

**NHS SE LONDON CLINICAL COMMISSIONING GROUP
GREENWICH BOROUGH BASED BOARD**

**PUBLIC QUESTION AND ANSWERS
THURSDAY 12 NOVEMBER 2020**

VIRTUAL MEETING

PANEL:

Krishna Subbarayan (Chair)	GP Governing Body Member (Greenwich), SEL CCG
Sabah Salman	GP Governing Body Member (Greenwich), SEL CCG
Neil Kennett-Brown	Placed Based Director (Greenwich), South East London (SEL) CCG
Tuan Tran	Chair of Greenwich Local Medical Committee
Florence Kroll	Director of Children's Services, Royal Borough of Greenwich
Jackie Davidson	Assistant Director of Public Health, Royal Borough of Greenwich (RBG)
Richard Rice	Lay Member, Greenwich Borough Based Board
Naomi Goldberg	Director of Strategy, METRO/GAVS
Joy Beishon	Chief Executive, Healthwatch Greenwich
Robert Shaw	Director of System Development (Bexley and Greenwich), SEL CCG
Sarah McClinton	Director of Health & Adults Services, RBG
Sandra Islander	Programme Director, Oxleas
Fiona Harris	Assistant Director of Public Health, RBG <i>(for Steve Whiteman)</i>

REF	QUESTION	RESPONSE FROM GREENWICH BOROUGH BASED BOARD
	<i>Questions in advance of the meeting</i>	
There were no questions raised in advance of the meeting that were not responded to in advance of the meeting.		
	Questions raised at the meeting	
1	Why are members of the public unable to ask questions orally at meetings of the Greenwich Borough Based Board?	Meetings of the Greenwich Borough Based Board are meetings held in public, rather than public meetings. As such, the purpose of the business part of the meeting is for members of the Board to engage in discussion of the papers to make decisions in relation to health and care services and provide oversight

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		<p>and scrutiny of key areas of local system performance.</p> <p>In a traditional face-to-face meeting, there is often an opportunity for members of the public to raise at the start of the meeting any questions related to agenda items which might then be covered by subsequent discussion of those items. If any questions were raised ad hoc during the meeting, the Chair would usually ask that the individual wait until the allocated space for questions. This in part is why we ask on our website for members of the public to raise questions in advance where possible.</p> <p>As well as allowing the business part of the meeting to be conducted in full, opening the meeting chat function for written questions in good time before the end of the 'main meeting' part of the agenda allows the Board to be able to respond to questions quickly when that section of the agenda starts. It also gives a better chance of questions being answered full at the meeting compared with questions being raised verbally at the end of the meeting, and allows more questions to be raised.</p> <p>The technology we use only allows us to have meetings either open to everyone (including members of the public), or to Board Members only, and so the latter option with the opportunity to receive written questions, allows for participation by all at the relevant points of the meeting. Options for more interactive engagement will be considered as and when technology supports this.</p>
2	<p>How is progress being made on Feedback Report on patient and public engagement (SEL 12/3/20), for instance: potential mechanisms; People's Panel, Patient Conference; Engagement Assurance Committee; project or theme-based engagement; training and support and Patient Participation Groups (PPGs)? What's the progress? What resources are available for PPGs?</p>	<p>Response from Russell Cartwright</p> <p>The feedback report, as part of the CCG's original engagement exercise between January and March 2020, has been published on the CCG's website at https://selondonccg.nhs.uk/get-involved/developing-engagement/. However the Covid-19 pandemic has required the CCG to engage differently since the discussion paper was drafted. Our approach to engagement will be developed further in conjunction with members of the newly-established Engagement Assurance Committee.</p> <p>A series of task and finish groups were held throughout the summer with local residents (including from Greenwich) to help to develop the terms of reference</p>

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		<p>for the Engagement Assurance Committee and the role and responsibilities of public representative members. Meetings of a Recruitment Liaison Group were held with local people in September and October in order to gain advice and assurance in relation to the recruitment process for public committee members.</p> <p>The recruitment panel was independently facilitated and included a patient member from outside of the local area. An introductory meeting of the Committee is scheduled for early in December, with the subsequent meeting scheduled for January. Further task and finish groups supported the development of a set of principles for engagement, which were approved by the Governing Body in September and are published on the CCG's website.</p> <p>It is a contractual requirement for GP surgeries to have PPGs. Prior to the merger of the previously individual South East London CCGs, there were differing approaches to the support given to PPGs in each borough. The merged SEL CCG is currently reviewing these approaches with the aim of achieving consistency and to inform future engagement work by and within Primary Care Networks.</p> <p>As regards project- or theme-based engagement in Greenwich, plans are being developed for engagement in relation to the priorities identified as part of the Borough's Recovery and Reset Plan. The CCG is engaging with seldom heard groups on the flu campaign and winter planning, which includes work underway with the Royal Borough of Greenwich to develop a community champion programme, as part of which the recruitment of local community leaders will help us to share important winter messaging, such as flu and Covid vaccinations.</p>
3	Can the Board confirm if two Greenwich patients who are resident and receive services in the borough have been appointed to the SEL CCG Engagement Assurance Committee?	<p>Response from Russell Cartwright</p> <p>The recruitment process for the Engagement Assurance Committee is now complete. There was a lot of interest in the roles and the pool of candidates was highly competitive. The last of the interviews were held the week commencing 9 December. Two service user patient representatives resident in Greenwich have been appointed.</p>

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4	<p>What is the CCG doing to ensure that all PPG members are consulted and engaged with in relation to service changes?</p>	<p>Response from Russell Cartwright</p> <p>The CCG follows its principles for patient and public engagement, which are available on our website: https://selondonccg.nhs.uk/wp-content/uploads/2020/10/Engagement-Principles-Sept-2020.pdf. PPGs will have an important role in this, and it will always remain important to reach out and engage widely across our diverse communities in Greenwich.</p> <p>It is a contractual requirement for GP surgeries to have PPGs. Prior to the merger of the previously individual South East London CCGs, there were differing approaches to the support given to PPGs in each borough. The merged SEL CCG is currently reviewing these approaches with the aim of achieving consistency and to inform future engagement work by and within Primary Care Networks.</p> <p>In Greenwich, the Communications and Engagement team has been sharing information with PPG Chairs, and recently made contact with them to request that they reach out to their members to gauge interest in being added to the distribution list to receive information directly.</p>
5	<p>The 10 September minutes refers to an Engagement Assurance Committee meeting being scheduled in October. Did this meeting take place?</p>	<p>Response from Russell Cartwright</p> <p>The recruitment process to appoint representatives lasted longer than originally anticipated, and included workshops held with potential and then shortlisted applicants. The introductory meeting of the Engagement Assurance Committee was rescheduled to take place in December.</p>
6	<p>For Public Health in relation to Covid: Are there proactive measures now proposed/in place for schools and universities (the possibility of waiting for the possible impact of half-term was mentioned)? What monitoring measures are needed?</p>	<p>Response from Fiona Harris</p> <p>Public Health was working closely with schools and universities in relation to their requirements and concerns, and there were dedicated channels of communication open for the raising of queries. Public Health was giving advice in relation to social isolation and broader management of the virus when needed.</p>

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7	<p>For Public Health/RBG: Does the Test and Trace system allow you to make sure that all those requiring support to self-isolate receive it?</p>	<p>Response from Fiona Harris</p> <p>Where the NHS Test and Trace system is unable to make identify and contact individuals, the local authority's team uses its resources to do. The Local Test and Trace system allows for signposting or referral for help where it is needed. Not all of those being asked to isolate require support to do so. Support is being targeted to those who are vulnerable including people at risk of losing their income</p> <p>We are also looking at how we can effectively communicate the help that is available and developing new models to support this.</p>
8	<p>Healthwatch Greenwich recently published a critical and unbalanced report on patient involvement and PPG membership in Greenwich, following a poor response from patients including meetings which the CCG attended. Healthwatch Greenwich has since completed a patient recruitment process for Greenwich patient representatives for SEL Healthwatch in which PPG members were not informed at the same time as the notice was issued on the Healthwatch website.</p> <p>These SEL roles were also advertised on different dates with different closing dates in the 5 other boroughs.</p> <p>Apart from the flawed process and report, does the Board agree that there is a conflict of interest arising from this matter, particularly as the SEL CCG Healthwatch Director is funded by the CCG?</p>	<p>Response from Joy Beishon</p> <p>Healthwatch contacted all practices and asked all PPG leads and asked if they would take part in the recruitment process for PPGs. More than two thirds of PPG leads took part. Not all practices did, though approximately half of the PPG leads were practice managers.</p> <p>The recruitment process did highlight issues in recruiting to PPG roles, stemming partly from a stated lack of understanding about the roles.</p> <p>The recruitment process has not closed, and applications are welcomed, particularly from candidates who represent the diverse nature of the population of the Royal Borough of Greenwich</p> <p>Healthwatch is an independent body which, as a non-voting member of the Board, is able to contribute to system-wide discussions but not make decisions, and as such there is no conflict of interest.</p>