

Notes on meeting of Patient Participation Group 20th October 2016

N.A.P.P report :-

Two documents worth reading –

Engaging local people -

- <https://www.england.nhs.uk/wp-content/uploads/2016/09/engag-local-people-stps.pdf> which, amongst other things, covers legal duties around consultation and it says :-

We expect that most areas will take a version of their STP to their organisation's public board meeting for discussion between late October and the end of the year.

We would also expect that most areas will publish their plans, for more formal engagement, during this period - building on the engagement they have already done to shape thinking.

Particular emphasis should be given to engagement with people who are less frequently heard and who experience the greatest inequalities in health outcomes.

Consultation must take place when the proposal is still at a formative stage – consultation cannot take place on a decision that has already been made.

Patient Choice – is guidance on how to make sure patients are fully aware of their choices:-

<https://www.england.nhs.uk/wp-content/uploads/2016/08/patients-choice-ccg-plan-improv-guid.pdf> very worthwhile reading

Involvement Hub - <https://www.england.nhs.uk/participation/> tells us how we can get involved.

No NHS question/answer time as Dr Opher was at another meeting – summary of understandings given :-

Attention was drawn to the statements above and in “Engaging local people” – in particular the section that says “ **Consultation must take place when the proposal is still at a formative stage.**”

Care/Treatment for patients with non-rare disorders will be provided by local Clinical Commissioning Groups. Those patients with rare disorders will be within the remit of NHS England

It is believed that payment from the STP budget will be paid in arrears

It is also believed that payment will only be made if the Trust is “in the black”

“Emphasis on Prevention” – the question would have been asked of Dr Opher – is there a contingency budget to which applications can be made provided proof of savings can be justified. The whole purpose of prevention is to stop something happening – can that really wait a full year?.

