

Lambeth Together Local Care Partnership Board Public Forum

Brixton Library
Thursday 7 November 2024

Responses to questions from members of the public*

*Abbreviations and acronyms used in the meeting are explained using square brackets [...]

Question 1: Sarah Flanagan, Patient and Public Voice (PPV) Board Member

“Will the recent government budget affect the way our care is delivered?”

Response

Andrew Eyres, Corporate Director of Integrated Health and Care, Lambeth, NHS South East London and Lambeth Council

In headline terms the budget was positive for the NHS and for local government as well, the news of additional funding into public services is a very good thing for us. What we don't yet know is how much will be allocated to different areas and/or programmes. It won't be enough without transformation to secure the future. The additional money won't be enough on its own, it's not about doing more of the same thing for longer. Where there are fantastic responses in services, we want to retain this and go further. So more to do, but the money will help.

Dr Penelope Jarrett, GP and Chair of Lambeth Local Medical Committee

We are pleased with extra NHS funding, although anxious about the rise in minimum wage and NI contributions, although we understand the need for that. But hospitals will be reimbursed for that increase and care homes, hospices and GPs have no reimbursement so far which is potentially a problem for us.

Question 2: Jenni Rodgers, Chair Streatham Common Practice Patients Group

(received in advance via email)

“Following a question at our patients group, I undertook a survey of patients having difficulty booking blood tests using the Swift Queue App. A lot of patients - for whatever reasons - do not have access to online and digital devices and ask their GP's receptionists to make these appointments for them. Unfortunately, this doesn't appear to work on the new Swift Queue system, so these patients arrive at the clinic and there's no record of their appointment. Phlebotomists tell me that although they benefit from a more orderly flow of patients, it possibly needs someone specifically to deal with a 'walk-in' facility as well.”

Response - Alice Jarvis, Director of Operations and Partnerships, Guys and St Thomas NHS Foundation Trust (GSTT)

I met before the Public Forum with representatives from patient groups, we worked through a number of concerns raised with the Synnovis team, including this email query. Synnovis have made some improvements and taken away further actions on communications, mystery shopping, addressing particular issues at Gracefield Gardens and issues still outstanding around sharing data.

Response: Alice Jarvis, Director of Operations and Partnerships, Guys and St Thomas NHS Foundation Trust (continued)

They are committed to ongoing follow up conversations outside of the board and will pick up any new issues as they arise. GSTT have talked to Synnovis about the issues that have been raised about accessing blood tests and equity of access for patients who aren't digitally enabled or have other challenges to book through the swift queue service. Synnovis are remaining flexible around the number of clinics appointments for pre-booking and for walk in. Staff have additional support to be able to offer patients the same day if they aren't able to book in to the system. Likely to continue to hear feedback about where it is not meeting their needs, but have made good progress.



Question 2 (continued)

Nicola Kingston, Chair of Brixton and Clapham Park PCN Patient Group

“We have had a useful meeting today, including Synnovis which was beneficial. Our group are offering to help Synnovis resolve these issues and we feel the communication needs to be a lot better. Cllr Dyer was right to point out that accountability and equality should be at the heart of services. Could we have an ongoing discussion and report back, on how to keep on top of patient concerns? As we first raised this a year ago, and would be good if this is the start of doing things differently.”

Fraser Syme, Lambeth Keep Our NHS Public

“Who is taking ownership of this problem? We need a target date for things to be resolved”

(Response on next slide)

Response: Alice Jarvis, Director of Operations and Partnerships, GSTT

Synnovis are accountable and therefore GSTT and Kings (KCH) hold them to account on the contract. The issue raised about accessibility and ability for booked slots vs pre-booking has already been addressed. We have had assurance today from Synnovis that they are constantly reviewing the utilisation of those slots, to work out if they need to create more on the day appts. The mystery shopping and change layout conversations will happen in the next few weeks, and I can give an update to next board on this. The comms part may take longer as we're keen to hear from patient groups to inform that work, in partnership with comms teams at KCH, GSTT and Synnovis, to ensure GPs and primary care are clear on how to support patients to access blood tests.

Response: Cllr Dyer, Co Chair, Lambeth Together

We want as much participation as possible in the transformation journey to build trust and confidence. It will be useful to publicise an action plan with rag rating or traffic light system for all of the areas so there is ongoing feedback to communities in an accountable and transparent way.



Question 3: Graham Syme, Chair of Streatham Hill Group Practice Patients Group

“The NHS is trying to push a lot of responsibility to people to use apps, but the support and training on how to use them is minimal. Can Lambeth Together specify a person who can be a point for any problems that people are having with all the apps we are expected to use? A step by step walk through is needed, a poster doesn’t work.”

Response: Di Aitken, Co-Chair, Lambeth Together

I wanted to highlight the work of [Clear Community Web](#) who deliver workshops throughout the borough that include the NHS app. Three were held in my practice but there should be some board level coordination of this.

Response: Andrew Eyres, Corporate Director of Integrated Health and Care, Lambeth, NHS there, London and Lambeth Council

The Clear Community Web service is there and they can provide support. We need to make it more well known so that practices and patients are more aware of the offer.





Question 3 (continued)

Response - Dr Raj Mitra, GP and Co Chair of Lambeth Clinical and Care Professional Lead Network Forum

There remains a digital divide between different groups of people. I am happy to be nominated as board lead. CCW are doing this training for patients, anyone can volunteer for the charity and this would be appreciated.

Reverend Gail Thompson, CEO Millenium Community Solutions

It's ok to get people onto training but some people need more support. Millenium Community Solutions are the only organisation who teach people with disabilities and older people to access this tech. Special equipment is often needed. We'd like to offer help in this area.





Question 3 (continued)

Response: Cllr Dyer, Co Chair, Lambeth Together

We would love to accept this offer, it's critical to reach and support our diverse communities.

We will involve Millenium Community Solutions in this accessibility issue.

Further update from the Programme Team, Lambeth Together:

- Reverend Thompson and Dr Raj Mitra put in touch on Friday 8.11.24
- Digital help for patients and carers - Lambeth Together is a resource to help patients navigate digital health technology, includes signposting to CCW and Millenium Community Solutions and helpful learning aids and information for patients and also for practises.
- Colleagues are liaising with the team leading on digital inclusion to ensure information on the support available is widely publicised





Question 4: Claire Douglas, Black Men's Consortium

“The group was started in 2018 with a small grant to work with black men at risk of suicide, funded by Lambeth’s suicide prevention strategy. We meet weekly at Mosaic Clubhouse. However, rents are going up – can we have funding to be sustainable?”

Graham Syme, Streatham Hill GP Practice Patients Group

“Someone was trying to arrange an event at Gracefield Gardens and were told they would have to pay to use the space – are there NHS buildings that can be used without charge?”

Response – Cllr Dyer, Co Chair, Lambeth Together

We need to integrate this into the wider portfolio of mental health work that we do and find ways to make it sustainable.





Question 4: Claire Douglas, Black Men's Consortium

There are opportunities to apply for funding such as the Council's Community Connectors Fund and Changing Lives Fund and the Living Well Network Alliance are due to launch a fund tackling health inequalities, which will be publicised shortly.

We should collectively use our resources to support local groups and events.

Further update from Programme Team, Lambeth Together

Through the South East London Anchor Alliance programme we are working with our Anchor Institutions to identify free or low-cost spaces that can be used for community groups and events.



Question 5: Reverend Gail Thompson, CEO Millenium Community Solutions

“There have been issues with access to this meeting room today, with not enough room to move a wheelchair or to wait as it’s so busy. Can you think carefully about accessibility for public meetings?”

Response: Dr Raj Mitra, GP and Co Chair of Lambeth Clinical and Care Professional Lead Network Forum

Apologies on behalf of the Board, this is our first time using the venue, which is listed as accessible with a hearing loop. We can look at a better use of space and table layout in the room, making more space for our attendees. The library team confirmed that the hearing loop is on and working, and we are speaking to them about these issues.

Question 6: Sal Aziz, PatientsCannUK

It is medical cannabis awareness this week, it has been legal for six years but most people don't know they can get legal prescriptions. What can the Board do to reduce discrimination faced by medical cannabis users and raise awareness of its legality?

Response: Dr Di Aitken, Lambeth Together Co-Chair

As the chronic pain lead, this is relevant to my area. It should be possible to have prescriptions but the system is not yet in place. I can raise this with the team who supervise the SEL Formulary, which is the list of drugs that are able to be prescribed by clinicians.

Further update from Dr Di Aitken

Medical cannabis use within the NHS

- Very few people in England are likely to get an NHS prescription for medical cannabis. Currently, it is only likely to be prescribed for the following conditions:
- children and adults with rare, severe forms of epilepsy
- adults with vomiting or nausea caused by chemotherapy
- people with muscle stiffness and spasms caused by multiple sclerosis (MS)
- It would only be considered when other treatments were not suitable or had not helped
- Further information [how medical cannabis is used within the NHS](#)

National guidelines on NHS prescribing of medical cannabis

The prescription of cannabis within the NHS is regulated by national guidelines. These guidelines include recommendations on:

- intractable nausea and vomiting
- chronic pain
- spasticity
- severe treatment-resistant epilepsy
- prescribing
- products covered by the guideline include:
- cannabis-based products for medicinal use as set out by the UK Government in the 2018 Regulations



National guidelines on NHS prescribing of medical cannabis (continued)

- the licensed products delta-9-tetrahydrocannabinol combined with cannabidiol (Sativex) and nabilone
- plant-derived cannabinoids such as pure cannabidiol (CBD)
- synthetic compounds which are identical in structure to naturally occurring cannabinoids such as delta-9-tetrahydrocannabinol (THC), for example, dronabinol.
- the national guidelines on prescribing specific cannabis products on the NHS is are published on the [National Institute of Health and Care Excellence website](#)



Approval for use alongside clobazam is in accordance with NICE Technology Appraisal guidance (see links below)







- [NICE TA614: Cannabidiol with clobazam for treating seizures associated with Dravet syndrome](#)
- [NICE TA615: Cannabidiol with clobazam for treating seizures associated with Lennox–Gastaut syndrome](#)
- [NICE TA873: Cannabidiol for treating seizures caused by tuberous sclerosis complex](#)
- [South East London Joint Medicines Formulary](#)

Medicines traffic light system

- The NHS uses a traffic light system to show which medicines may be prescribed and by whom on the NHS.
- Medical cannabis is rated RED in south east London. This means, apart from in exceptional circumstances, it can only be prescribed by a hospital or specialist. It is prescribed at Guy's and St Thomas' and King's College Hospital NHS Foundation Trusts, but not by Lewisham and Greenwich NHS Trust.



Traffic Light Status Information

Status	Description
 RED	Specialist or hospital prescribing only. The responsibility for prescribing, monitoring, dose adjustment and review should remain with the specialist or hospital. In very exceptional circumstances a specialist may discuss individual patient need for a RED drug to be prescribed by a GP and the GP should consider informing the Medicines Management team before a decision is made to prescribe for individual patients.
 AMB 1	Recommendation by a specialist but is considered non urgent and therefore could be started in primary care at the discretion of the GP after the GP's consideration.
 AMB 2	Initiation by a specialist, then continuation in primary care under an individual management plan. In some cases, stabilisation for a specified time may be required and this will be detailed on the formulary or in the IMOC formulary recommendation.
 AMB 3	Initiation by a specialist with ongoing monitoring required. After dose stabilisation GPs can be requested to take over prescribing responsibilities using the approved IMOC shared care documentation requiring shared/transfer of care document.
 GREEN	Specialist and non-specialist initiation
 GREY	Not recommended for prescribing