

**Minutes of the Nottingham and Nottinghamshire
 Patient and Public Engagement Committee
 held virtually on Tuesday 24 May 2022
 2 pm to 4 pm**

Attendees;

Jasmin Howell, Vice Chair (Charing)
 Colin Barnard, Patient Leader/Diabetes
 Teresa Burgoyne, Nottingham West (left at 3.15)
 Michael Conroy, My Sight Nottinghamshire
 Kerry Devine, Improving Lives
 Becky Law, Community Voluntary Sector representing Bassetlaw
 Roland Malkin, Nottinghamshire Cardiac Support Group
 Paul Midgley, Rushcliffe
 Helen Miller, Healthwatch Nottingham and Nottinghamshire
 Carolyn Perry, Community Voluntary Sector representing, South Nottinghamshire ICP
 Jules Seblin, Community Voluntary Sector representing City ICP
 Mary Spencer, Community Voluntary Sector representing Bassetlaw ICS

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

Katie Swinburn, Engagement Manager
 Alex Ball, Director of Communications and Engagement
 Kelly Huckvale, Compliance Manager
 Maria Principe,
 Simon Oliver, Cancer Manager
 Jon Higman, Head of Planned Care
 Jane Hufton, Engagement Assistant (minute taker)

Apologies for absence were received from;

Chitra Acharya, Patient Leader/Carer
 Sue Clague, Chair
 Mike Deakin, Nottinghamshire County Council
 Gilly Hagen, Patient Leader/Sherwood Patient Participation Groups
 Jane Hildreth, Community Voluntary Sector representing Mid Nottinghamshire ICP
 Amdani Juma, African Institute for Social Development
 Deb Morton, Healthwatch
 Prema Nirgude, Head of Insights and Engagement

NN/47/05/22	Welcome and introductions
	<p>Jasmin Howell, Vice Chair welcomed everyone to the Nottingham and Nottinghamshire Patient and Public Engagement Committee (PPEC) in Sue Clague's absence due to annual leave.</p> <p>Apologies were noted from attendees referenced above.</p>
NN/48/05/22	Declarations of interest

	<p>Jasmin Howell 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.</p>
NN/49/05/22	Minutes of the last meeting
	<p>The minutes of the last PPEC meeting held on 26 April 2022 were noted and agreed as an accurate record of the discussions that took place at that meeting.</p>
NN/50/05/22	Matters arising including Action Log
	<p>An updated copy of the Action Log had been circulated to PPEC members prior to the meeting and was noted.</p> <p>Katie Swinburn shared a copy of the action log and confirmed that the completed actions were accurate. Katie Swinburn continued to highlight the outstanding actions for discussion which included:-</p> <p>NN/41/04/22 – Primary Care Strategy specific query around exclusion of patients at GP practices, Katie Swinburn had linked Joe Lunn with the PPEC member to discuss this further. Item completed.</p> <p>NN41/04/22 Primary Care Strategy information Stephen Short and Joe Lunn have been invited to participate to update on this piece of work and is an agenda item at the June Meeting. Item completed.</p> <p>NN/28/03/22 – Update on Citizens panel information will be cascaded to PPEC members following on from the meeting. Item completed.</p> <p>NN/28/03/22 –Work on the policy has been signed off by Alex Ball and sent to NHS England for approval. The Engagement Team will circulate the final version to PPEC members once available.</p> <p>NN30/03/22 – ERS transport criteria clarification. Katie updated that a conversation had taken place with Mark Sheppard who was happy to send an update around the criteria to PPEC members. Item completed.</p>
NN/51/05/22	National Health Service Act – Section 251
	<p>Kelly Huckvale shared a presentation circulated to PPEC members prior to the meeting entitled Section 251 of the National Health Services Act. Kelly explained the purpose of Section 251 and that a confidentiality Advisory Group Application must be completed to enable the common law duty of confidentiality to be temporarily lifted so that confidential patient information can be transferred to an applicant without the discloser being in breach of the common law duty of confidentiality. The General Data Protection Regulations (GDPR)/ Data Protection Act 2018 will still also apply.</p> <p>Kelly informed members that a task and finish project team had been set up and established with system wide membership including Prema Nirgude from the CCG offering engagement support and advice.</p> <p>The key aims of this application would be to look at population health management data provided by General Practice forming intelligence impacting on communities</p>

	<p>across the system but due to accessibility by partners this is proving difficult. The ultimate aim would be to create an information sharing portal including data from system wide partners where healthcare professionals will have access to the data to inform their treatment of patients. However, currently this data cannot be used to plan care for future healthcare scenarios which is the reason for Section 251. A task and finish group has been set up to identify data sets to access. Kelly confirmed that no identifiable data will be stored and a business analysis team will define and retrieve data to support health care and planning. The Section 251 has been endorsed and approved by the Integrated Care System (ICS) and CCG senior executives.</p> <p>Timescales for this piece of work – application process to be completed 23 June 2022 this proposal will be presented to the Citizens Advisory Group by 14 July 2022 with an outcome letter being produced by 28 July 2022.</p> <p>PPEC members were asked to provide comments around the piece of work to feed into a communications plan including a privacy statement and patient leaflet which will be shared with members of the public.</p> <p>Kelly agreed to send PPEC members a copy of a leaflet that was used previously by Bradford CCG with any additional comments on how this could be used by Nottinghamshire.</p> <p>A number of suggestions were made from PPEC members including highlighting the benefits of sharing the data and completing a risk analysis to ensure the data gathered is safe. Kelly informed members that a Data Impact Assessment Tool (DPIA) had been completed and is with the Governance team for authorisation, but would be happy to share with PPEC members for clarity. Jasmin suggested writing a privacy statement specifically for patients and including this in other languages for accessibility. Kelly confirmed with PPEC members that this was not a National programme and that Nottingham and Leicester were pilot projects with a view to taking this forward if it was successful.</p> <p>PPEC members also mentioned the quality of data needs to be accurate to enable clear planning to take place. Maria Principe confirmed that improvements with data from General Practice relies on the specific codes imputed by GP staff and differs from one practice to another. Concerns were raised when planning high level services when ethnic data are grouped together.</p>
NN/52/05/22	Covid 19 and ICS Transition
	<p>Alex Ball, Director of Communications and Engagement gave an update on the progression of the Covid 19 Vaccination programme and ICS Transition.</p> <p>Covid 19 Vaccination update</p> <p>The infection rates for Covid 19 have dropped within Nottinghamshire with the number of beds occupied by patients who have not been admitted with covid. Infection control and prevention measures are still in place within hospitals and healthcare settings. Hospitals are reporting high pressures of patients with 2% needing intensive care. This proves that the vaccines are working and still continue to be administered with over 2.1 million vaccinations delivered in Nottinghamshire.</p> <p>Vaccinations are currently being delivered for children aged 5 – 11 with clinics available at Forest Recreation Ground, Ashfield Health Village and Clifton and Carlton.</p>

	<p>To find out dates and times of these clinics, visit the NHS Website. There will also be an Autumn vacation programme; details will be communicated once they have been finalised.</p> <p>PPEC members raised concerns around the closure of Forest Recreation Site and Mansfield Vaccination Site within the community and appropriate provisions to ensure patients will not have to travel too far to get a vaccination are considered. Alex Ball confirmed that this has taken place at Mansfield and the team have moved over to Ashfield Health Village which is within a healthcare setting. However, Forest Recreation site will move over to a site within Sherwood and details of this will be released shortly. Vaccinations will be delivered over the summer period from other individual places including some GPs and community pharmacies. The Grab a Cab campaign was active within Nottingham City provided by DG cars who are able to take members of the public to and from their appointments. Alex Ball confirmed that two mobile vans were also operating within the Nottinghamshire area specifically within remote areas; dates and times of these can be found on the NHS Website.</p> <p>Further concerns around hesitancy of children having the vaccination were raised and Alex confirmed that this cohort is voluntary and in Nottinghamshire 7.5% of children had received the vaccination which is on a par nationally.</p> <p>Integrated Care System (ICS) Transition</p> <p>Alex Ball confirmed that the Health and Care Act 2022 had received Royal Assent to develop joint working with Councils and Health partners. Appointments of the Board, Non-Executive Directors and partner members have been agreed with other appointments currently ongoing ensuring a complete Board in place by from 1 July 2022.</p> <p>PPEC members had a few questions around the transition piece of work including what does this mean for the people, staff as well as patients. Alex agreed to discuss this in detail nearer the time once fully functional and in place.</p>
NN/53/05/22	Elective Recovery Update
	<p>Jon Higman, Head of planned care shared a presentation which was circulated to PPEC members prior to the meeting.</p> <p>Jon updated PPEC members on the position of patients waiting for planned care which had changed slightly with an increase since February 2022 with both Sherwood Forest Hospitals and Nottingham University Hospitals both seeing increase in waiting lists with certain areas being more affected than others.</p> <p>A plan was submitted in March aiming to eliminate all waiting times from 104 weeks down to 78 weeks at the end of July 2022. This is being implemented with further work taking place helping patients on the waiting lists by contacting them in different ways such as telephone conversations, letters and text messages. Patients are being given the choice to transfer to other providers across the county with shorter waiting lists. Plans also include some highlighted areas.</p> <ol style="list-style-type: none"> 1- 5 year elective hubs recruiting staff 2- Community diagnostic hubs 3- High volume complexity work 4- Transformation projects 5- Approach to personalisation

	<p>6- Virtual outpatients 7- Lessons learned 8- Transformation plans getting health and inequality. 9- Enhanced digital capability with a clear digital strategy</p> <p>Clinical ambitions provide a number of areas that are being developed to join up the workforce with a new way of system wide working which include community diagnostic centres, allowing patients to access diagnostic tests closer to home. Inclusion of digital access including developing the NHS App.</p> <p>A few questions were raised by PPEC members including support for digital applications allowing patients easier access to specialist treatment alleviating the necessity to travel to a hospital. Concerns were also raised around the lack of funding for developing Community Diagnostic Hubs and only a third of the money has been agreed and only one hub approved in Mansfield.</p> <p>Further suggestions were made around a few areas of improvement including orthopaedic patients, pain management, community diagnostic centres and waiting lists. Jon confirmed that new pathways were being looked into across the system to alleviate patient waiting times. Patients who have waited longest are being monitored closely specifically those in the most deprived areas across the county. Similarly, patients who chose to wait for their treatment will undergo a clinical review to ensure patient safety is maintained. Alternative providers were also available to help with the pressure of waiting lists for patients to choose where they would like to go. Osteopathy was also mentioned to help with list sizes providing patients were eligible, Jon was happy to take this suggestion back to his team.</p> <p>PPEC members were supportive of this piece of work and suggested a further update is given to the Integrated Care Board in the future.</p>
NN/54/05/22	Reshaping Health Services in Nottinghamshire – Tomorrow’s NUH
	<p>Katie Swinburn, Engagement Manager gave highlights from the Reshaping Health Services (RHSN) – Tomorrow’s NUH engagement report which was sent to members prior to the meeting. Katie gave a summary of the key points in particular the feedback from the engagement work that took place between 7 March 2022 – 1 April 2022 from community groups, patients and public.</p> <p>PPEC members were encouraged to make any additional comments regarding the report and members expressed some disappointment about the lack of engagement with ethnic minority groups. An improvement was suggested concerning engagement with communities such as Lesbian, Gay, Bisexual and Transgender (LGBT) and women and children’s services. Additionally, suggestions of inclusion of specific ethnic groups including community champions, faith groups and mosques were highlighted as possible cohorts of communities for further engagement when commencing the consultation period. Katie Swinburn confirmed that an action plan was being developed for the next stage of engagement.</p> <p>Jasmin raised a concern around the data within the engagement report and appendix which differed, Katie Swinburn confirmed that this would be highlighted to the Engagement Team and looked into.</p> <p>Action: Katie Swinburn to highlight the discrepancy within the engagement report on Page 12 and the appendix with figures.</p>

	<p>Action: Katie Swinburn will provide all PPEC members with updates of the programme when available.</p>
<p>NN/5505/22</p>	<p>Community Diagnostic Hubs</p>
	<p>Simon Oliver, Programme Manager for Community Diagnostic Hubs for Nottingham and Nottinghamshire CCG shared a presentation which was circulated to PPEC members prior to the meeting.</p> <p>Simon gave an overview of the National programme to address the diagnostic hubs within community settings and constraints. Nottinghamshire have been allocated just over a quarter of the budget which will allow us to have one diagnostic hub, CT and MRI scanner. The business case is being drafted and has outlined 3 delivery options, 2 of which include Mansfield and Nottingham City and the 3rd is reliant on further funding. The project will be divided into 3 specific phases of proposals broken down into Mansfield and Nottingham City areas.</p> <p>A paper has been drafted and is currently with system executives awaiting confirmation of the work to commence.</p> <p>Next steps include gathering costings, a timeline of the project, development of an engagement plan leading to a piece of engagement work involving members of the public and starting conversations with the independent sector to establish further capital to create a larger community diagnostic hub and completion of the business case.</p> <p>Simon Oliver encouraged members to raise any queries around the proposals or concerns relating to the plans going forward. A few questions were asked around the independent sector and staffing. Simon suggested possibly a combination of NHS staff and independent sector staff on a rotation basis ensuring the hubs were staffed for longer periods of time. PPEC members expressed some disappointment of only having one diagnostic hub across Nottinghamshire, as it was initially thought there would be sufficient funding for three hubs. There was a suggestion of using existing buildings and smaller sites positioned in lots of areas in the community. Simon agreed but considerable time pressures and constraints by programme specification which dictates sites and regulations. Therefore, the two sites at Mansfield and Nottingham City are safer options with support from local Trusts. A suggestion was made as part of the specification to include digital assistance allowing results to be delivered from place to place making it easier and quicker to obtain results, Simon agreed but reiterated more capital was required to enable this to be possible getting the most benefit from the limited budget available.</p> <p>Jasmin raised a point regarding PPEC members being involved in a working group but these were stood down due to budget control and direction from the system leaders. Simon confirmed that these groups were in the process of being reinstated and will be in touch with PPEC members who were interested.</p>
<p>NN/56/05/22</p>	<p>Items for information</p>
	<p>A paper was circulated to PPEC members prior to the meeting for information:</p> <ul style="list-style-type: none"> • PPEC Effectiveness Framework Dementia Wellbeing Pathway <p>There were no comments made around this paper.</p>

NN/57/05/22	Governing Body and Committee Feedback
	<p>Unfortunately as Sue Clague was not in attendance at the meeting therefore no update was provided from the previous Governing Body.</p> <p>Key messages from PPEC to highlight at the next Governing Body meeting were;-</p> <ul style="list-style-type: none"> • Welcomed presentation on Section 251 in relation to data and opportunities accurate planning for patients • Update provided by Alex on Covid Update • The transition work has been passed by parliament as a Health and Care Act. Questions were raised regarding whether the impact for the workforce and patients have been considered. . • PPEC comments disappointment TNUH of representative group feedback members around future representation • Community Diagnostic Hubs reduction in capital funding and the commitment of patient representatives around the table.
NN/58/05/22	Any Other Business
	<p>Engagement Team finalised Annual Report to Quality Performance Committee and information will be added to the CCG website and the link will be sent out to members when available.</p>
NN/59/05/22	Date of Next Virtual Meeting
	<p>The next PPEC meeting will be held in person on Tuesday 28 June 2022 from 2 pm to 3.30pm which will be a face to face meeting in the Boardroom, Sir John Robinson House, Arnold Nottinghamshire. NG5 6DA .</p>