

LEWISHAM CCG
GOVERNING BODY PUBLIC PRE-MEETING

9 January 2020, 9.30-10.00am

From the Governing Body:

Dr Faruk Majid, CCG Chair

Mr Martin Wilkinson, Lewisham CCG Managing Director

Ms Anne Hooper, Lay Member

Dr Charles Gostling, Senior Clinical Director

From the CCG:

Mr Charles Malcolm-Smith, Deputy Director (Strategy & OD)

Ms Teresa Rodriguez, Engagement Officer

Mr Steve James, Communications Manager

14 members of the public attended

Question 1

How will the new arrangements at borough level operate? Will there be local discretion for community services? What if people in Lewisham want to do things differently? For example, pathology arrangements, and as reported at the Primary Care Commissioning Committee initiatives such as Pharmacy First are not being done elsewhere in south east London. As referenced in the STP Response to the Long Term Plan, how will the delegation of community based care (CBC) within an overarching framework work?

CCG Response

We understand there is anxiety about pathology that local blood tests are carried out at a convenient location. There is no reason why timely provision of results and local testing would change.

The CBC framework referenced in the long-term plan, this is to provide consistency in services, such as rapid response services and others that interface with trusts. Community services are already networking, linking with the work of PCNs and anticipatory care. This would be for local determination.

Follow-up Question

Pathology: would the borough based board be able to commission from Lewisham & Greenwich Trust (LGT)?

CCG Response

Direct access pathology is for local decision.

Question 2

Are the terms of reference for the borough based board available for comment?

CCG Response

The Managing Director's report outlines the core expectations of the terms of reference from CCG perspective. The local authority input will be through the Mayor and Cabinet.

Follow-up Questions

Duties and responsibilities and two way flow are crucial. Voting powers are with 4 CCG members.

Local authority representatives are officers not elected representatives so there is no direct democratic access to the committee.

There is no vote held by voluntary and community services.

How will these arrangements ensure responsiveness to local pressures?

CCG Response

The voting arrangements will be for CCG/NHS decisions; the CCG cannot take decisions for the council, but will be working with the Mayor and Cabinet for the council. The CCG is happy to take observations and comments on these terms of reference and the Managing Director can meet with interested parties.

Question 3

How will the lay member on the borough based board be chosen?

CCG Response

A selection process amongst existing lay members has been completed and Anne Hooper has been appointed.

Question 4

With regard to dementia and older adults, different boroughs have different demographic groups, and carers are worried they may not be represented. What reassurance can you give?

CCG Response

We absolutely committed to continuing to meet the needs of our population. Without equalities the health service would not deliver for all. This will be a responsibility for all members of the Governing Body and borough based board.

Question 5

A campaign in Reading has promoted PSA testing on a regular basis. Are there plans for a similar campaign in Lewisham?

CCG Response

We follow national guidance on this area which is a difficult one. There is not robust evidence for regular screening programme and investigations following testing may show nothing is wrong. We are taking the same approach across south east London and it is reviewed by the South East London Tumour Group.

Question 6

How were GP representatives on the borough based board chosen? Would like to see more than one lay member.

CCG Response

The GPs were chosen by consent within the current GP representatives on the Governing Body. There will be 9 lay members across south east London who will be working together.