Greater Huddersfield Clinical Commissioning Group
North Kirklees Clinical Commissioning Group

Engagement event report

September 2020

Table of Contents

1. Background to the event

NHS North Kirklees and Greater Huddersfield Clinical Commissioning Groups (CCGs) hold regular events to give the public an opportunity to hear about the work that the CCGs have been doing, our priorities and plans for the future. The last event was held in June 2020, a copy of the report from this event can be accessed on the CCGs websites.

The events are usually held in public but due to Covid-19 they are currently being held online. The event was held on Wednesday 16th September at 10.30am – 12pm. The event focused on this year's flu vaccination programme, Covid in Kirklees and North Kirklees CCG recovery plan.

Following the event, people were also given the opportunity to join a discussion about the North Kirklees CCG recovery plan; this took place on MS Teams and ran from 12.15pm-1.00pm.

2. Promotion of the event

An email invite was sent to all the groups, organisations and people registered on our database. In addition to this we promoted it on our websites and using social media.

People were able to register for the event via Eventbrite.

All those that registered were sent an email that included joining links for both the event and the discussion group, and information on how to access MS Teams Live Events and MS Teams meetings. These were sent two days before the event and a reminder was sent on the morning of the event.

3. Attendance at the event

91 people signed up to attend the event (see appendix A for a list of the groups / organisations that signed up to attend) and 54 people attended. Unfortunately the functionality of MS Teams Live Events means that whilst we are able to track how many people signed in to attend the event, it doesn't allow us to identify all of the people that signed in, as most people signed in anonymously. However, we were able to see that we had representatives from 19 groups / organisations (see Appendix B).

4. Presentations

The following presentations were delivered (see appendix C and D):

Update - delivered by Dr Steve Ollerton (GP and Chair of NHS Greater Huddersfield CCG) – provided an update on how NHS services are restarting; and how the NHS and Kirklees Council are responding to health inequalities

Flu vaccination programme – delivered by Catherine Wormstone (Head of Primary Care Strategy and Commissioning) – provided an overview of the current flu vaccination campaign and how this differs from previous campaigns.

Covid in Kirklees - delivered by Emily Parry-Harries (Consultant in Public Health, Kirklees Council) – provided an overview of the public health messages in relation to Covid-19, what to do if people have symptoms, the current testing process, and what the current restrictions are both locally and nationally.

North Kirklees CCG recovery plan – delivered by Vicky Dutchburn (Head of Planning, Performance & Delivery) – provided an overview of the current financial situation for North Kirklees CCG and what plans are in place to develop a recovery plan.

5. Questions / comments raised

The following questions / comments were raised in response to the presentations:

Welcome and update presentation

1. An attendee queried when the e-referral form on her GP practice should be used.
2. A question was raised as to whether the current GP working arrangements had had an impact on attendance rates at A&E.

3. An attendee made a comment about how the pandemic had enabled GP practices to bring in telephone and video link consultations.
4. An attendee queried whether the CCGs would be looking to get consistency across the GP Practices in how they are providing their services during the pandemic.
5. An attendee queried when the health visiting service would be providing the full range of support provided prior to the pandemic.

Flu vaccination programme

1. A question was asked about how the vaccination programme would be delivered in care homes.
2. An attendee queried whether the vaccination programme would be extended to include those that are severely underweight.
3. An attendee asked why some practices seem to have started their vaccination programme, while others had not.
4. An attendee passed on their thanks to Lindley Group Practice for their well-planned flu station.

Covid in Kirklees

1. A couple of attendees commented on the use of face masks and how some people are not adhering to the new guidance.
2. An attendee queried how spikes were being managed; particular mention was made to the Denby Dale area.
3. A comment was made that the rule of six is still very unclear especially for community centres, and queried whether there would be any further guidance about this.
4. Question raised as to how people find out what the latest guidance is for their local area.
5. A couple of attendees queried what work public health is doing locally to encourage sport and exercise and what is available to support people. Examples given by attendees were Kirklees Action Leisure, and parent walks
6. One attendee expressed concern about the strain on mental health services at the moment.

North Kirklees CCG recovery plan

1. One attendee sought reassurance that the budget for mental health would not be negatively impacted.
2. An attendee commented that efficiencies should be across all services not just mental health services.

3. A number of attendees commented on the IAPT services. With a particular focus on what the plans are to increase availability and access to services, and whether in future this will include trauma counsellors.
4. An attendee queried where patients go for ear wax removal.
5. A number of attendees commented on the possible changes to services and queried whether this should be done at a West Yorkshire and Harrogate Health Care Partnership level or at a local level.
6. A question was asked about funding for children's dental services and reference was made to the number of children's tooth extractions carried out in hospital.

For further information about the topics discussed in the presentations or questions raised please click on the links provided below.

GP online consultations

GP online consultations information

Access to GP services

North Kirklees CCG – Your GP practice is here to help

North Kirklees CCG – Using GP practices safely

Greater Huddersfield CCG – Using GP practices safely

Hospital outpatient appointments

Mid Yorkshire Hospitals NHS Trust

Calderdale and Huddersfield Foundation NHS Trust

Locala Covid-19 response

Locala Covid-19 further information on their response

South West Yorkshire Partnership NHS Foundation Trust Covid-19 response

South West Yorkshire Partnership NHS Foundation Trust information

Public Health England - COVID-19: understanding the impact on BAME communities

Public Health England report

West Yorkshire and Harrogate Health and Care Partnership - Review into impacts of COVID-19 for Black, Asian and minority ethnic communities and staff

West Yorkshire and Harrogate Health and Care Partnership report

Flu vaccination programme

Latest information on the flu vaccination programme

Covid-19 – guidance

Latest information on face coverings, rule of 6, testing, travel, work etc

Kirklees Council Covid-19

Latest information

Covid-19 infection rates in Kirklees

Kirklees cases dashboard

6. Discussion group session

All those that had registered to attend the event were also offered the opportunity to take part in a discussion about the North Kirklees CCG recovery plan. The session took place at 12.15pm – 1.00pm. The session was delivered on MS Teams which enabled people to turn on their cameras and mics and take part fully in the discussion.

The aim of the session was to generate ideas on;

- Have you seen any areas/ services you think could be improved?
- Have you seen or experienced any changes in service delivery, through the current COVID pandemic that you think we should keep? E.g. Video conferencing instead of GP or hospital visits.
- Can you spot any waste in the NHS services you use?
- Is there a service you think needs an overhaul in modernisation and new ideas? (It might be you don't know what needs to be done but you think it definitely needs to change!)
- Is there anything that has happened during this Covid period, where NHS services have changed the way they work and you think it's worked really well?

The discussion was facilitated by Joanna Dunne (Senior Programme Management Office Manager) who was supported by Dr Nadeem Ghafoor (GP and Governing Body member).

In addition, colleagues monitored the chat box and took notes of the discussion. Notes from the discussion can be found in appendix E.

Including CCG staff there were 14 people involved in the discussion, this included representatives from Healthwatch Kirklees, Carers Count, Mid Yorkshire Hospital NHS Trust, and Sling Library

The key themes raised from the discussion were;

- **To review how organisations can be added to the social prescribing list** – currently some organisations are finding it difficult to be added to the list. And as such we are missing out on a lot of services that support both physical and mental health, which we could be referring people to.
- **Focus on prevention** – need to be more proactive in preventing ill health
- **Use patient stories to support development of services** – it was felt that having a greater understanding of a patients' journey would bring greater insight in how to develop / commission services.
- **Holistic approach** – adopt a holistic approach to health and social care.
- **Use the learning from covid-19** – during the past six months many organisations have worked differently, such as using more online services. Need to understand what worked and what didn't
- **Use the learning from other areas** – look at good practice across the country when developing services. Example given was weight management service in Sheffield.
- **Improve joint working across health, social care and third sector** – patients often have to access services from a wide range of providers, need to make it easier for patients to access these services, and for the services to be more joined up.
- **Role of Primary Care Networks** – PCNs were seen as an opportunity to look at providing specialist services in the community, and to work closely with the local authority and third sector to provide these services.
- **Impact on other services** – consideration needs to be given to how changes to one service can impact positively or negatively on other services. For example a reduction in social prescribing could lead to an increase in mental health and / or weight management issues

7. Next steps

This report will be emailed to all those that registered to attend the event and will be published on our websites.

The comments / questions raised in the main event and the feedback from the discussion group session will be used to support the development of the North Kirklees CCG recovery plan.

Appendix A - Groups / organisations signed up to attend the event

91 people signed up to attend the event, with representatives signed up from the following groups / organisations:

1. Age UK
2. Blackburn Medical Centre
3. Calderdale CCG
4. Carers Count
5. Calderdale and Huddersfield NHS Foundation Trust
6. Cleckheaton Group Practice
7. CVAC
8. Healthwatch Kirklees
9. Huddersfield Mission
10. GP Practice staff and PRG members
11. Greenwood PCN
12. Kirklees College
13. Kirklees Council including local councillors
14. Kirklees Visual Impairment Network
15. Kirkwood Hospice
16. Locala
17. MEDO
18. Mencap
19. Mid Yorkshire NHS Trust
20. My Health Huddersfield
21. NHSE/I
22. Pennine Domestic Abuse Partnership
23. PRG Member from Almondbury Surgery
24. PRG Member from Crosland Moor Surgery
25. PRG Member from Elmwood Surgery
26. PRG Member from Grange Group Practice
27. PRG Member from Meltham Group Practice
28. PRG Member from Parkview practice
29. PRG Member from Paddock surgery
30. PRG Member from Waterloo Practice
31. Ravensthorpe Community Centre

32. Richmond Fellowship
33. Rose Medical Practice
34. Royal Voluntary Service
35. Sling Library
36. Support to Recovery
37. South West Yorkshire Partnership NHS Trust
38. St Anne's Community Services
39. Touchstone
40. West Yorkshire Police
41. West Yorkshire Research and Development
42. Women Centre

Appendix B - Groups / organisations that attended the event

As previously mentioned due to how people signed in we were unable to track all of the attendees on the day, however of those that signed in the following groups / organisations were represented;

1. Calderdale CCG
2. Calderdale and Huddersfield NHS Foundation Trust
3. Carers Count
4. Greenwood PCN
5. Healthwatch Kirklees
6. Kirklees College
7. Kirklees Council
8. Kirklees Visual Impairment Network
9. Kirkwood Hospice
10. Locala
11. Mid Yorkshire NHS Trust
12. My Health Huddersfield
13. Richmond Fellowship
14. Rose Medical Practice
15. South West Yorkshire Partnership NHS Trust
16. St Anne's Community Services
17. Sling Library
18. Support to Recovery
19. Women Centre

Appendix C – Presentation - accessible version

SLIDE 1

WELCOME!

The event will start soon.

If you have a question, please use the Q&A box on the right of your screen.

We will answer as many questions as we can during the session.

SLIDE 2

Event programme

- Welcome and updates – Dr Steve Ollerton, Chair of NHS Greater Huddersfield CCG
- Flu vaccination programme – Catherine Wormstone, Head of Primary Care Strategy & Commissioning
- COVID in Kirklees – Emily Parry-Harries, Consultant in Public Health, Kirklees Council
- North Kirklees CCG recovery plan – Vicky Dutchburn, Head of Planning, Performance & Delivery

SLIDE 3

Services re-starting

- GP surgeries have remained open throughout the pandemic, although they have made changes to the way they work to reduce the risk of spreading coronavirus.
- Hospital outpatient appointments, operations and treatments. GPs and trusts working together to prioritise those with greatest clinical need.
- South West Yorkshire Partnership NHS Foundation Trust are now adopting a blended approach, mixing virtual and physical appointments, whichever is clinically needed and in whatever way suits the needs of their service users most.

- Locala is working to ensure that the majority of services will start to get back to normal from mid- September, but some will take longer due to ongoing restrictions in response to COVID guidance.
- New community phlebotomy service in Greater Huddersfield. It will be starting in October and will be seeing 180 patients per day.

SLIDE 4

COVID-19 and health inequalities

- June 2020 - Public Health England published report: *Understanding the impact of COVID-19 on BAME* groups.* [Black Asian and Minority Ethnic]
- Kirklees Council, NHS and other partners have been working collaboratively to develop/enhance response to virus and at the same time increase the scale and pace of progress of reducing health inequalities.

SLIDE 5

COVID-19 and health inequalities

Kirklees Council

- Enhanced local community engagement to support/protect most vulnerable (including BAME) during pandemic
- COVID-19 communications produced in different languages and formats
- Longer-term - developing BAME engagement plan, tackling poverty plan and an inequalities action plan.

SLIDE 6

COVID-19 and health inequalities

NHS

- Risk assessment of all staff - individual action plans developed where appropriate

- Accelerating preventive programmes eg flu jabs, obesity reduction, diabetes prevention
- In future, must monitor service use and outcomes for most deprived neighbourhoods and BAME
- Need to ensure digital services are inclusive
- Named board member responsible for tackling inequalities

SLIDE 7

COVID-19 and health inequalities

West Yorkshire & Harrogate Health and Care Partnership

Independent review into the impact of COVID-19 on health inequalities and support needed for (BAME) communities and staff. Chaired by Professor Dame Donna Kinnair, Chief Executive and General Secretary of the Royal College of Nursing. Focusing on:

- Embedding approaches to reducing health inequalities for BAME groups within our commissioning processes
- Health improvement for BAME communities with a focus on mental health
- Supporting our workforce – health and care staff and wider population

Report and recommendations due to be published this October

BAME staff network which has a key role in influencing, shaping and challenging our organisations, sharing lived experience of our BAME workforce, and helping our organisations to recognise and support talent.

SLIDE 8

Any questions?

SLIDE 9

Flu vaccination programme

Catherine Wormstone,

Head of Primary Care Strategy and Commissioning

SLIDE 10

Flu Campaign in 2020/21

- During the summer months, the NHS was asked to gear up for a major expansion of the winter flu programme this year
- In light of the risk of flu and COVID-19 co-circulating this winter, the national flu immunisation programme will be absolutely essential to protecting vulnerable people and supporting the resilience of the health and care system
- Many of the groups who are vulnerable to flu are also more vulnerable to COVID-19.
- Providers are expected to ensure they have robust plans in place for tackling health inequalities for all underserved groups to ensure equality of access

SLIDE 11

Usual eligibility for Flu Vaccination

- all children aged two to eleven
- people aged 65 years or over
- those aged from six months to less than 65 years of age, in a clinical risk group e.g.
    - ❑ respiratory disease (e.g. asthma, COPD or bronchitis), heart disease, chronic kidney disease, liver disease, neurological disease, patients with learning disability, diabetes, a weakened immune system due to disease morbidly obese (BMI of over 40)
- all pregnant women
- Carers
- Health and social care staff
- those in long stay residential/care home settings

SLIDE 12

In 2020

Usual Cohorts plus:

- household contacts of those on the NHS Shielded Patient List.
- children of school Year 7 age in secondary schools (those aged 11 on 31 August 2020).
- further extend the vaccine programme in **November and December** to include the 50-64 year old age group subject to vaccine supply.
- This extension is being phased to allow those in at risk groups to be vaccinated first.
- It is essential to increase flu vaccination levels for those who are living in the most deprived areas and from BAME communities.

SLIDE 13

Uptake Ambitions

Table 1: Vaccine uptake ambitions in 2020 to 2021

Eligible groups	Uptake ambition
Aged 65 years and over	At least 75%
In clinical at risk group	At least 75%
Pregnant women	At least 75%
Children aged 2 and 3 year old	At least 75%
All primary school age children and school year 7 in secondary school	At least 75%
Frontline health and social care workers	100% offer

SLIDE 14

What might flu clinics look like this year?

They might look and feel a bit different or be in a different location:

- careful appointment planning to minimise waiting times and maintain social distancing when attending
- providing patients with information in advance of their appointment to explain what to expect
- recalling at risk patients if they do not attend in line with contract requirements
- social distancing innovations such as drive in vaccinations and ‘car as waiting room’ models, if possible
- for those on the Shielded Patient List who are high risk for COVID-19 consider visiting at home

SLIDE 15

What might flu clinics look like this year?

- They might be delivered by a pharmacist, or other healthcare professional
- make adjustments in the face of any local restrictions to ensure those at highest risk can continue to be vaccinated
- major new public facing marketing campaign to encourage take up amongst eligible groups for the free flu vaccine, due to launch in October

SLIDES 16 and 17

Drive through tent and welfare units in North Kirklees

Images of what this would look like.

SLIDE 18

Arrangements in Kirklees

- Flu plan in place
- An oversight group working together across Kirklees to bring together all the relevant NHS organisations who have a part to play
- Practices, Primary Care Networks and GP Federations working together in the best interests of patients

SLIDE 19

Any questions?

SLIDE 20

COVID in Kirklees

Emily Parry-Harries

Consultant in Public Health, Kirklees Council

Emily gave a verbal presentation

SLIDE 21

Any questions?

SLIDE 22

North Kirklees CCG recovery plan

Vicky Dutchburn

Head of Planning, Performance & Delivery

SLIDE 23

Introduction

- North Kirklees CCG are required to submit a financial recovery plan to NHS England & Improvement; to make savings of £7 million
- Covering the periods From April 2021 – April 2023;
- The plan will be presented to the Governing Body for sign-off in December 2020;
- A group has been established to lead the co-ordination and production of the plan
- We will develop the plan over the next 4-5 months;
- We won't be implementing during the current COVID period

SLIDE 24

Finance Update

We are looking to identify savings across the following areas where we spend our CCG budget:

- NHS Secondary Care Acute Services (Hospital)
- Non NHS Secondary Care Acute Services (Independent sector)
- Community Services
- Mental Health Services
- Joint services that the CCG fund with the Local Authority
- Prescribing
- Primary care
- Continuing health Care
- Other

SLIDE 25

Process

We are meeting with a range of key Stakeholders to help identify key areas and ideas to further explore for generating the £7 million savings that are required including:

- Mid Yorkshire Trust
- Southwest Yorkshire Mental Health
- Kirklees Local Authority
- CCG staff
- Locala
- Primary Care – GP Practices /Primary Care Networks
- Budget holders
- Public & Patients

SLIDE 26

Any questions?

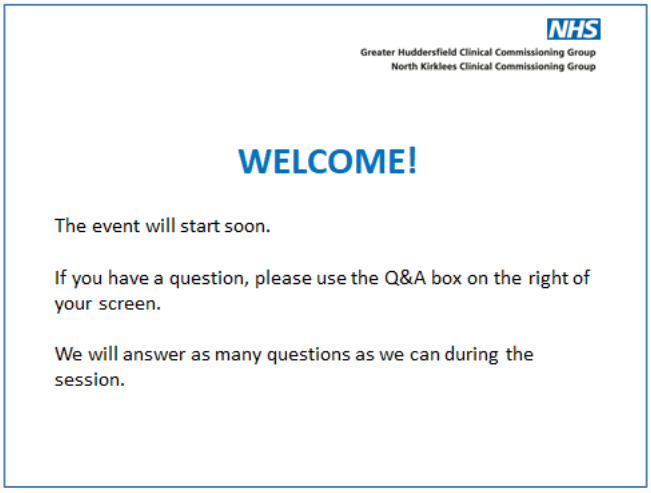
SLIDE 27

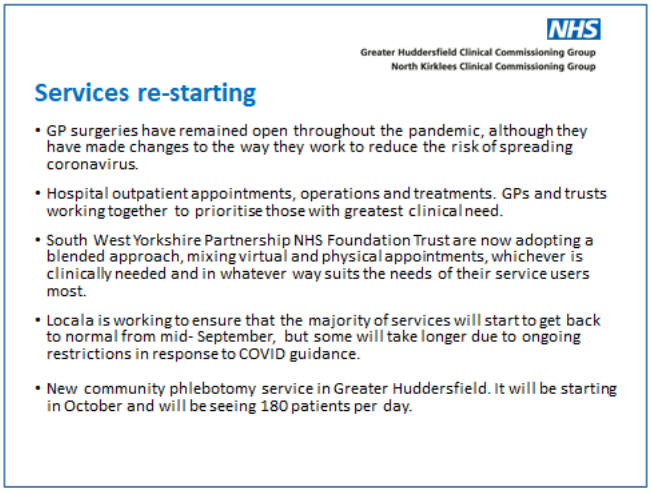
Thank you for attending today

If you want to take part in the North Kirklees CCG Recovery discussion, use the link in the email.

The discussion will start at 12.15pm

Appendix D – Presentation - PowerPoint version





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NHS
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Drive through tent and welfare units in North Kirklees

GARIC
ON-DEMAND. ON-SITE. ON-TIME.

ARMADILLO
A HISTORY OF INNOVATION

STANDARD SPECIFICATIONS

NHS
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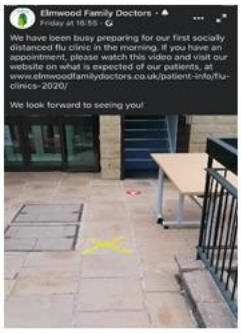
What might flu clinics look like this year?



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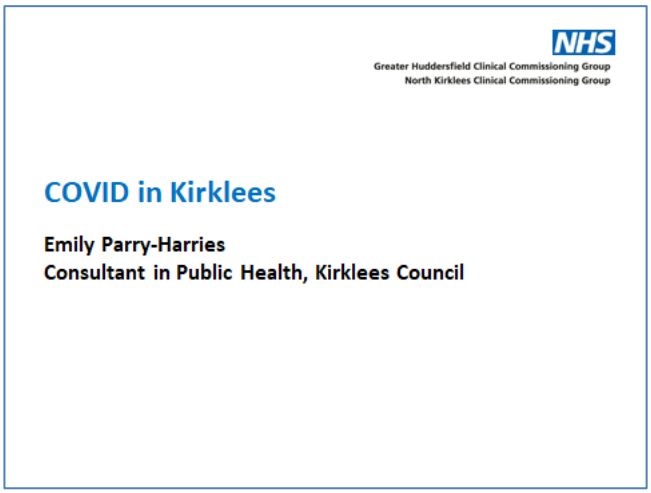
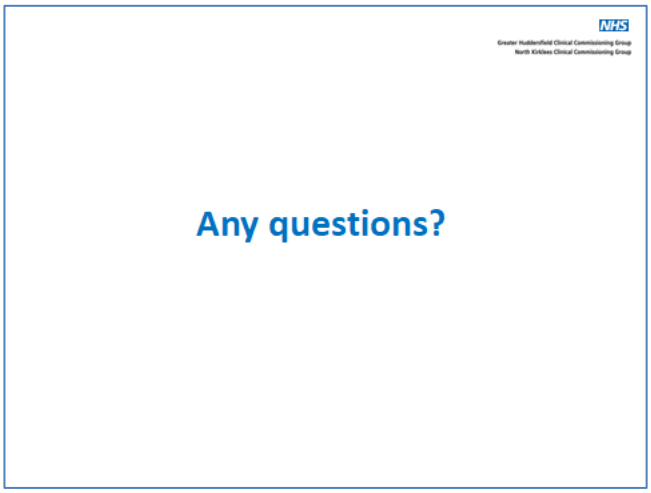


Please note this presentation was verbal and no slides were presented



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North Kirklees CCG recovery plan

Vicky Dutchburn
Head of Planning, Performance & Delivery

NHS
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Any questions?

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Appendix E – Notes from group discussion

The discussion was facilitated by Joanna Dunne (Senior Programme Management Office Manager) who was supported by Dr Nadeem Ghafoor (GP and Governing Body member). In addition, colleagues monitored the chat box and took notes of the discussion.

Including CCG staff there were 14 people involved in the discussion, this included representatives from Healthwatch Kirklees, Carers Count, Mid Yorkshire Hospital NHS Trust, and Sling Library

Joanna Dunne introduced herself and outlined the purpose of the session. And asked for any suggestions / ideas that people may have. The following comments / suggestions were made both verbally and in the chat box;

- There needs to be more use of local services such as social prescribing.
- One of the attendees talked about the challenge of trying to have their service added to the list of social prescribing services, and suggested this process needed to be made easier.
- It was felt that the barriers that are in place to be added to the social prescribing list means we are missing out on a lot of services that support both physical and mental health, which we could be referring people to.
- It was explained that each PCN has a social prescriber and the GP practices are finding it really beneficial to be able to refer patients to the social prescriber, and can see the real benefits of having a proactive preventative service.
- One attendee talked about the difficulties in accessing the weight management service and the wide range of services required to support them in their care and that there doesn't appear to be a holistic approach. For example someone may need to access IAPT, social prescribing, prescribing, surgery but these all seem to be looked at as separate referrals rather than one pathway where all the services are inter-linked.
- There was concern that because there doesn't appear to be any consideration for how services are interlinked and how if funding is reduced for one service how this could then impact on another service. For example a reduction in social prescribing could lead to an increase in mental health and / or weight management issues

- Should look at what other areas are doing, example given was the weight management pathway in Sheffield
- Suggested that when looking at services should be looking at the whole patient journey and capturing patient stories that describe the reality of using services. These can give a real insight in to how a patient accesses and experiences a service.
- Need to look at how Health and Social Care interact with each other as some patients have to access a range of services. And how those services are funded, should it be pooled budgets?
- PCNs could play a role along with Kirklees Council, CCGs, communities, third sector all working together to create solutions and successful services
- Should also look at how we deliver more care in a primary care or community setting. Attendee gave example of how they had had an ECG in their GP practice which meant they hadn't had to attend a hospital.
- Easy access for patients is key such as online / virtual appointments.
- Should use third sector more, feel that we use third sector for mental health but not physical health we could use them more
- Build on what has been learned during Covid as this has seen a change to how people access services and how they are delivered. It has also seen a change in how providers / organisations have worked together and this need to be built upon.
- With the development of PCNs feel that there is the opportunity to develop specialist skills that could be provided across each PCN, such as ECGs, bloods, x-ray, health conditions, mental health wellbeing practitioners
- People valued being able to have these conversations and would welcome the opportunity to be involved in more, and sharing their patient stories