

Getting Better Together – September 2018

Feedback report and update

North East Lincolnshire Clinical Commissioning Group (NEL CCG) and Northern Lincolnshire and Goole NHS Foundation Trust (NLaG) hosted the Getting Better Together public and stakeholder engagement event on September 13th at the Humber Royal Hotel followed by a 'bite-size' twilight meeting the following week at Centre4 in Grimsby.

We held these meetings to share information about the work going on to make local health and care services more sustainable and obtain views from members of the public and local organisations to inform our plans. These were interactive meetings with participants invited to use handset devices to 'vote' on a number of key questions and ideas.

Liz Read, chair of the Accord Steering Group opened the meeting welcoming everyone and providing a brief overview of the plans for the afternoon's session – introducing the theme 'Better Together'

There was a series of presentations to look at:

- Getting it right – Making the most of our membership schemes
- Getting Better Together – CCG update on progress, plans and priorities
- Developments in Primary Care
- Promoting Life Planning in North East Lincolnshire
- Rebuilding the organisation: NLaG update with Dr Peter Reading
- New Ways to Communicate – Patient Access to hospital services

The event finished with a Question and Answer Panel with local health and social care leaders followed by closing comments from **Mark Webb NELCCG Chair and Ann Shaw NLaG Chair**.

This report contains copies of all the presentations from the event together with an update from each of the presenters and links to any further information. The results from the sessions where the voting devices were have also been included in the slide sets. We also have a full write-up of the Question and Answer panel including some post meetings notes from panel members for clarification and progress updates.

At the end of this report you will find a summary of the evaluation forms we asked participants to complete; we use these to help us to learn from and improve these engagement events.

The Presentations

Getting it right – Making the most of our membership schemes – presented by Sally Czabaniuk, Engagement Manager, North East Lincolnshire CCG & Alison Hurley, Membership Manager, Northern Lincolnshire and Goole NHS Foundation Trust.



Getting it right -
Making the most of our



Getting it Right
twilight voting.pdf

Update from Sally - Since these meetings we have shared the results from the voting activity with the Accord Steering Group and Community Forum. Our aim is improve the way in which we engage with local people to ensure they have opportunities to have their say and when they do; their views are listened to and taken into account. We were pleased with the high levels of satisfaction with the information about engagement opportunities we give to Accord members, what we need to work on is ensuring people who take part in surveys or meetings or comment on our plans via email or in writing do receive feedback about how this has been used.

The strong support we had for developing a set of 'standards' for how the CCG and other public sector organisations engage with our communities so people know what they can expect from us has given us the go ahead to get on and get this done. We are doing this in partnership with our colleagues in the council. We have plans to talk to the local Voluntary Community and Social Enterprise Forum and will shortly be sending out more information about how people can get involved in helping us to get it right when it comes to involving our communities in shaping their public services.

Update from Alison - In order to progress the feedback from these meetings, we have shared the voting details with our Membership and Patient Engagement Group. They were pleased to see that the majority of people voting gave positive responses to the frequency and content of our Trust communications with our membership. It was also interesting to learn that people attending the meeting chose the Trust Facebook, website and Twitter as their preferred methods of communication. In our next edition of the Trust magazine, we'll be asking everyone similar questions with the aim of establishing what our communities want to know more about, the preferred timescales for updates and information, and the preferred methods of communication. This way we can gain further insight to improve such communication and engagement going forward.

As always, the Membership Team are happy to receive requests for information and updates and try to ensure these are covered in upcoming Engagement Events or the Trust magazine. Please send any requests to nlg-tr.FoundationTrustOffice@nhs.net.

Getting Better Together – progress, plans and priorities – presented by Lisa Hilder, Assistant Director for Strategic Planning, North East Lincolnshire CCG & Julie Wilson, Assistant Director for Primary Care, North East Lincolnshire CCG.



CCG Update and
Primary Care.pdf

Update from Lisa and Julie

Progress has been made in a number of the areas that were set out within our presentation at the workshop, including:

- The re-procurement of the NEL carers support service has been completed and we will announce who the provider is in November. The people's panel was used in this process and the feedback is that once again carers found this a valuable part of the overall process.
- A procurement process for musculo-skeletal physiotherapy services is underway. There is a new specification for this service, which will allow patients to be able to access these services directly (where appropriate) without the need to see a GP first, facilitated through the Care Navigators within the GP surgeries. The new service will be available from 1st April 2019.
- The revised specification for telecare services is almost complete, this has been developed with community, professional and commissioner input. We are now reviewing and redeveloping the referral routes, eligibility criteria and developing the new trusted assessor process to improve access to telecare provision across North East Lincolnshire.
- The first of a number of Respiratory Evening Events took place and was attended by more than 40 professionals from a range of organisations in North East Lincolnshire including primary care, the hospital, pharmacy, community nursing, medicines management, HOPE services, mental health team and Wellbeing team. It provided a great opportunity for professionals who support people living with COPD to learn more about the range of local services and to meet others. Feedback was really positive with almost everyone responding that they had learned something new and would come back to future events.
- All local GP practices began to offer 'extended access' to their patients from 1st October 2018. This is being delivered by groups of practices working together, providing additional appointments in weekday evenings and at weekends from designated centres.

- A number of local GP practices have started to offer online consultation via their websites. This allows patients to request support through an online consultation form, which is reviewed by a healthcare professional in the practice who will ensure that each patient receives the right response for their needs. This does not always mean a trip to see somebody at the surgery and can save time for the patient and the professional.

If you would like to find out more detail about any of the above points, please contact NELCCG.askus@nhs.net

Promoting Life Planning in North East Lincolnshire - presented by Bruce Bradshaw, Strategic Lead for MCA, Older People and Continuing Health Care, North East Lincolnshire CCG & Emma Overton, Policy & Practice Development Lead, North East Lincolnshire CCG.



Life Planning
(daytime).pdf



Life Planning
(twilight).pdf

Update from Bruce and Emma

We took participants through the various legal options that allow people to plan for their future health and social care needs including advanced decision to refuse advanced statements, Lasting Power of Attorney's and deputies. We were told that many found this useful, but that more time was really needed.

This was part of a wider life planning campaign. Feedback from the sessions has been incorporated into briefings for staff – one example being about explaining the potential costs when discussing life planning. The Safeguarding Adults Board will also use the feedback to review “about me”/Life story documents used by many of our providers. The comments raised have also been helpful when discussing with health and social care professionals where they should consider having discussions with patients/service users in supporting life planning.

Rebuilding the organisation – an update from NLaG – presented by Dr Peter Reading, Chief Executive, Northern Lincolnshire & Goole NHS Foundation Trust



Dr Peter Reading
rebuilding the organis

Update from Peter

Since the meeting(s) the Trust has submitted its formal response to the CQC report. The Trust will be focusing its work to respond to the inspection in eight areas:

- management of waiting lists
- staffing
- end of life care (with an agreed approach across all organisation in the local health system)
- critical care
- improving mandatory training and appraisal rates
- development of community services through the new Out of Hospital Transformation Board in North Lincolnshire
- embedding quality improvement methodology
- developing a revised strategy including core objectives and a clinical strategy through the on-going work of the Humber Acute Services Review.

The Trust has also secured extra funding of £1.3 million for new endoscopy equipment (washers and scopes) at both Grimsby and Scunthorpe; and around £900,000 to develop a system so staff can prescribe medication electronically.

To expand capacity in its pain management service the Trust and local CCGs have launched (on 15 October) a new partnership which means patients can attend alternative provision at In Health Pain Management Solutions or St Hugh's Hospital in Grimsby.

Finally, the Trust is putting in place a state-of-the-art mobile theatre unit at Goole District Hospital. The theatre will allow the Trust to carry out an extra 120 operations per month and is great news for patients across Scunthorpe, Grimsby and Goole. It is scheduled to be on site for six months and operational from mid-November. It means around 720 more patients can be treated.

For more information please email: nlg-tr.enquiries@nhs.net

New Ways to Communicate with Patients – presented by Jo Glover, Assistant General Manager, Patient Access, Northern Lincolnshire & Goole NHS Foundation Trust



New Ways to
Communicate.pdf

Update from Jo

The idea behind the presentation was to share futuristic communication methods with patients in line other service industries i.e. Banks and Utility companies. The information from the presentations will be collated once all three main CCG/ Hospital patient groups have voted on it. The initial findings are that 70% patients are happy to receive hospital appointment letters and supporting information via digital methods e.g. texts, e-mails and a patient portal.

Once the Communication Business Case and Project Team has been established, Patient representatives will need to be an integral part of the team to ensure all requirements and concerns are addressed.

For further information contact Adam.brown1@nhs.net, Business Support Manager, Improvement & Transformation, Patient Access

The Question and Answer Panel

Dr Peter Melton, Clinical Chief Officer, **Mark Webb**, Chair – NELCCG; **Dr Peter Reading**, Chief Executive, **Dr Kate Wood**, Interim Medical Director, **Anne Shaw**, Chair – NLaG; **Andrew Quigley**, Director of Operations – Care Plus Group; **Joe Warner**, Chief Executive – focus independent adult social work; **Cllr Jayne Hyldon-King**, Portfolio holder for Health and Wellbeing – North East Lincolnshire Council

Participants were invited to submit questions in writing during the meeting and could indicate if they wished to ask the question themselves or have it read out on their behalf. Due to the number of written questions received we were unable to take follow up questions/comments or questions from the floor.

Q1 - *Question for the CCG - Based on the very welcome improvement in the local Trust's CQC rating, but still:*

- *With the longest published referral to treatment waiting times in the country*
- *With nearly 300 patients waiting in excess of a year for treatment*
- *With more than 30,000 overdue follow-up appointments*
- *With a mortality rate consistently running up to 20% in excess of the norm*
- *With two more of the most serious patient safety incidents known as “never events” having occurred during August*

- *And with performance at Diana Princess of Wales Hospital significantly worse than that at Scunthorpe General Hospital on a number of key measures*

What degree of confidence should residents of North East Lincolnshire be expected to have in the quality and safety of services being commissioned by the CCG from NLaG?

Response from Dr Peter Melton

Dr Melton began by congratulating the Trust for the organisation's improvement, particularly for the workforce as he acknowledged the position they are in can be really be soul destroying and everyone in the system needs to recognise the improvements.

With regard to performance figures, he explained they are clearly not in the position they want to be in and there is a desire to improve those figures. NLaG are not in good position but it's not just them and other Trusts are struggling with referral to treatment.

He said there were a number of key things happening in terms of assurance. For example, there was a significant change in the leadership approach, particularly clinical leadership, with very constructive working relationships emerging. Dr Melton said he was working closely with them on the emerging clinical leadership model through weekly breakfast meetings. The culture is changing at the top and filtering through the rest of the organisation. As well as from a commissioning view, he explained he was seeing this from the GP point of view as well, from the experiences patients in his consulting room were describing.

There is regular performance monitoring with the Trust, and the CCG was seeing significant improvements in line with the performance trajectory. Both qualitative reports from patients and staff and hard figures were showing things were moving in the right direction.

Q2 - *When asked to go to another part of town for eye screening (my GP surgery didn't have time); I said it was a long way for me to go. They offered me hospital transport. I believe this was a waste of resources and money. They did not ask if I had a disability or problem with transport, just assumed I did.*

Q3 - *Now Specialist Care is being moved to hospitals that have the staff and resources to give the best possible treatment and after care, what provision has been made to ensure all who need to be helped can be transported to them – eg Castle Hill appointments being offered at 9am.*

Response Dr Melton and Cllr Jane Hyldon-King

We have just been listening Peter Reading talk about the Humber Acute Services Review and changes that may happen in where services are provided. One of key underlying projects of this review is around the implications for patient transport and implications for their families, carers and extended visitors. What does an extended stay in another hospital mean for patients and their families in terms of being able to get there and visit.

Dr Melton then said he would hand this over to Cllr Jane Hyldon-King who is very passionate about the transport issue who added:

Just to reassure you, I have been working on public transport for a number of years (not having a car so transport is very high on my agenda) and I have challenged to make sure transport is taken into account over a number year as chair of scrutiny. It is ridiculous expecting someone from North East Lincolnshire to attend an appointment in Hull at 9am if they don't have transport. This is something our joint Chief Executive Rob Walsh is viewing this as a priority. If we are moving services then we need a transport system in place.

Q4 - *Autism has been identified as one of the top clinical priorities for the NHS in their long-term plan (NHS England and Learning Disability England websites). Can our local autistic community (including those still seeking a diagnosis but unable to get one) expect any such priority given to them by NELCCG?*

Response from Andrew Quigley, Care Plus Group.

Dr Jane Moran our Consultant Clinical Psychologist has been working with mental health provider Navigo and the CCG to secure funding to develop a service around autism and high functioning autism for adults in North East Lincolnshire. This service goes live on 1st October.

Post meeting note from Joanne Hewson, Deputy Chief Executive - NELC

Autism is a local priority as demonstrated by the priority given by all partners to the development of the Access Pathway. Since April 2017, the multi-agency Access Pathway Development Group, consisting of a range of partners across social care, education, health, the voluntary sector and parents groups, has worked jointly to develop and co-produce the Access Pathway. The Access Pathway was developed following feedback from Families who told us that navigating the system was difficult, pathways required a joined up approach and longer-term support and waiting times needed addressing.

The Access Pathway has been developed to support children who have complex or multiple difficulties in the areas of communication and interaction (including ASD), cognition and learning, and social, emotional and mental health.

The Access Pathway Panel is made up of professionals from health, social care and clinical services and together they review the Early Help Assessment and additional information presented to develop bespoke packages of support. The panel can make recommendations for more specialist assessments and for some children this may lead to a diagnosis. However, the main function of the access pathway is to identify and ensure the family and child has or is receiving the most appropriate support to meet the family's needs.

The Access Pathway was officially launched in April 2018 with a series of briefing events for both stakeholders and families in May and June 2018. Further details of the pathways can be found at on the NELC website.

Q5 - *Epilepsy – has the nurse role been filled in adults?*

Response Dr Kate Wood

I don't have the answer to hand but please give me your phone number and I will call you with a response later.

Update from Dr Wood - The post has been recruited to, and the successful candidate starts on 5th November

Q6 - Last year ENT and Urology had to reorganise due to shortages of staff. What has been done to address the staff shortage?

Response Dr Kate Wood

Q7 - In Peter Reading's earlier presentation, he touched on recruitment strategies within NLaG. Since we changed services you mention, there has been ongoing recruitment with new urology consultants coming to join the organisation. We are examining how we organise services within the construct of the Humber Acute Services Review but the Trust has definitely become more attractive as a place to work due to way we are looking at reconfiguring our services. The journey we are on is bearing fruit for us.

Q8 - Patient passports for hospital admission – the purpose is to help communication between patients and NHS staff. My experience is that staff in hospital do not read them. Can you address this?

Response from Dr Kate Wood

I think the passports are a vital way of communicating and we will take these comments back to clinical teams to ensure they look at and take into account passports.

Q9 - *What is happening locally with regard to care planning and particularly integrated care planning between health and social care?*

Response from Joe Warner, focus Adult Social Work

Integrated care is what we are about. When it comes to working together, I think this area is actually quite far ahead. We were the first area to start using the same system (SystemOne) as many of our health colleagues. Navigo (Mental Health Provider) is also switching to SystemOne. Using the same system makes integrated care planning more of a viable option to make it work for us. Many of you will have experienced this as it saves you repeating yourself to different health and care professionals. There are further initiatives planned to advance this – for example, multi-disciplinary teams working in care homes and integrated care partnerships which are making headways as a number of key organisations are working together to plan care.

Q10 - *(In her presentation today) Julie Wilson said GP secretaries will be/are being trained up to write letters and do admin to free up GP time. A former GP secretary I know was only telling me this morning that she and other staff had been made to do such duties (including writing letters regarding important/life changing diagnoses etc.) for years despite not being comfortable doing so. What measures are in place to protect secretarial staff from unreasonable requests and possibly errors occurring?*

Response from Dr Peter Melton

The practices in North East Lincolnshire are starting to work together in collaboration, currently we are working in three groups within our 27 practices. One of the main reasons for this is so we can become more efficient with secretarial and managerial support, and to drive up the quality across all practices so patients are experiencing the same quality wherever they are registered. Transfer of information is critically important and we need to ensure that robust and safe services in place. This is about working smartly together for a high quality, consistent service across North East Lincolnshire.

Post meeting note from Julie Wilson, Assistant Director of Primary Care

The presentation covered the fact that there has been training for administrative staff to help manage in-coming communications, such as hospital letters, rather than writing letters. However, in terms of support, we would also add that we have made some funding available for practice manager training and for practice managers to

establish a network of peers for support and appraisal; this would help to mitigate some of the concerns that you have raised.

Q11 - *Why is it taking too long for patients to see their GP (as it is taking at least three weeks to see them)? Especially for those who are elderly, disabled, have mental health issues and other vulnerable people.*

Response from Dr Peter Melton

You will know from the news that we are not alone with this issue in North East Lincolnshire. The fundamental issue is demand is outstripping capacity. We have 19 permanent doctors in our practice, more than we've ever had in its history, but demand is higher than it has ever been. Our most recent figures show we had 14,850 patient contacts (last month). Compared to December, when there were just over 10,000 contacts, this shows a 40% increase in demand in just 12 months. We monitor on a daily basis how many appointments are available with GPs and this shows how much demand for appointments is growing. We can only improve by working with you all as we explore how we can work smarter in terms of maximising the capacity we have.

Q12 - *It has been known for care providers to employ persons with mental health conditions to work with adults with severe learning disabilities. How can you be sure this is safe and acceptable?*

Response from Andrew Quigley

In terms of recruitment, we have robust processes in place. If someone has a physical or a mental health issue, this does not preclude them from appointment but we ensure that all processes are followed. We would look to Occupational Health for advice to ensure all individuals we appoint are fully supported so we, as responsible employers, ensure they are effective in their roles. Managers within services would support the people concerned with supervision to ensure their physical and mental wellbeing are maintained and supported.

Q13 - *It has been announced that after 2021 there may not be a budget for health and social care. Where will the budget come from, if any? What are your views?*

Response from Jane Hyldon-King, NELC

Cllr Hyldon-King said people in the room would be well aware of the cuts the local authority has had to take. She was not aware of any more budgets being cut but this was dependent on future funding through government. The original question may well refer to news around future Public Health funding and the council was concerned as there was no guarantee about public health from 2020-21 and if that

were cut, it would have huge effects on North East Lincolnshire and the rest of the country.

Q14 - *Following evidence from the Academy of Medical Royal Colleges earlier this month, will Peter commit NLaG consultants to writing to patients directly (where appropriate) following procedures and outpatients appointments? Such a move would cut out huge numbers of unnecessary GP appointments as in most cases, the GP asks the patient to attend surgery now, which is usually a waste of both GP and patient time.*

Response Dr Kate Wood

The pragmatic answer is yes. The longer answer is its right and appropriate to communicate with the right people at the right time. At the moment, that's the GP but we should be including the patients in these communications and they should be in control of the care they are receiving. We will be taking advice of the Royal Colleges and working through this in a pragmatic way.

Q15 - *Transformation Boards have been established with Patient Representatives, is everyone in the Trust, medical staff, GPs and the public aware?*

Response from Mark Webb, lay chair of North East Lincolnshire CCG

Today has been very much about transformation – whether it's because of recent quality reports or because our communities need us to transform, transformation is inevitable. What I've seen over last 12 months is that people are starting to work differently – for example, the CCG working with the council, partnerships across providers. Transformation is happening; we are not always getting it right and yes there are mountains to climb which is why the other important partner in transformation is the community. It is about engaging with people on transformation right from the beginning and I'm certain from a CCG point of view that's what we will continue to do. We can't transform on our own, we need you working with us and I feel from today, that's exactly what is happening.

Post meeting note from Dr Kate Wood

There are a number of transformation boards that have been set up within the Trust surgical division reviewing specific specialities. I agree that this is not a widely publicised initiative, and will highlight to the division the need to share this information more widely. Thank you for bringing this to our attention.

Evaluations - What did you tell us about the meetings?

We have looked at the evaluations forms we asked you to complete from both sessions. We have found that 94% of those completing the forms at the daytime meeting said they rated the session overall as either good or excellent, and 100% of those attending the twilight meeting rated the session as good or excellent.

Comments included:

- Day was really well organised, but the programme was a bit too tight
- Like the handsets & would like to see them again in the future
- Love the Clikapad
- It felt a bit rushed as there as a lot on the agenda
- Some presentations rather long – could be shorter
- Members were fully engaged and the voting machines were useful

We also received a number of suggestions about how we can improve similar events in the future; all of which we will take on board to help us plan our next engagement events, 'The Way Forward for Health & Social Care, which will happen in March 2019. We will send you more information about these at a later date.

We also asked you what you would like to see included in future events and your suggestions included:

- Mental health and learning disability services
- What's happening to mental health and adult social care?
- How is the 'Union' shaping future improvements in health and social care in NEL?
- Acute Services Review developments
- Parent Carers
- How can we make North East Lincolnshire the healthiest place in the UK, rather than somewhere with some of the worst health outcomes? What are the co-ordinated strategies to make this happen?
- Progress to limit unattended GP appointments
- Communication between primary & secondary care
- The CCGs view of transport – we are all getting older and less likely to drive

The Way Forward 2019

Join North East Lincolnshire CCG and Northern Lincolnshire and Goole NHS Foundation Trust to discuss plans for local health and care services on:

Thursday March 14th from 1pm to 4pm
the Humber Royal Hotel, Grimsby
DN34 4LX

Or

'Bite-size' Twilight session

Tuesday March 19th 5pm to 7pm
Centre4, Wootton Rd, Grimsby,
DN33 1HE

Everyone welcome!