

Membership

Councillors

Keith Girling (Chair)
Richard Butler
Jim Creamer
Dr John Doddy
Kate Foale
Kevin Greaves
David Martin
Liz Plant
Kevin Rostance
Steve Vickers
Martin Wright

Officers

David Ebbage	Nottinghamshire County Council
Martin Gately	Nottinghamshire County Council

Also in attendance

Hazel Buchanan	Nottingham North and East CCG
Beth Carney	Nottingham North and East CCG
Wendy Hazard	EMAS
Dr James Hopkinson	Nottingham North and East CCG
Annette McFarland	EMAS
Michelle Livingston	Healthwatch Nottinghamshire
Dr Amanda Sullivan	Mansfield and Ashfield CCG
Dr Keith Girling	Nottingham University Hospitals
Dave Whiting	EMAS

1. MINUTES

The minutes of the last meeting held on 19 June 2018, having been circulated to all Members, were taken as read and were signed by the Chair.

2. APOLOGIES

None

Councillor Jim Creamer had replaced Councillor Michael Payne
Councillor Kate Foale had replaced Councillor Muriel Weisz

3. DECLARATIONS OF INTEREST

None

4. GLUTEN FREE PRESCRIBING CONSULTATION AND OTHER PRESCRIBING RESTRICTIONS

Beth Carney, Prescribing Advisor and Medicines Management lead and Dr James Hopkinson, Nottingham North and East CCG Clinical Lead provided information about the consultation on gluten free food and over the counter medicines on prescription. The following points were raised within their briefing:-

- Health commissioners from the four Greater Nottingham Clinical Commissioning Groups consulted on whether the local NHS should restrict or stop gluten free food on prescription. The three options were:-
 - *Limit prescribing for all patients in Greater Nottingham to four units of long life bread and flour per month.*
 - *All Greater Nottingham CCGs to stop all gluten free prescribing, with the exception of children, who will be able to receive up to four units of long life bread and flour per month.*
 - *All Greater Nottingham CCGs to stop all gluten free prescribing.*
- In 2017, the Government carried out a national consultation about whether gluten free foods should be available on prescription for people with coeliac disease. The outcome of this consultation was a recommendation that gluten free prescribing should be restricted to bread and mixes only. However, there has been no decision taken about limiting quantities.
- The six week consultation ran from Thursday 14th June to Thursday 26th July 2018.
- Minor illnesses are those which can be treated with self-care and over the counter medicines, which are medicines you can buy in a supermarket, shop or pharmacy. Please note that these proposals were not about the prescribing of over the counter medicines for people with long term conditions.
- Around 20% of GP time and 40% of their total consultations are used for these common minor conditions that could be treated without seeing a GP. People that care for themselves have better health and reduced demand for services. This in turn allows more time for health professionals to see patients that require treatment for more complex conditions.

- Following the engagement analysis, the recommendation was that over the counter medicines for minor illnesses should be restricted, with the exception that GPs will be able to prescribe in other circumstances of clinical need.

During discussions, the following issues were raised:-

- Regarding gluten free products, Members felt the approach was a postcode lottery. The NHS representatives explained that the purpose of the proposals was to foster greater consistency. It was hoped that there would be no health implications in disadvantaged areas. Gluten free products are becoming more generally available in all supermarkets.
- Regarding gluten free costs, £177,000 is the predicted saving for stopping gluten free prescribing each year. Members felt to remove gluten free products from children was not acceptable.
- There have been over 500 responses from GP practices, Coeliac UK and voluntary sector: a reasonable response rate.
- Members indicated that a figure within the report stating the number of people who would be affected by this change would have been helpful, especially in relation to children

The Chair emphasised his concern also around the children in deprived areas aspect. Option two was Members preferred option.

The Chair thanked Beth Carney and Dr James Hopkinson for their attendance.

5. TREATMENT CENTRE PROCUREMENT UPDATE

Hazel Buchanan provided information to Members about the procurement of services at the Treatment Centre. The following points were raised:-

- Further to the legal challenges arising regarding the procurement to award a contract for service provision from end of July 2018 onwards, a new procurement is being embarked upon from early August 2018, with the objective of awarding a contract for service provision from the end of July 2019 onwards.
- Currently Circle offers a variety of services including outpatients, surgery, termination of pregnancy and diagnostic tests. There are 60 outpatient consultation rooms, five operating theatres, three skin surgery theatres, four endoscopy rooms and dedicated diagnostic facilities such as scans and x-rays. In addition, the centre has an 11 bedded short stay ward for patients who have undergone surgery and require an inpatient stay.
- Rushcliffe CCG is the lead commissioner for the Nottingham Treatment Centre
- It is proposed that a Treatment Centre Procurement Programme Board is established with delegated authority from the Greater Nottingham Joint Committee to progress the procurement project plan and assess, approve/reject accordingly proposals from Programme team.

During discussion, the following points were made:-

- The intentions are to award the contract for July 2019 within this calendar year.
- A lot of money is spent at the Treatment Centre, within the next steps, it is planned to finalise detailed procurement programme planning and development of content, including specifications and finance modelling.
- It is challenging to attract the public to attend the focus groups. Sessions are advertised, go out to other groups including patient groups and Healthwatch.
- The quality of care which has been provided by Circle has been very high and value for money

The Chair thanked for their attendance and asked the attendees to come back in January with a further update.

6. EAST MIDLANDS AMBULANCE SERVICE TRANSFORMATION

Dave Whiting, Chief Operating Officer, Annette McFarland, Service Delivery Manager for Nottinghamshire Division and Wendy Hazard, Ambulance Operations Manager informed Members about EMAS transformation plans. The following points were made:-

- EMAS has five values which underpin everything they do, including the way they deliver our services and how they all work with others. By living these values and supporting others to do the same, this will help to make sure that EMAS is an organisation they can all be proud of.
 - **Respect:** Respect for the patients and each other
 - **Integrity:** Acting with integrity by doing the right thing for the right reasons
 - **Contribution:** Respecting and valuing *everyone's contribution, and encouraging innovation*
 - **Teamwork:** Working together, supporting each other, *and collaborating with other organisations*
 - **Competence:** Continually developing and improving *our competence*
- Within the next five years, EMAS want to use technological solutions to address wider healthcare issues and drive improvement.
- Our proactive work on mental health – patients (prevention and management with partners), and staff (health and wellbeing)
- Becoming national leaders for our work on patient safety.
- Achieving equality and diversity within our workforce.
- Demonstrating international best practice for our clinical outcomes for patients with cardiac arrest.
- Developing and embedding the paramedic skillset in multi-disciplinary team approaches across wider healthcare.
- Developing a positive organisational culture that means staff want to work for EMAS and have high levels of satisfaction?
- Identifying and managing sepsis (across all geographies), building on the success of our pilot within Lincolnshire.

- EMAS plan to engage with staff and volunteers, Overview and Scrutiny Committees, Healthwatch, healthcare partners and commissioners.

During discussion, the following points were made:-

- Last winter was very concerning EMAS where all services were stretched to the limit. More in place a lot earlier on this year to prevent the same happening again. More vehicles will be on the road and 296 more frontline staff over the next two to five years. Half of that figure will hopefully be in post by this coming winter.
- Half of the emergency calls received did not need hospital care, the scheme hear and treat has was used significantly throughout last winter.

The Chairman thanked all representatives from EMAS for their attendance and to come back to us with their winter plan.

7. NEUROREHABILITATION UPDATE

Dr Amanda Sullivan, Chief Officer and Sally Dore, Senior Commissioning Officer for Mansfield & Ashfield CCG updated Members in relation to the changes in Neurorehabilitation services at Chatsworth Ward, Sherwood Forest Hospitals. The following points were raised:-

- The CCGs Governing Body met on the 5th July 2018 and supported the business case to commission guaranteed Neurorehabilitation beds on the current Chatsworth ward as well as to provide a community neurorehabilitation service for patients in mid-Nottinghamshire.
- The Governing body asked for further work to be undertaken with prospective providers to ensure pathways were in place to ensure that the right level of patients (from a neurological point of view) were in the right place in the new model and that the provision was adequate for 24 hour care on the ward.
- The next steps will be to secure a provider for the service and work with them to ensure the delivery of the required service and there after a 6 month evaluation.

The Chairman thanked both for their attendance.

8. WORK PROGRAMME

Members requested the following items to be added to the Work Programme:-

Hospital Parking & Charges
Social Subscribing
Healthwatch

To add EMAS winter plan onto the November agenda and to remove The Treatment Centre from October and add it to the January meeting.

The meeting closed at 1.05 pm.

CHAIRMAN