

Annual General Meeting and CCG Star Awards 2015

Thursday 11 June 2015 - Crowne Plaza Hotel, Langley Drive,
Crawley, RH11 7SX

PUBLIC QUESTIONS AND ANSWERS

Introduction

A half an hour time slot was dedicated to a Question and Answer session which took place after the presentations. Attendees were advised that should their question not be taken due to time constraints they could complete the 'Question Slips' available on each table. All questions received were taken on the night and below are both question and answer:

Q: What is the timescale for the delivery of new services promised for Bewbush Medical Practice?

A: Dr Amit Bhargava- Chief Clinical Officer, Crawley CCG - It has been recognized that Bewbush surgery is currently very overcrowded. It is a matter of going through due process and we are currently working together with NHS England and the practice to produce a business case as soon as possible. We are aware of the current situation that exists at the Practice and are therefore trying to accelerate the whole process. To date we have invested in planning and hope to be able to deliver part of the planned services early next year.

Q: Is there any plans in place on how to reduce the extreme pressure that the local GP's are currently working under. GP's are slowly becoming more involved with other related services such as their work with the CCG and also acting as a single point of contact for patients. I cannot see if there is a strategy on how to address this situation so the GP's could better deliver their core statutory duties better. If it is patients that are causing the pressure, perhaps we need more education on how we use services appropriate without causing this added pressure?

A: Dr Amit Bhargava- Chief Clinical Officer, Crawley CCG - There is an rehearsed argument at West Sussex County Council Scrutiny Group which focuses on primary care and that 9 out of 10 contact request are for GP's . We are aware of the looming shortfall in GPs and there only being capacity within Pharmacies. We are working on other services that our local population can access such as the Urgent Treatment Centre at Crawley Hospital, which if used correctly would avoid people travelling to East Surrey Hospital and using the Accident and Emergency Unit. Other improvements and use of other health professionals within the NHS will alleviate the pressure on GPs being used as a single point of access especially for mental health and community based services. We also anticipate using more advanced technology for referrals.

Allan Kennedy – Lay Chair Crawley Governing Body – Regarding GPs being a single point of access, following a recent meeting with Dementia sufferers and their carers it was noted that all involved felt abandoned with no information about existing help or support services available to them and their families. An action resulting from this is an intense promotion of services available to people.

Q: What are the time guidelines for those patients who need to see a cardiologist?

A: Sue Braysher - Chief Officer, Horsham and Mid Sussex CCG - According to the NHS Constitution all patients should be seen within 18 weeks of referral from GP.

Q: Please comment on a recent report which announced that if NHS was to pay more attention to the procurement process it would generate a saving of £5bn per annum?



A: Sue Braysher - Chief Officer, Horsham and Mid Sussex CCG - It is recognised that there is a variation between national and local standards and we could have better collective purchasing power. We do have a need to constantly review for further efficiency savings as demonstrated in the Carter Report you mention. In terms of procurement we have done some of the easy bits already but the harder bits are potentially yet to come.

Dr Amit Bhargava- Chief Clinical Officer, Crawley CCG - Last year £3.5bn was spent on agency staff, considering the deficit in NHS budget is reaching £30bn it is clear that efficiency when procuring has to be scrutinised. There is room for more efficiency when procuring in the system without detriment to patient care.

Q: Do you not think that the things are presented in a way that may cause more confusion, as the public does not get an in-depth explanation?

A: Peter Nicolson – Lay Member for Patient and Public Engagement, Crawley CCG - I agree that there are many resources in the community but sadly we do not seem to do enough to relay that there is existing help and services already out there. The Health and Well Being Project Board recently got people involved to get them on board with taking their medication correctly. This was for their well-being as well as trying to avoid over prescribing. Patient's education and engagement should be our priority.

Q: Can you please provide an update on what is happening at Broadfield Health Centre?

A: Dr Amit Bhargava- Chief Clinical Officer, Crawley CCG - The plan for a Children's Development Centre commenced 2 years ago and it has taken the developers a considerable amount of time to get it right. The Business Case has been approved by NHS England but there is still some delay in procuring the principal contractor.

Q: Can you please provide an update on Co-Commissioning?

A: Sue Braysher - Chief Officer, Horsham and Mid Sussex CCG - Both Crawley and Horsham and Mid Sussex CCGs decided to leave NHS England to commission primary care as from April 2015. Allan Kennedy sits on the National Panel so we have an in depth insight to what is happening at a national level including the review process. We believe we are now in a more informed position about the process itself, budget allocations and workforce implications and will restart a conversation with our GPs in September to work through the potential options (full delegated commissioning, joint commissioning with NHS England or minimal input such as now) to see whether our GPs want to move forward from April 2016.

Dr Amit Bhargava- Chief Clinical Officer, Crawley CCG – To take care out of hospitals we need to invest in community and primary care and do need the power to co-commission. At the time we were being asked to choose the timing was wrong, we could not take the risk and wanted to invest in integrated community based care.

