these groups play in lifestyle changes and how this remains an important factor to the CCG.

Q: A query was raised about access to pain clinics.

A: The CCG stated it understood this as a current issue and that a current piece of redesign work on musculoskeletal services would hopefully address this. The CCG also acknowledged it is aware it is not offering the same service as neighbouring areas.

Q: A point was raised about having a central register relating to advance care plans so ambulance crews etc could access to see more information

A: The panel stated that individual care plans are crucial to the vision for joined up care discussed earlier in the presentations. The Southport & Ormskirk representative revealed the latest place of death data which was positive and showed that Southport & Formby, and West Lancashire, are bucking the national trend. There was general agreement that advance planning should be an issue for everyone and not just medicalised. The CCG went onto explain its work around end of life campaigns in support of Dying Matters and this issue.

Q: The topic of technology was raised again with a concern about how people who are not online are supported and not excluded.

A: The CCG stated that no system is solely online as the population is simply not ready for that. There was discussion about local work already ongoing and local IT training. Panel invited people to let them know where the gaps were and co-design the solution.

If anyone would like to raise a question with the CCG directly, relating to the presentations at this event or on another issue, please contact myview@westlancashireccg.nhs.uk

Feedback

Below is a selection of some of the comments made after the event:

- It was good to have a contact list of the other organisations and speakers. Overall a good event. Well done to all responsible
- Very good opportunity to network
- Individual points at times - well-made but did tend to go on too long
- Once again, very well organised
- Q & A at the end - microphones not loud enough