



## Minutes of the meeting held on 18<sup>th</sup> October 2011 Kettering

### Present:

Alex Winterbone  
Krys Jarvis  
Sarah Sherwood  
Alan Moore  
Claire Watt  
Elaine Coope  
Julie Croysdale  
Samantha Sterling  
Cathy Ryan  
Julia Cunningham  
Caroline Desjardins  
Janine Eagle  
Angela Cannon

Suffolk  
Shropshire  
Bedfordshire  
Manchester  
Horsham  
Airedale  
Leicester  
Leeds  
West Pennine  
Whizz Kidz  
Leicester  
Manchester  
Stoke on Trent

### In Attendance

Lesley Cave

EoE SHA

### Apologies

Kath Griffiths  
Alison Ravenscroft  
Jan Smith  
Tania Tulloch  
Henry Lumley  
Peter Gage  
Nila Panchal  
Brian Smith  
Jacqui Twomey  
Sue Cobby  
Barbara Hatton  
Carol Bartley  
Yvonne Baron  
Jane Thurlow  
Rory Davies  
Hazel Derbyshire  
Sarah Howarth  
Francis Beavis

Crewe  
Wales  
Newcastle  
North Yorkshire  
Bristol  
Essex  
Doncaster  
Northern  
N & NE Lincs  
East Sussex  
Wigan  
Salford  
Chorley, South Ribble & West Lancs  
York  
Preston  
Preston  
Nottingham  
Gloucester

### Introductions

## **Minutes of the meeting on 12<sup>th</sup> July were agreed**

### **Matters Arising**

#### **Web Site:**

Website been very busy. Done 44 updates of services but still loads of services have not updated. The majority of visits are to the directory 14383 hits. Also lots of e mails usually from people asking for a wheelchair which Sarah has struggled to keep up with so the website has been altered in the last couple of weeks to nicely direct people to Pals etc. Ian has had several requests for a map showing the location of services, possible solution is to use a free google map, however the directory is out of date. Development work has been done for this year so there would be an additional cost or let it wait for next years development work. Alan suggested we have a FAQ page which seemed like a good idea if someone is prepared to do it. Sarah will circulate some questions that have been asked for sample answers and if anyone else sends in questions they think may be asked.

**Please can all Forum members have a look at the details for the services local to them and contact the ones where you know the details are wrong and push them to update.**

Ian's notes which Sarah presented are attached separately.

### **Competencies**

Claire has been sent some more competency information, but hasn't had time to take forward. She is planning to progress by teleconference as time is too short for more meetings, and aiming to get something down on paper in November. Links to AQP will fit into the qualification bit and they will signpost to work already done. KSF Framework has changed the specific dimensions have changed and been reduced to 7. Claire will contact the others who agreed to be involved and set up a call.

### **Any Qualified Provider – Lesley Cave**

DoH Project but will come out as from the NHS. The project team have looked at the many papers that have been produced in recent years and the results of this project are directed at Commissioners but the impact is on providers.

The aim is to give patients choice and to improve services. It is recognised that there are some services that operate with good practice but others have been the subject of poor commissioning.

AQP when published will be a commissioning tool and commissioners may or may not choose to use, or they may choose to use it in a very specific way.

Single point of contact for patients – outside of AQP but can push it back into commissioning intentions as good practice.

AQP is – if I'm a patient and I need a wheelchair I can choose what service I go to. Currently based on GP, in the future DoH will hold a list of qualified providers Wheelchair services will need to get themselves on this list

A generic list of things which any provider wishing to become qualified will have to have achieved has been developed by DoH relating to financial stability. governance etc this can be added to on a service specific basis by commissioners - we need to influence this with our competencies.

Payment by results / tariffs – you will only get the money if the patient chooses to walk through your door.

Just because AQP comes in in April it doesn't mean that all wcs will change because there will be all sorts of contracts and notice periods in place.

**Specifications 1 & 2.** Spec 1 = access, assessment, prescription. Spec 2 = provision, maintenance etc. standards which are required are in both specs – the team have used our standards as a base. The commissioner can choose whether to split the pathway or not. It could be that the patient accesses one provider for a prescription and another for supply just like spectacles.

Working to find out what activities go into each piece then these will need to be costed up to form the tariff. Not currently including overheads, training etc that has still to be added in.

Activities = currencies.

Discussion of funding, will there be enough resources, there is a financial risk that unmet need may appear

The more AQP providers a commissioner has the more they have to performance manage so that may be a disincentive to commissioners to go down that route.

Commissioners will have to start making the difficult decisions which they have currently been avoiding.

The project team are developing a user pack to help them understand what the possibilities are. It's not like a leaflet that we would give out, it's much more this may happen it may not.

What happens to the Patient information - who holds that? Patients could fall through the gap or be playing services off against each other. It has to come down to the specification and how the rules are written. There is risk around this but government policy dictates.

Not unlike the independent voucher.

There is nothing in the rules to prevent co-operation and collaboration and partnerships.

Commissioners have to adopt 3 AQP services and they have to announce which 3 of the 10 possibilities they are planning to adopt on 31<sup>st</sup> October.

Where does the clinical accountability lie – with the prescriber or the provider? There are people that can be excluded from AQP.

The most complex cases are excluded from AQP and will be commissioned by the specialist commissioning board. The definitions are still being nailed down. The forum would like to have an input into the definitions. Lesley will circulate the document for comment.

There was considerable discussion about consultation, moving goalposts etc finishing up with a what can the team do to consult with us and feed in our views. Forum members displayed considerable resentment that this work has been based in the East and has not been a national initiative. Strong feelings were expressed that services in the North should be visited as part of the work Alan offered Manchester, Krys offered Shropshire and Newcastle was suggested because Brain already has hub & spoke type services. Some visits were arranged in the lunch break

Lesley will clarify what documents are requiring comments and get them to Krys for circulation. All documents are in draft and may change by time they are published by DoH, we are needed to say that the project team are on the right lines.

The method of becoming a qualified provider is still to be published.

Any queries e mail Lesley: [Lesley.cave@eocph.nhs.uk](mailto:Lesley.cave@eocph.nhs.uk)

The Forum spent the afternoon working through Lesley's currency document line by line and had discussion and gave feedback.

Alex Kamadu project lead at DoH.

PMG Document on AQP – Krys did response from NWMF to be included in this document because of the tight timetable. She has also contacted Sam Gallop because of the lack of user consultation, Krys to send Sam some thoughts to be included in the Parliamentary Limbloss Groups response to the government. Concerns mainly centred on the model which splits providers between prescription and provision this will be confusing for Patients, where do they go back to if they have a problem. If contracts are awarded on a 3 year basis how will patients know when things change, transition issues.

**Terms Of Reference** - No time to discuss to be e mailed out with the minutes and any comments to Alex.

**MND Association Wheelchair Guidelines** - no time to discuss already held over from last meeting so handed out and to be shelved from the Agenda as it is now so out of date.

**ResMag update** – Brian not able to attend

**Any Other Business**

Krys's service will be on the television sometime in October / November on Channel 5 in a series about Bariatric Wheelchairs.

Stakeholder group meeting at Coventry university regarding a research project about stability – WheelSAS – next meeting in March 2012, when developments will be presented.

Simon Fielden would like to come to a meeting to discuss Rehabilitation Engineers; agreed to invite him to the next meeting.

Direct Gov. website is giving out wrong information so Krys has e mailed them and they have responded. Claire is going to take over the correspondence.

Yorkshire Region just agreed some assessment and prescription guidelines which they are happy to share.

Elaine has some capacity work which she is willing to share.

April meeting hopefully attached to PMG AW to speak to Peter.

The meeting after that will be July 3<sup>rd</sup> 2012 in Leeds.

**Date of next meeting**

24<sup>th</sup> January 2012 - Doncaster