

Minutes of the Nottingham and Nottinghamshire Patient and Public Engagement Committee held virtually on Tuesday 26 January 2021 from 2 pm to 4 pm

Attendees;

Sue Clague, Chair
 Jasmin Howell
 Colin Barnard, Patient Leader/Diabetes
 Teresa Burgoyne, Nottingham West
 Michael Conroy, My Sight Nottinghamshire (joining at 3 pm)
 Kerry Devine, Improving Lives
 Gilly Hagen, Patient Leader/Sherwood Patient Participation Groups
 Roland Malkin, Nottinghamshire Cardiac Support Group
 Paul Midgley, Rushcliffe
 Helen Miller, Healthwatch Nottingham and Nottinghamshire
 Daniel Robertson, Nottingham and Nottinghamshire Refugee Forum

In attendance (NHS Nottingham & Nottinghamshire Clinical Commissioning Group's Staff):

Julie Andrews, Engagement Manager
 Alex Ball, Director of Communications and Engagement
 Lewis Etoria, Head of Insights & Engagement
 Jane Hufton, Engagement Assistant (minute taker)
 Simon Oliver, Senior Cancer Manager

Apologies for absence were received from;

Chitra Acharya, Patient Leader/Carer
 Trevor Clower, Patient Leader/Carer
 Mike Deakin, Nottinghamshire County Council
 Amdani Juma, African Institute for Social Development

NN/87/01/21	Welcome and introductions
	Sue Clague welcomed everyone to the Nottingham and Nottinghamshire Patient and Public Engagement Committee (PPEC) meeting and extended a warm welcome to Alex Ball, Director of Communications and Engagement for Nottingham and Nottinghamshire CCG.
NN/88/01/21	Declarations of interest
	Sue Clague reminded PPEC members of their obligation to declare any interest they might have on any issues arising at the meeting which might conflict with the business of the CCG and any items on this agenda. No declarations were made.
NN/89/01/21	Minutes of the last meeting
	The minutes of the last PPEC meeting held on 22 December 2020 were agreed as an accurate record of the discussion that took place at that meeting.
NN/90/01/21	Matters arising including Action Log
	Sue Clague, Chair, updated the group on the informal drop in session which was held for members of the PPEC with the Chair and Vice Chair. Changes had been suggested that would help PPEC meetings to function more effectively;

1. Speakers to introduce themselves before presenting their agenda item.
2. Members are encouraged to use the chat function to make a comment which, if time constraints require it, could be answered outside the meeting.
3. Papers submitted to members prior to the meeting to include a front sheet clarifying essential reading and background reading.
4. Closure of actions within the action log to be confirmed rather than a passive closure of an action.
5. A summary of key messages arising from the meeting would continue
6. PPEC information to be uploaded to the CCG website.
7. The informal drop in sessions would continue every other month

Julie Andrews provided updates on the action log as follows;

- Amended presentation of document to incorporate an extra column 'Further Action Required'.
- Completed actions were highlighted and confirmed by PPEC members.
- NN/78/11/20 Quarterly patient experience team reports to be reviewed to assess their suitability to update PPEC members on themes and trends.
- NN/82/11/20 A stakeholder reference group to support transition of patients to the Platform One Practice is being established. A further briefing would be presented to the Health Scrutiny Committee and PPEC in February.
- N/82/11/20 The PPEC effectiveness template 'A' for the item on the Platform One Practice would be reviewed as part of the work of the stakeholder reference group and transition process.
- NN/70/11/20 Membership for the task and finish group to review PPEC's effectiveness as a committee was requested. The work to be reviewed is "Understanding experiences of the children and young people's emotional wellbeing and mental health early intervention and training pathway" and "Recovery Engagement". This would be led by Jasmin Howell and reported to PPEC at the end of March. Jasmin Howell asked members if they wished to volunteer, to email her and a meeting would be arranged.
- NN/72/20 NHS Oversight Framework covering patient and public engagement had been reviewed and an action plan had been developed that would be brought to PPEC in February.
- N/74/11/20 Monthly PPEC meetings had been scheduled in for 2021. However, the development session would be a face to face meeting to be set up later in the year.
- NN/19/06/20 An invitation would be sent to Richard Brady to present to PPEC the work taking place to support communication and engagement with black, Asian and minority ethnic groups.
- MNGN/32/20 PPEC members to continue to report any instances of vulnerable people being unable to access health and care services.
- 1.2 PPEC members agreed that this action should be updated to include development of an online resource to post information for PPEC members. A membership review would be scheduled to review the diversity of membership and any gaps in membership.

Action; Julie Andrews to set up informal meetings for PPEC members to take place every other month.

Action; Lewis Etoria to set up a Stakeholder Reference Group to support mobilisation of the Platform One Practice, inviting interested PPEC members to be involved.

	<p>Action; PPEC members interested in joining a Task and Finish Group to review PPEC effectiveness in relation to Recovery Engagement and the children and young people's emotional wellbeing and mental health early intervention and training pathway to contact Jasmin Howell by email.</p> <p>Action; Julie Andrews to invite Richard Brady to attend a meeting to update PPEC members on how the Nottingham City ICP is engaging with the black, Asian minority ethnic groups.</p> <p>Action; Julie Andrews to schedule a membership review with the Chair and Vice-Chair.</p>
<p>NN/91/01/21</p>	<p>Exploring the Health and experiences of asylum seekers and refugees</p>
	<p>Copies of a report produced by Nottingham and Nottinghamshire Refugee Forum entitled 'Exploring the Health Experiences of Asylum Seekers and Refugees' had been circulated to PPEC members prior to the meeting.</p> <p>Daniel Robertson, Into the Mainstream Project Coordinator, Nottingham and Nottinghamshire Refugee Forum delivered a presentation that described the background to the project, details of how the views of service users had been gathered through structured interviews to obtain quantitative and qualitative data and the insight this had provided.</p> <p>The Nottingham and Nottinghamshire Refugee Forum support new arrivals of Asylum Seekers and Refugees into the City. With regard to GP registration, feedback gained around this area showed most had a positive experience but some found difficulty with registering at GP practices. Further barriers included access to interpreting services when attending health appointments which could result in delayed appointments or some service users not accessing the services at all. Accessing secondary care proved difficult as some service users receiving benefits were asked to pay for services as they were not eligible for free healthcare which meant they avoided accessing secondary healthcare. Asylum seekers and refugees also experienced racial, ethnic or religious discrimination on the grounds of their immigration status with staff appearing less welcoming.</p> <p>As a result of the findings a number of recommendations were made to commissioners and providers including;</p> <ul style="list-style-type: none"> • Development of training packages for primary care staff to include mandatory training for GP reception staff participating in the Local Enhanced Service for newly arrived asylum seekers, regular training for health care staff to ensure compliance with equalities legislation. • Dr Margaret Abbott, Health Inequalities Clinical Lead, Nottingham City ICP is supporting development of a training package to be delivered to GPs during protected learning time. • Interpreting services are major issues for service users and are not working well. Daniel Robertson specifically mentioned that dentist and opticians are less likely to use interpreting services. A meeting has taken place around interpreting services which is an area of concern but work is progressing and is being led by CCGs Primary Care Team. • Secondary care had responded positively to encouragement to use their discretion to waiver the charge for Asylum Seekers and Refugees to alleviate

	<p>stress and worry. Nottingham University Hospitals have confirmed they will not actively pursue any debt.</p> <ul style="list-style-type: none"> • Joint working with Dr Margaret Abbot and Dr Gray to develop a welcome pack for new arrivals which will include written information and videos explaining how to access the UK health system in their first language. • Migrant community voices are being heard through existing multi agency forum with representatives from the local authority and voluntary groups. <p>Questions were raised by PPEC members about access to interpretation and translation services in dentistry and optometry. Alex Ball, Director of Communications and Engagement, confirmed that both are nationally commissioned services and responsibility for this currently sits with NHS England. Over time it is proposed that much of the nationally commissioned activity would be delegated to CCGs or a regional level. This would present an opportunity to ensure primary care services are joined up and more responsive.</p> <p>PPEC members also queried support for families outside of Nottingham City and the support available for children of asylum seekers and refugees from a safeguarding perspective. Daniel Robertson confirmed that some areas are part of the vulnerable people resettlement programme and are mostly Syrian refugees who come direct from refugee camps. This group receive quite a substantial support package through local government and for asylum seekers and refugees in the City there are dedicated children and families workers.</p> <p>Sue Clague thanked Daniel Robertson for sharing such an excellent piece of work. It was noted that Daniel Robertson was linked into a range of networks that would support change and it was agreed that Daniel Robertson should provide a further update on progress to PPEC members in July 2021.</p> <p>Action: PPEC members to receive an update on progress towards delivery of improvement of the issues raised in the report in 6 months.</p>
<p>NN/92/01/21</p>	<p>Recovery Engagement Action Plan Update</p>
	<p>Copies of the updated Recovery Engagement Action Plan had been circulated to PPEC members prior to the meeting.</p> <p>Lewis Etoria, Head of Insights and Engagement, reminded PPEC members that a PPEC Task and Finish Group had supported development of the action plan. The Task and Finish Group had summarised the purpose of the action plan as a statement of intent to improve access and experience for vulnerable and marginalised groups. Lewis Etoria provided a summary of the action plan that included initiatives to improve provision of accessible information, access to interpretation and translation services, staff training and digital exclusion.</p> <p>The action plan would be reviewed by the CCG’s Senior Leadership Team and updated further to confirm lead directorates responsible for progressing the actions and associated timescales prior to it being presented to the Governing Body in April 2021.</p> <p>It was also confirmed that a shorter, more accessible version would be produced for publication on the CCG’s website to provide feedback to those people who had contributed to the engagement and provide evidence of You Said, We Did.</p>

	<p>It was agreed that an update on progress should be brought to PPEC at 6 monthly intervals.</p> <p>Action; PPEC members to review progress of delivery of the Recovery Action Plan at 6 monthly intervals.</p>
<p>NN/93/01/21</p>	<p>Covid-19 Update</p>
	<p>Alex Ball, Director of Communications and Engagement, gave an update on progress in relation to the roll out of the Covid-19 vaccination programme. Key points included:-</p> <p>The Joint Committee for Vaccinations (JCVI) phased rolled out of the Covid vaccination to priority groups 1-4 was progressing well in Nottingham and Nottinghamshire;</p> <ul style="list-style-type: none"> • To date the over 80s, 75s and above 70 and clinically vulnerable will have or are receiving their letters by the end of January with a view to completing all vaccinations in these groups by mid February 2021. • There are currently 11 sites within Nottingham and Nottinghamshire located at; <ul style="list-style-type: none"> - Queens Medial Centre - Nottingham University Hospital - Kings Mill Hospital - Ashfield Health Village - Cripps Health Centre - Forest Recreation Ground - Gamston Community Centre - King's Meadow Campus - Newark Showground - Richard Herrod Centre - Mansfield Vaccination Centre (at the former Wickes site in Mansfield) <p>The Government has assured residents that everyone will live within 10 miles of a vaccination site.</p> <p>The CCG have been delivering regular community briefings to community leaders, groups and patients informing them of the latest information and key messages to encourage uptake of the vaccination particularly amongst BAME communities. The next community briefing will take place on 4th February 2021. Following each briefing a toolkit that provides the most up-to-date information available on the vaccine roll out nationally and in our area is issued.</p> <p>A number of questions about the vaccination programme were raised regarding;</p> <ul style="list-style-type: none"> • availability of information in other formats and languages • support with transport to vaccination centres • education campaign to address misinformation, conspiracy theories and myths about the vaccination • booking process including the online booking site • process to access to vaccination for frontline staff working for charitable organisations or unpaid carers • safeguards in place to ensure patients receive appropriate second dose of the Pfizer/BioNTech or Oxford/AstraZeneca vaccine. <p>With regard to bookings for front line health and care workers, Alex Ball confirmed that front line and health and care workers should fill out a form and email this to a</p>

	<p>dedicated address to be registered for their vaccine. Jane Hufton agreed to send the form to members along with the email address.</p> <p>Ongoing work is taking place to provide easier access to translated information and to address myths. PPEC members' contribution to this would be welcomed. Michael Conroy offered to provide Braille and audio transcriptions.</p> <p>Lewis Etoria advised members that there is an enquiry line set up with the County Council as a single point of contact to answer any queries about vaccinations. The email address is enquiries@nottscg.gov.uk and the telephone number is 0300 500 80 80.</p> <p>Action; Daniel Robertson to work with Lewis Etoria to establish any gaps in translated versions of the core information leaflet.</p> <p>Action; Jane Hufton to forward the health and care worker, front line staff form to PPEC members along with the email address.</p> <p>Action; Alex Ball to look at the FAQs around vaccinations and update to address any myths.</p>
<p>NN/94/01/21</p>	<p>Community Diagnostic Hubs</p>
	<p>Copies of a presentation providing information about the development of Community Diagnostic Hubs and the engagement proposed had been circulated to PPEC members prior to the meeting. A completed engagement assessment template (developed by PPEC members to enable them to assess proposed engagement against the five steps to successful engagement) had also been circulated.</p> <p>Simon Oliver, Senior Cancer Manager, gave an overview of the national review of diagnostic capacity and how this has been completed with a number of recommendations made. In the short term plans are being developed to increase diagnostic capacity. Over the longer term, community diagnostic hubs will be established away from acute hospital sites and arranged in such a way that, as far as possible, patients only have to attend once. The number of hubs developed will be dependent on the level of funding allocated and this is yet to be confirmed.</p> <p>In summary there will be a significant expansion across all diagnostics with financial investment and additional capacity. This will be an ongoing programme over a two to three year period. The expansion will have to be supported by appropriate infrastructure and workforce. Community diagnostic hubs are going to be key enablers in terms of deliverables within the NHS long term plan and many other initiatives.</p> <p>Julie Andrews explained the purpose of engagement would be to establish a set of principles to be applied in the development of the community diagnostic hubs and inclusion in the service model covering;</p> <ul style="list-style-type: none"> • Location and convenience • Equity of access • Reducing health inequalities • Physical, cultural and social needs <p>Engagement would include representation across the 3 ICP areas, include existing</p>

	<p>patient groups and community fora and would be inclusive providing accessible information. A PPEC member was invited to provide ongoing support to this programme of work by joining a working group established to steer this service development.</p> <p>PPEC members welcomed the approach to engagement.</p> <p>In response to a question, Lewis Etoria confirmed that the development of Community Diagnostic Hubs forms part of the out-of-hospital workstream of the Reshaping Health Services Across Nottinghamshire (RHSAN) programme. The question highlighted a need to explain the linkages between the RHSAN programme and other developments that support the model during the next phase of engagement.</p> <p>PPEC members welcomed short term initiatives to provide quicker access to diagnostics and it was suggested that vacant high street premises or LIFT buildings could be used to deliver some diagnostic services. Simon Oliver agreed to provide an update to PPEC members on short term proposals to increase diagnostic capacity in March 2021.</p> <p>Action: Include Simon Oliver on forward programme to provide an update to PPEC members in March 2021 on short term plans to increase diagnostic capacity.</p>
NN/95/01/21	<p>Equality, Diversity and Inclusion (EDI) Steering Group</p> <p>Jasmin Howell member of the EDI Steering Group advised that she had been unable to attend the last meeting but agreed to review the papers and feedback at the next meeting.</p>
NN/96/01/21	<p>Governing Body Feedback & Key Messages from PPEC</p> <p>Sue Clague explained that the Governing Body discussion had focused on future integration of NHS England/Improvement and directly commissioned services coming to local and regional levels and Reshaping Health Services Across Nottinghamshire</p> <p>Key messages PPEC members agreed to raise with the Governing Body were:</p> <ol style="list-style-type: none"> 1. The report published by Into the Mainstream Project, Nottinghamshire & Nottinghamshire Refugee Forum, entitled “Exploring the health experiences of asylum seekers and refugees” features some key challenges regarding service provision, a key challenge being access to interpretation and translation services. PPEC members will receive an update on progress towards delivery of improvement in 6 months’ time. 2. Engagement through a series of online briefings with community leaders/faith leaders where uptake on the Covid-19 vaccination may be lower was welcomed. The next community briefing will take place on 4 February 2021. 3. PPEC members welcomed planned additional investment into diagnostic services and the proposals for engagement as part of the development of Community Diagnostic Hubs. PPEC members look forward to receiving details of short term plans to increase capacity in March 2021.
NN/97/01/21	<p>Any Other Business</p> <p>No other business was raised.</p>
NN/98/01/21	<p>Date of Next Virtual Meeting</p>



	The next meeting will be held virtually on Tuesday 23 rd February 2021 from 2 pm to 4 pm.
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