



Meeting of the Community Engagement Partnership

Monday 16th April 2018
5.00 – 7.00pm
The Key, Ipswich

PRESENT:

Vicky Thomson-Carr	Co-Chair	VTC
Lynda Cooper		LC
Pauline Quinn	IESCCG GB Lay Member for Patient & Public	PQ
Linda Hoggarth		LH
Richard Squirrel		RS
Caroline Webb	Involvement	CW
Claire Martin	Co-Chair	CM
Susie Mills		SM
Tony Bone		TB
Mike Hope		MH

IN ATTENDANCE:

Maddie Baker-Woods	Chief Operating Officer, IESCCG	MBW
John Troup	Acting Head of Comms, IESCCG & WSCCG	JT
Marielena Giner	Patient & Public Involvement Officer	MG
Lisa Nobes	Director of Nursing	LN

APOLOGIES:

Jo Marshall	Voluntary Sector Representative	JM
Gill Jones	Healthwatch Suffolk	GJ

This was a closed meeting.

No	Item
1	Welcome and Declaration of conflicts of interest
	<p>CM welcomed everyone to the meeting. Apologies for absence were noted.</p> <ul style="list-style-type: none"> The minutes of the previous meeting held on 12.03.18 were agreed as a correct record, with the exception of noting that the meeting had been held at The Key, Ipswich, and not The Cedars, Stowmarket. <p>There was a declaration of interest disclosed by CM (Co-Chair) that she works for one of the NHS pharmaceutical suppliers.</p>

2	Action Log – review and report on actions
	<p>The Action Log was reviewed and updated as follows:</p> <p>Independent pharmacies: A suggestion was made that it would be helpful for patients to know which pharmacists were at individual pharmacies and when.</p> <p>Agreed Actions: To find out what each pharmacy is contractually required to provide as the first action. Agreed further Action: Once this information has been sourced for it to be included on the 111 app.</p> <p>Urgent care specification:</p> <ul style="list-style-type: none"> • It was acknowledged that as a CEP we recognise the complexity of this issue. A suggestion was made for the CEP to look at psychiatric liaison and how patients/staff feel about this to form some future actions. • A query was raised about multiple assessments. When the 111 online system is used for a mental health concern, the recommendation is for patients to go to A&E. <p>It was agreed that a representative from 111 be asked to attend a CEP meeting to provide an overview on how the online system is working. Agreed Action: MG and MBW to explore this.</p> <p>Funding panel training:</p> <ul style="list-style-type: none"> • It was confirmed that training will be held on 29.05.18. <p>Agreed Action: MG to action this training and update CEP accordingly.</p> <p>Wellbeing website: It was confirmed that following a meeting with NSFT staff, changes have been made with regard to the split between Norfolk and Suffolk. This should go live in May along with the other changes that have been recommended.</p>
3.	Member Updates and Current Issues
	<ol style="list-style-type: none"> 1. SH reported that the 'Primary Worker' role has gone out to advert again as the person NSFT appointed is no longer going forward with the job offer. There is due to be an inspection which may put the whole initiative in jeopardy as the money for a primary worker has not been spent. 2. VTC reported that she sat on the interview panel for the new Lay Member. She also met with MG and LH to discuss the patient conference. 3. RS reported that he had spoken to Susie Howlett at NSFT about suicide being someone's 'choice'. She has confirmed that this is not something the NSFT support. The NHS appear to be giving out the message that it is an individual's choice. It was felt that it is important for there to be a consistent approach/message across the board. RS asked for this to be raised with the STP for discussion. <p>RS also reported that the 111 online system only allows the user to be 'male' or 'female', though a disclaimer is provided that says they are not discriminating against gender. He suggested that it could say; 'this is for biology/statistical reasons' to help people understand why they have to give their gender.</p>

	<p>Agreed Actions:</p> <ul style="list-style-type: none"> • MBW to explore the strategy being discussed at the next STP meeting • MG and MBW to find out more about 111 and see if this is viable <p>4. CW reported that she had received feedback and some interesting data from a recent 360 meeting where they had looked at the number of A&E attendees from Care Homes.</p> <p>5. LC reported that Julie Irving (CCG) has informed her that over 40% of people have made a decision to share their information.</p>
4.	CCG Update
	<p>MBW provided the CCG update, the key points of which included:</p> <ul style="list-style-type: none"> • The performance of all commissioned services is going well overall. A&E and some of the cancer targets remain challenging. • The CCG has a fixed financial budget and this year will meet that budget. This will enable the CCG to support transformation, social prescribing and additional support elsewhere across the system. The CCG will have a slight increase in budget for 2018/19, which will enable them to give the vital uplifts required across services. • The results and feedback from the annual 360 Survey are available online for members of the public to access. • Last week the CCG had its Annual Assurance with NHSE. The outcome of this will be known in July. • We are now celebrating 70 years of the NHS; if there are any thoughts on how this can be marked please contribute ideas to the CCG via email. • The draft Annual Report has been submitted to NHSE. Once the report has been finalised, it will be available to members of the public via the website (June 2016). <p>Following on from the update, a query was raised about the ten beds on Lark Ward (NSFT unit) which have been closed. Agreed Action: LN to discuss with colleagues and follow up.</p>
5	Comms and Engagement Update
	<ul style="list-style-type: none"> • A presentation was given on the Toolkit and Framework, which explained the uses of the materials and how it has been drawn up through partnership working. It was agreed that we have an excellent suite of materials, which has been through the Clinical Executive and the Governing body. PQ was thanked for her input, guidance and contribution to this work. • It was reported that Ed Garratt has requested to head the partnership champions group when PQ leaves the CCG, It was agreed that this demonstrates that the Chief Officer fully supports partnership working within the organisation. • The CCG has been undertaking an audit, which will feed into the Communications and Engagement Strategy for the year ahead. This is an on-going piece of work. <p>It was confirmed that the date for the Patient Conference will be held on Tuesday 26 June. CEP members input would be welcomed via email. A</p>

	suggestion was put forward for the inclusion of a topic on alcohol and drugs and the consequences/impact that these have on individuals and families.
6.	Goodbye presentation
	MBW thanked each individual who was stepping down from the CEP for their commitment and contributions as well as the whole group. A short presentation followed.
8.	Next Meeting
	Monday 14 May 2018, The Key, Ipswich at 1700-1900 pm.