

LEWISHAM CCG

GOVERNING BODY PUBLIC PRE-MEETING

10th MARCH 2016, 9.00-9.30am

From the Governing Body:

Ray Warburton (RW), CCG Deputy Chair, Lay Member

Martin Wilkinson (MW), CCG Chief Officer

Dr David Abraham (DA), Senior Clinical Director

Dr Charles Gostling (CG), Clinical Director

Nigel Bowness (NB), Healthwatch representative

From the CCG:

Susanna Masters (SM), Corporate Director

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

Sola Afuape (SA), Interim Head of Communications & Engagement

Also in attendance:

Clive Caseley, Strategic communications advisor

Five members of the public attended

Question 1

What public consultation has there been on closure of acupuncture services at the Wells Park practice?

CCG Response

This is one of the enhanced primary care services that the CCG intends to decommission from 1st April 2016. Whether it is a significant service change that requires consultation is a judgement by the local health overview and scrutiny committee, in Lewisham the Healthier Communities Select Committee. We have liaised with the chair, Councillor Muldoon, and our understanding is that it has not been considered a significant change for consideration by the committee.

Follow-up Question

The Treatment Access Policy in the Governing Body papers is not accurate concerning the claim of limited clinical effectiveness and lack of evidence base for acupuncture.

CCG Response

Acupuncture might be considered as part of a pathway of care offer rather than standalone, for example acupuncture is available at Lewisham & Greenwich Trust physiotherapy services. Our review found that the service is not provided equitably in primary care.

Other queries raised by the members of the public concerning previous correspondence with the CCG on this matter will be addressed outside this meeting directly.

Question 2

What is a neighbourhood care network? Is it a physical entity or a series of services managed from a hub?

CCG Response

The concept is still being developed, but it does involve both bringing together services as physical entities as well as improving connections and developing informal networks with and between community and voluntary services around the person. The different needs of different people will mean that everyone's network is different.

The starting point for building such networks is based on the GP practice so it's important they are working collectively. Other aspects to consider are that some services will need to be provided across Lewisham not confined to a neighbourhood and we also need to connect children's services.

Follow-up Question

The Our Healthier South East London (OHSEL) community based care (CBC) strategy assumes that hospital service provision will not be increased because community based services will be increased and reduce demand for acute care. How will you work out if plans are keeping in line with predictions so that we don't get to 2020 and have to increase hospital provision because CBC hasn't delivered the reduction for acute care?

CCG Response

We have recognised that challenge for the CCG and it is a dilemma shared throughout the NHS. We are developing a framework to monitor the impact of our strategy and the demand for acute services. In addition to the CBC we have to look at other areas for change, for example by service provider organisations working differently, such as with the possible options for planned care, working collaboratively, and improving efficiency.

Question 3

Has it been a deliberate policy that access to some community services is restricted for smear testing, HIV testing, mental health services and some sexual health

services? Some patients have not been able to access smear and HIV testing services because sexuality has been part of the criteria.

CCG Response

Sexuality should not be a factor determining access to smear or HIV testing. There is a walk-in service for HIV testing at Rushey Green GP practice. Smear tests should follow a national protocol. We will investigate this further to ensure these services are being provided appropriately locally.

Question 4

The minutes of the last Governing Body meeting (14th January 2016) refer to dementia tests being undertaken at the same time as the flu jab. How common is this?

CCG Response

We would not expect a full dementia test to be undertaken in those circumstances but it would be appropriate to use the opportunity for some screening questions to be asked that could lead to a fuller examination if appropriate.