

**Date: Thursday 2 October 2014**

**To: Wisbech LCG Groups**

**Subject: General NHS matters & Attendances at Wisbech Local Clinical Commissioning Group (LCG) and Cambs Clinical Commissioning Group (CCG) Events as LCG & CCG Patient Representative.**

**Purpose: Information.**

***Please see end of report for glossary of initials.***

There are a few matter I would like to address this month and to remind you of. You will recall that in my last report I drew your attention to "Healthwatch". To remind you Health Watch Cambridgeshire is the local section of a countrywide network of Healthwatch organisations that are linked to Healthwatch England who intern report to and advise NHS England and have links with the Quality and Care Commission and Monitor, a monitoring and sign posting service compiling information on the success or otherwise of health initiatives, complaints services and in general the way the NHS and local Authorities are delivering health services in their areas. I pleased that Parson Drove PPG is hosting Angie Ridley from Healthwatch at their regular meeting at 6:30 on the 19<sup>th</sup> of November at Parson Drove Surgery. I am sure that members of other PPG's would be welcome if so please contact the Practice manager Ms Joe Purvis. On 01945 700223. Better still why not invite her to your own PPG. I will be happy to arrange a contact if required.

The Procurement Programme for the Older Peoples services and a recommended provider for the next five years Uniting Care Partnership – a consortium led by Addenbrookes and Peterborough NHS Trusts have been selected as preferred bidder. Preparations for the Provider to commence service transition in a smooth and above all safe way will start immediately with their contract starting on the 1<sup>st</sup> of April. The terms of the contract ensure that 20% of the remuneration will be "Patient Outcome" driven so we can look forward to holding them to their pledges for an integrated service with fewer "handover problems" between different sections of the service. Rest assured we as patient reps and your LCG Board will be monitoring the performance against promises very carefully. We hope to arrange a meeting with UCP as we will refer to them in the near future.

I have recently attended the first CCG AGM and report. I will not deal with this in great detail as the full report and accounts are available on the CCG website. However in most areas the service targets have been met or exceeded. A&E and unplanned Hospital admissions are still a difficult and challenging area especially for our own patients at Queen Elizabeth Hospital King's Lynn, which disappointingly again has failed many of its targets and continues in special measures for another six months. Please let me know if you have had experience Good or Bad or Neutral from any of our secondary care Hospitals.

I digress! Sorry! Reverting to the CCG report to say that finances were operating in a difficult enviroment is an understatement. Our CCG one of the largest in the country receives one of the lowest per capita funding allowances. A situation, which has been challenged at NHS England, so far unsuccessfully. If you feel strongly, an email to your local MP might at least make them aware. The result was that for the last financial year the CCG looked originally to over spend by £800k however this was halved by some difficult and

rapid savings to £400k. It should however be put into the context of a Budget of £888m in other words just 0.5%.

Next year will be just difficult having to make the NHS required economies and efficiency saving and recover the deficit. Watch this space.

The East of England Ambulance Trust is one of the commissioned services, which is still causing concern. However recent staff recruitments and training are starting to feed through to the front line. We will be watching and questioning to ensure this continues to improve response and attendance times.

For more detail on the Annual Report please take the time to read the full document online.

The next matter of importance for the Patient Groups will be the formulation of the CCG's five year plan. We will be involved in the development of the plan at all stages and if you have any areas of interest or concern on the direction which the CCG should be going on particular topics please let me know.

I am pleased to close with some good news and that is the Phlebotomy service seems to be settling down and working well. Waiting times are still extended early morning but during most of the day I have received positive reports from several service users of efficient friendly and quick service. I can also personally confirm this from my own experience.

At the PRG group this month we have spent a considerable time discussing with the CCG the policies and principals that govern what Treatments and Medication will be funded and which will not. It is very important to understand that resources are finite and limited by a statutory obligation on the CCG to work within its NHS England set Budget.

Therefore whilst any one may not agree that a particular treatment or procedure is or is not funded the reasons behind that must not be arbitrary, applied fairly to all patients and in accord with a set of laid down policies. Some of these will be set by Nationally by 'NICE' and some are set locally after much discussion which do include not only clinicians but patient representatives and Lay members on the responsible committees. There are also several layers of appeal and challenge to any decision which may be disagreed with.

Inevitably because some of these decisions are made by our own CCG there may well be a post code lottery in areas such as Plastic / Cosmetic surgery and Assisted fertilisation treatment. With some CCGs funding certain procedures and others not.

Until NHS England decide to set these policies nationally (which they seem unwilling to do) these variations are unavoidable.

However all of our CCG policies and guidelines to clinicians set by this process are available for public scrutiny on the CCG web site. If you look at them and wish to comment do not hesitate to use the feedback facilities on the site or email me and I will raise them. I cannot promise change but I can promise that your views will be heard.

One fact of concern to myself and my colleagues which we have learnt that employment opportunities or consequential loss of employment cannot be taken into account in any

particular funding decision. This is based on a ruling from the court of appeal and is binding on all CCG's. If as we are you are also concerned by this it can only be changed by Government policy so your MP is first port of call. They may well be willing to listen as the election looms next year.

A snippet of news a new CEO – (Chief operating Officer) Tracey Dowling has now been appointed. We hope to meet her as soon as possible after she takes up her new position.

Thank you for your time in reading this and as always my contact details are below.

*Do you Choose Well when selecting a healthcare service in Cambridgeshire or Peterborough? Complete a short survey here:*

<https://www.surveymonkey.com/s/capccg-urgentcare>.

*Thank you*

*My best wishes to all,*

*John Grevatt*

*Patient representative - Wisbech LCG – Cambridge and Peterborough CCG – PRG -Fenland Health and wellbeing group.*

**How to contact me:**

**Please feel free to contact me as Groups or individuals if you have a concern you would like me to take to the Groups I attend. All the surgeries have my contact details.**

**What I would like to receive is your patient experiences good or bad at either GP surgeries or Hospitals or indeed any aspect of NHS treatment and your suggestions for improvements.**

**I regret I cannot undertake matters that concern active complaints concerning individual Patient – GP / Hospital treatment as these are matters for the surgeries / Hospital trusts themselves through their established complaints procedures.**

**I am happy to receive Patient Representative Communications at address below, although naturally this would be confidential to Patient Participation Group Secretaries or Practice Personnel. I am also happy to receive email communications on my NHS email address from anyone who wishes to bring something to my attention either as an individual or a group.**

**Please head any emails with "Patient Rep" in the subject line to [john.grevatt@nhs.net](mailto:john.grevatt@nhs.net).**

***Important Note: The above email address is a confidential and secure NHS email address and may be used in confidence for communications relating to my role as Patient Representative and for related NHS matters but may not be used for Personal or Commercial communication.***

The postal address is:

**J. Grevatt, LCG mail, Ashtree Lodge, Luttongate, Gedney Hill, Spalding, Lincs, PE12 0QH.**

**Potted Biography:**

**It is worth noting for those that do not know the area or me; whilst my postal address is Lincolnshire, I am 69, married with two children and a much loved Granddaughter and we live just over the county boundary and very close to Parson Drove which is our home Surgery and has been for nearly forty years. I have spent most of the last 30 years before my retirement as a Managing Director of a Wisbech based subsidiary of a national construction and development company and the last 10 years following my retirement from that running my own Business Consultancy.**

**Wisbech is where the majority of our social life still takes place so I have a reasonable knowledge of Wisbech and its strengths and vulnerabilities. As a matter of interest after leaving education which was heavily science biased my first job was as a very junior Technician in the Pathology department of Epsom District Hospital in Surrey, a career path I did not pursue (sometimes to my regret).**

***Much needed Glossary Notes!***

***CCG Cambridge and Peterborough Clinical Commissioning Group (responsible for commissioning services throughout the Group area and setting strategies also monitoring the LCGs and the appropriate LCG Budgets);***

***LCG Local Commissioning Group (in Context referring to the Wisbech LCG responsible for commissioning Clinical services in their Local Area using their local budgets);***

***PRG – Patient Reference Group (this is attached to the CCG and is composed of Mandated [voting] representatives from the LCG's established to monitor and review CCG policies and decisions from a patient's perspective;***

***PPG – Patient Participation Group (attached to individual Surgeries these can be on line or physically meeting on a regular basis ).***

***CCO - CCG Chief Clinical Officer***

***FANS - Fenland anti-coagulant service***