# Initial comments on Haringey Primary Care Strategy Haringey Health Scrutiny Panel Evidence session Monday 3<sup>rd</sup> September 2007

given by

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### A brief note about PPI forums and how they work (1)

PPI Forums are independent statutory bodies set up in December 2003 with powers and dedicated support to help them monitor and review local health services and make reports and recommendations to Trusts about local health matters affecting local people, patients and carers. They can also refer matters to other local or national bodies such as the local Scrutiny Committee or the local M.P., the Minister for Health, the Healthcare Commission or the National Patient Safety Agency.

The Forums can also make visits, including to primary care facilities in the case of PCT area forums, ask Trusts for information and involve others in their work to get sufficient expertise, including from patients as well as other local organisations concerned with health and related matters such as social care.

At present, there is a PPI Forum for every NHS and Care Trust in England, including Foundation Trusts. For Trusts serving Haringey, the PPI Forums are: PPIF Haringey; PPIF North Middlesex University Hospital; PPIF Whittington Hospital; PPIF Barnet, Enfield and Haringey Mental Health.

## A brief note about PPI forums and how they work (2)

- Each forum has a work plan which it uses to try and prioritise what can sometimes seem like a considerable work load. Current priorities in local forums' work plans are: PPI Forum Haringey (PCT): mental health; care of the young and the elderly; review of Dentistry provision in Haringey; North Midd forum: quality of patient care issues including: nutrition and communications; Whittington forum: foundation trust status, patient transport; BEHMHT forum: re-development of St. Ann's.
- PPI Forum Haringey is holding a meeting in public on 11<sup>th</sup> September at the Chestnuts Centre in St. Ann's Road, opposite the hospital, at which the Primary Care Strategy will be discussed.

If you would like more information about the meeting or the Forum's consultation on the Primary Care Strategy, contact Kelly at Community Investors, our forum support organisation on 0800 019 1281 or come along to the meeting.

## Haringey Primary Care Strategy consultation process

The consultation process still has some time to run and our Forum's meeting in public to discuss the strategy has yet to happen, so we can only speak from experience to date. The new PPI team at the PCT have made efforts to involve the Forums in the consultation on the strategy and have shared their timetable for consultation with us. Several members of local PPI Forums and others attended an event at the Cypriot Centre where the Strategy was outlined and views were sought and presentations given on Public Health and the London Network for nurses and midwives 'Strategies for improving patient experience'.

The new PPI lead, Christina Gradowski, has also attended our Forum meeting to discuss the consultation process and Forums have been invited to participate in other events and suggest groups which should be contacted and our forum support organisation is helping with this.

It will be helpful, as part of the ongoing consultation process and at the end, for the PCT to identify how the comments received have been taken into account or influenced its decisions and how this strategy links both to what has gone before, especially work done on health inequalities and public health, and to what else is to come, including Professor Sir Ara Darzi's London-wide NHS review, particularly in relation to maternity services.

### Initial general observations 1

- Not everyone understands what 'primary care' means and some people might be further put off by it being referred to as 'world class'
- It might be important for people to understand how these proposals link with the Barnet, Enfield and Haringey Clinical Strategy which is also out for consultation e.g. the extent to which services currently provided in hospital are likely to shift to 'super health centres' and the possible effects
- Will the new arrangements, including training of health professionals, be adequate in quality and quantity if far more people are required to get care outside hospital than at present?
- Will the local authority be faced with extra demand, and if so will it be able to cope?
- What kinds of professionals will be diagnosing patients seeking urgent care?

### Initial general observations 2

- People are likely to want to know which GP practices and other facilities are likely to relocate to these super health centres, and which will remain in place? And at least roughly how long this will take to happen? This will be relevant information for people to have, especially for transport and ease of access. At first sight, there seems to be a bit of gap around Turnpike Lane area and 'the Ladder'. Perhaps a map showing this could be prepared for presentations?
- Would the pattern of services be similar in all such centres? Will these be the only place for some services? Might they offer opportunities for services to be sited together (e.g. occupational therapy and community mental health as well as physiotherapy)? Would they widen access for those whose own GP may not have sufficient capacity/interest to address certain types of needs e.g. around mental health?
- What are the plans for how the new services to be rolled out? What will happen while the new facilities are being prepared? It isn't very clear if this is a ten-year plan. People need to know to make informed choices.

## Questions from consultation and other meetings attended

- What would be the impact on people of all ages with mental health needs, including long-term mental health care needs? Mental health care is increasingly provided in primary care settings, and many people with mental health problems also have physical health problems.
- Will St Ann's site be used to meet the health care needs of the community?
- In what ways would 'super health centres' improve access and reduce health inequalities, for instance in relation to lower life expectancy among men on the east side of Haringey? Or contribute to meeting the needs of a diverse population, including young people, in relation to sexual health for example? How would they support the needs of the elderly from a wide spectrum of communities, especially in relation to continuing care and other long-term health needs, including unmet needs?