



Notes : Draft v2
 South West Oxfordshire Locality meeting
 Tuesday 18th June 2019, 13:00-15:00
 Denman College, New Rd, Marcham, Abingdon OX13 6NW

Practice	Representative
Abingdon Surgery	Charlotte Treacy- GP James Nicholson -PM
Berinsfield Health Centre	Jonathan Crawshaw- GP LCD Rita Cabrita- PM
Clifton Hampden Surgery	Irene Steinbrecher- GP Taz Evans- PM (apologies)
Church Street Practice	Elaine Barber – GP Kate Blowfield- PM (apologies)
Didcot Health Centre	Hana Harvey - GP
Long Furlong Medical Centre	Nick Elwig – GP – apols Louise Keeling - GP Diana Donald- PM (Chair)
Marcham Road Surgery	Jacqueline Bryant - GP Rose Moore- PM
Malthouse Surgery	Bill Brace - GP David Ridgeway- PM
Newbury Street Practice	Patricia Heavens- GP Karen Fido- PM – apols
Oak Tree Health Centre	David Ellis- GP
White Horse Surgery	Rob Russ- GP David Owen-Smith- CEO
Woodlands Medical Centre	Helen Miles- GP Sam Barrett- PM
OCCG	Julie-Anne Howe, Locality Co-ordinator for NE, City, SW
SWOLF	Bob Lassam
Other Guests	Rob Walker, Healthshare re MSK Physio Praveen, Associate Clinical Director

1	Introduction The Chair (DD) welcomed everyone to South West Oxfordshire Locality (SWOL) June 2019 meeting. Apologies are noted above and there were no new declarations of interest.	
2	Minutes of the last meeting 21st May 2019 Note that Adam Heath from Rego is spelt Heath not Health. These minutes were agreed and can be found in the link above.	

	<p>Matters Arising: <u>Prescribing Incentive Scheme update</u> here. The scheme has been simplified. Practices will automatically be included in this scheme unless they chose to opt out. Practices agreed it was clear but noted their dissatisfaction with the financial gateway.</p> <p>Action from May meeting: <u>Vasectomy update</u> – JC advised this service is being discussed at STP level – any questions to JC to feed in please. It was noted that practices can't offer a service to their own patients. <u>Prescribing LIS</u> – above <u>HealthShare</u> attending June meeting.</p>	<p>All</p>
<p>3</p>	<p>LCD update:</p> <p>1. Primary Care Networks:</p> <p>Boundary gaps – these had all been resolved across the PCN practices.</p> <p>PCN Extended Hours – paper here. JC updated the group on the new requirements for this part of the PCN DES. It requires some face to face appointments to be in place which Practices noted. Sign up is via CD sign up to the DES as a PCN. 'The Network will deliver from 1 July 2019 extended hours access appointments to all registered patients in the PCN in accordance with the requirements set out in the Network Contract DES specification.'</p> <p>PCN Social Prescribing – paper here See information at end of these notes from Bromley-by-Bow below regarding training which is available to book directly. Abingdon & District advised they are developing their own job description. Abingdon Central are using MIND to top up existing services and details / schedules are being clarified. Didcot is looking at PML and another option and will discuss further. White Horse Botley are meeting MIND next week and seeking a balanced input. Wantage have met MIND and are awaiting costs on other offers before a final decision is taken.</p> <p>2. Wantage update: Nothing new so carry to July meeting.</p> <p>3. Didcot update: JC had a very productive meeting with Mark Stone on 12 June 2019 with Jo Cogswell, OCCG Transformation Director, and Julie Dandridge. Consideration is being given to how to get a building on site at the right cost / function – perhaps a modular building to be pragmatic and meet the timescales. It was noted the OOHs building is modular re MIU in Abingdon. Woodlands would be the occupiers. BL raised the issue of sufficient patient parking, and bus stops, although public transport is not always suitable, and this was noted.</p> <p>4. STP Funding – JC advised for 2018/19 the 30% outcomes aspect of this scheme had not been met despite a mild winter and therefore could not be paid</p>	<p>Note</p> <p>All</p> <p>JAH</p>

	<p>out. He explained the current thinking around the scheme and advised that it was being extended to 2019/20 if practices wished to sign up. This would very likely be the last year. Practices agreed to sign up for 2019/20.</p>	ALL
4	<p>MSK Physiotherapy – presentation here. Rob Walker attended from HealthShare robert.walker16@nhs.net , robert.walker@healthshare.org.uk with his clinical colleague Dr Praveen Thamattore, Praveen.thamattore@healthshare.org.uk A clinic is opening in Wantage as soon as OHFT have made the space available. He advised self referrals were rising with an equal drop in GP referrals – this was recognised as GPs and other clinical staff recommending the referral, and concern was expressed about what would happen to waits when the wider public advertising started in earnest? RW stated that elsewhere, after an initial surge appointments had settled down. Questions were asked around access to MRI results, and HealthShare are speaking with EMIS & system 1 about a data sharing agreement. Results can be sent to practices upon request.</p> <p>Q re why so many letters? A: trying to keep practices informed. Q re access to NOC Rheumatology as there was doubt NOC were still offering appointments? A: JAH to check situation and capacity. Practice posters are out – RW to send to JAH. JAH to speak with Paul Kettle re information for TV screens. Q re waiting time KPIs? A: 7 working days re Urgents / 6 weeks re Routine appointments. HealthShare have held a big recruitment drive and have 8 more WTE so feel waits will subside. Q re screening for spinal / cancer? A: if low risk won't reject back, but if malignant will request an urgent scan. Q re patients attending Royal Berks clinics then find it hard to get back into the Oxon system? A: there is a national booking line, you need to clearly state which site is required. Q concern re PPGs advising patients is a poor way of reaching all patients about self-referrals. A: HealthShare don't have a budget to advertise widely but over time hope self-referral becomes the norm. Perhaps share via village newsletters etc. East Bride example of now at 80% self referrals over 7 years. Emails could be sent via MJOG for existing patients. Poster here. Q re patients without internet access? A: can advise at the surgery who can refer on, or use Library. HealthShare already receive 9-15,000 calls per month so can't take self referrals this way. Q re referral forms being received may not be being completed properly? A: it would be good to have more information on what conservative measures have already been taken to save wasting everyone's time. Also helpful for practices to state if they are just uncertain about something rather than stating what they think it might be.</p>	
5	<p>PPG involvement in PCNs : JAH had received some responses to paper 6 here. Practices to send responses to JAH please if they have not already done so. Julie-annehowe@nhs.net</p>	All
6	<p>Update from SWOLF: BL advised he was unable to attend the last SWOLF meeting – next one planned for Tuesday 23rd July. Update at the July meeting.</p>	

	<p>A discussion followed on papers available for PPGs to use in their discussions. JAH advised there were various papers in the public domain already: OCCG website: https://www.oxfordshireccg.nhs.uk/ Board papers: https://www.oxfordshireccg.nhs.uk/about-us/occg-board-meetings.htm OPCCC papers: https://www.oxfordshireccg.nhs.uk/get-involved/opcc-committee.htm Locality meeting papers (notes of meetings run a month behind as need approval before being loaded) : https://www.oxfordshireccg.nhs.uk/your-local-area/south-west/south-west-locality-meetings.htm</p> <p>White Horse Botley PCN PPGs had met and discussions around the changes had taken place as the change was more significant. JAH advised that in other Locality PPG Forum meetings the practices had welcomed working at a larger PCN level as they felt it would strengthen their own positions.</p> <p>It was noted that despite being two PCN groups to enable them to meet the 30-50,000 population criteria, both Abingdon PCNs are still working collaboratively in the best interests of all of their patients across the area.</p>	
7	<p>IPIL data: JAH enquired whether practices still received this information, and if so did they find it useful? The majority decision was that the data was out of date when received, and as discharge summaries are now electronically sent there is no need for it any more. The agreement was that the data should stop being sent to practices. JAH to take this forward with IT.</p>	JAH
8	<p>Tea Break</p>	
9	<p>Primary Care Networks – round table update:</p> <p><u>Abingdon Central</u> – progressing nicely – SP likely to be MIND. Schedules are done. Meeting bi-monthly with Clinical Director and partners. Working principle is all to agree or don't do it.</p> <p><u>Abingdon & District</u> – Similar position re schedules. Good response re Clinical Pharmacist post. Employing SP via lead practice – strong interest in post.</p> <p><u>Didcot</u> – will have a flat practice structure with unanimous voting. CD in post and most schedules are sorted. Meeting Friday to resolve outstanding issues and around employing staff. Noted one week per year of employment is redundancy requirement. Relationships are key.</p> <p><u>Wantage</u> – on track.</p> <p><u>White Horse Botley</u> – Almost completed schedules. SP job specification is in place and meeting MIND shortly re directory of services. WH will seek a clinical prescriber (already in place in Botley).</p> <p>A conversation followed on the merits of being a limited company with questions on how to set one up, and examples elsewhere.</p> <p><u>Kassam Integrated Primary Care Workshop 13.6.19</u> – JC updated the group on</p>	

	<p>the meeting content and advised the output would follow shortly to CDs. Thanks to Shelagh Garvey who had attended for SWOLF. Views were sought: Mostly high level information transfer, there will be challenges to look at priorities and who should be involved. It would be helpful to agree some principles as next year will be working at scale in an Integrated Care System.</p>																									
1	<p>AOB: <u>GPAF query</u> on when appointment volumes move from 30 minutes per 000 population rising to 45 minutes? This is a contract issue for the Federations and OCCG. Contract runs until end March 2021 then PCNs will determine its future. Meantime practices will be wanting to get value from the current contract funding with as many appointments per 000 as is sensible – moving from the current 30 per 000 to an increased volume of 45 per 000 over time. The guidance is woolly but some Federations have already increased their capability (often in areas where the need is highest) to support those practices. So whilst there is not a specific date in any guidance seen yet, this is good for patient access, for practices, and for NHS value for money.</p> <p><u>Two week waits for breast clinics at OUHFT</u> – no appointments were available and patients were being asked to go elsewhere. RR will Datix the issue. JC to raise as well with the Quality Team.</p> <p><u>CQC Inspection at OUHFT</u> – was ‘requires improvement’ in specific areas and an Action Plan was being put in place.</p> <p><u>Gynae reopening</u> – expected by end of June so practices could start to re-refer back in to the service. JC to check with Dr Shelley Hayles if this was the case. <i>Post meeting note: OCCG Board to discuss then announcement will be made in GP Bulletin.</i></p>	<p>Note</p> <p>RR/ JC</p> <p>JC</p>																								
1	<p>Papers for information:</p> <ol style="list-style-type: none"> I. Paper 7 - Planned Care Project Report II. NHS App - https://digital.nhs.uk/services/nhs-app/prepare-your-practice-for-connection-to-the-nhs-app III. OCC - Prevention of Domestic Abuse Strategy – led by sarah.carter@oxfordshire.gov.uk if interested do get in touch. IV. Paper 8 - OCCG Board Briefing V. Paper 9 – JSNA – snake update VI. OPCCC papers on Primary Care from last meeting – PCNs, Services, BOB Primary Care Strategy 																									
1	<p>Next SWOL Exec meetings, times 1-3:</p> <table border="1" data-bbox="204 1713 1236 2027"> <thead> <tr> <th>Date & time</th> <th>Venue</th> <th>Chairing Practice</th> </tr> </thead> <tbody> <tr> <td>16th July 2019</td> <td>Denman College</td> <td>Didcot Health Centre</td> </tr> <tr> <td>20th August 2019</td> <td>Denman College</td> <td>Marcham Road</td> </tr> <tr> <td>17th September 2019</td> <td>Denman College</td> <td>Malthouse Surgery</td> </tr> <tr> <td>15th October 2019</td> <td>Denman College</td> <td>Newbury Street</td> </tr> <tr> <td>19th November 2019</td> <td>Denman College</td> <td>Oak Tree</td> </tr> <tr> <td>17th December 2019</td> <td>Denman College</td> <td>White Horse</td> </tr> <tr> <td>21st January 2020</td> <td>Denman College</td> <td>Woodlands</td> </tr> </tbody> </table>	Date & time	Venue	Chairing Practice	16 th July 2019	Denman College	Didcot Health Centre	20 th August 2019	Denman College	Marcham Road	17 th September 2019	Denman College	Malthouse Surgery	15 th October 2019	Denman College	Newbury Street	19 th November 2019	Denman College	Oak Tree	17 th December 2019	Denman College	White Horse	21 st January 2020	Denman College	Woodlands	
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	17th March 2020	Denman College	Clifton Hampden		
Action Log:					
	Action: Practices to sign up to STF scheme for 2019/20				All
	Action: HealthShare poster – Rob to send to JAH to circulate				JAH
	Action: Practices to send their PPG information to JAH (paper 6)				ALL
	Action: IPIL data – JAH to advise within CCG that this is no longer needed.				JAH
	Action: 2ww breasts – JC to raise with Datix Team				JC
	Action: Gynae recommencing – JC to speak with Shelly Hayles				JC

Social Prescribing Link Worker training and professional development at Bromley by Bow Centre from the Experts – Autumn 2019 Programme. Book now to avoid disappointment.

Dear colleagues,

The Bromley By Bow Centre, leaders in social prescribing for over 20 years, is delighted to launch its autumn Social Prescribing Link Worker programme. This will be delivered in September and October 2019 in partnership with the University of East London (UEL)

The four day training programme, which may be booked as individual days, is delivered by its experienced social prescribing practitioners, professional trainers and specialists from UEL.

The training is suitable for both new link workers and those looking to develop their practices.

For full details and booking [click Eventbrite booking here](#)

We are also offering a **20% Early-Bird discount**. To use the discount, copy and paste this code **Early-Bird** in the “enter promo code” box and the discount will be applied to the total.

All learners will receive a CPD certificate of attendance.

For more information about the training please contact me.

Best wishes,
Alya

Alya Rashid

Social Prescriber - Wednesday & Friday

Insight Project Manager (Social Prescribing) – Monday, Tuesday & Thursday

Tele: 0208 7099840/0208 7099741

www.bbbc.org.uk

Social Prescribing Link Worker Training and Professional Development at Bromley by Bow Centre – autumn 2019 Programme



The Bromley by Bow Centre, leaders in social Prescribing for over 20 years and the University of East London (UEL) are proud to be delivering a four Social Prescribing Link Worker training programme.

Who is this training for?

This training programme is primarily aimed at social prescribing link workers also often known as community navigators, social prescribing coordinators, and community connectors. The training may also be relevant for care navigators, local area coordinators, health trainers and others working in frontline roles, such as housing workers who are seeking to enhance their skills. The training days, particularly the introductory day, will also be very helpful for those wishing to find out more about social prescribing or considering a career as a Social Prescribing Link Worker.

What does the training cover?

The training programme covers a series of core professional skills and competencies that social prescribing link workers use in their role with their clients and in managing systems. Each day will include opportunities for discussion, sharing and exchange of knowledge and experiences with fellow social prescribing link workers.

Attendees can book for individual or multiple days.

Day 1 – An Introduction to Social Prescribing

Wednesday 25th September, 9.30 – 4.00

This day will give general overview of the theory and practice of Social Prescribing, including, the aims of social prescribing, processes of social prescribing, role of link workers, referral routes and the evaluation processes used to improve social prescribing outcomes.

Day 2 – Social Prescribing and Community Development

Thursday 26th September, 9.30 – 4.00

This day will give you a better understanding of how community based solutions can be facilitated through social prescribing and the factors involved in their delivery. It will include how social prescribing works with the voluntary sector and how it can be tailored to the characteristic of specific communities, groups and individuals.

Day 3 – Working with Vulnerable Adults and Supporting behaviour Change

Thursday 17th October, 9.30 – 4.00

This day will help you understand how to work effectively with vulnerable adults, the importance of clear communication and how the use of motivational interview techniques is used to engage with clients to increase their motivation to make behaviour changes. The session will also explore the importance of contracting, building trust, boundaries, goal setting as well as give an overview of how to carry out relevant actions to safeguard suicidal clients.

Day 4 – Managing Caseload and Supervision

Friday 18th October, 9.30 – 4.00

This day will give you a better understanding of effective approaches to managing caseloads, including across teams of link workers. The session will explore when to seek support and the importance good case management. It will also cover the value of reflective practice and the different forms of supervision and support for social prescribing link workers.

Participants will receive a CPD certificate of attendance

Refreshments and lunch will be provided by our social enterprise café.

To book click Eventbrite booking here [click Eventbrite booking here](#)