

EAST GRINSTEAD TOWN COUNCIL

PUBLIC SERVICES COMMITTEE – 1st JUNE 2023 at 7.00pm

Committee Members: Cllr Whittaker(Chairman)
Cllr Reeves (Vice Chairman)
Cllr Visser (Town Mayor)
Cllr Ody (Deputy Town Mayor)
Cllrs: Barnett, Dabell, Gibson*, Hughes & Scott r

Others present: Cllrs Farren and Gibbs, Town Clerk, Deputy Town Clerk, Community and Tourism Manager, Mims Davies MP for Mid Sussex, Insp Dave Derrick (Via Zoom) and 2 members of the public in the room and 13 on the zoom link Also Cllr Sharon Broad Ashurst Wood Village Council for item 4

Mr Vincent Sai and Dr Sharon Pruden and Dr Cook Modality

*= Absent

** = attended via Zoom

20 **PUBLIC QUESTION TIME**

The Chairman introduced all who were in attendance to the Committee, welcomed all and explained the remit of the Committee.

Questions were then invited:

In response to the large scale development in Imberhorne, will Modality be able to cope with the increased demand? The Chairman replied this was a planning question on the whole, however would be passed to Modality.

Difficulty in accessing the modality services to order repeat prescriptions. However having spoken to a staff member this is now sorted.

Part of Ship Street surgery has been rebuilt in order to allow for more GP's. the chemist for example has been removed. However they have not been able to staff the DRs so why did they take this away.

How many Drs are available a the Judges Close surgery? How many patients per day do the Drs see?

How can the surgery staff turn away elderly frail persons from the surgery?

The Drs should not be involved with marketing of pharmaceuticals.

21 **APOLOGIES FOR ABSENCE /SUBSTITUTIONS**

RESOLVED: Apologies were accepted from:

Cllr Gibson	Unwell
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RESOLVED: Cllr Gibbs was Substituting for Cllr Gibson

22 TO APPROVE THE MINUTES DATED 2nd March and 15th May 2023

RESOLVED: The sets of the minutes were approved by the committee as an accurate and true record and signed by the Chairman.

23 CHAIRMANS UPDATE

The Chairman advised of the following:

Bus Services: we are really pleased to hear that metro bus have increased their services through East Grinstead - Mondays to Saturdays from 3rd June. The biggest improvement will be that the 291 will be running hourly in each direction through the evening from Crawley, Three Bridges through East Grinstead and on to Forest Row and return.

There will also be later journeys to and from Tunbridge Wells and Crawley. The last bus from Crawley being at 23:22 and from Three Bridges at 23:27. There will be a much later journey from East Grinstead at 00:19 to Felbridge, Crawley Down, Cophorne, Three Bridges and Crawley. The new timetable can be found on the metrobus website

There are also later journeys on the 270 from Brighton, Burgess Hill, Haywards Heath and Forest Row too. This is something that this committee have pushed for on consultation responses for a few years and it is great to see the bus companies are able to respond.

QVH: The team at QVH are busy with recruitment and new faces: Three new Non Executive Directors were appointed recently, these paid posts work with the officers in portfolio, they report to the Board and Governors.

Three executive recruitments are in progress. Interviews in the next fortnight. For a **Chief People Officer Chief Finance Officer** and new **Chief Executive Officer**. The Interim CEO Tony Chambers may well leave before the successful candidate takes up post as he is currently being sought for other posts. Once the new CEO is in place we look to have him/her attend a Public Services Meeting in due course.

Removal of parks/ open spaces contract - MSDC

The Clerk is still awaiting an official letter of notice from Mid Sussex (four requests have been made, two to the Business Unit Manager), however we are aware that a letter was sent on 4th May to all three Town Councils to advise that the graffiti and landscaping contract (EGTC look after a couple of MSDC owned sites such as at the end of Vicarage Road Car Park) and remove all offensive graffiti from the MSDC owned land in the town and surrounding villages.

The contract is worth £7,500 per year. This contract was originally advised as giving 6 months notice to end on 30/9/23. This has now been reviewed in order to allow this to be budgeted for, however the contract will now cease 31/3/24 instead. The Three Towns group wrote to ask that we please see the specification as we may wish to jointly bid for the work. However when provided it was clearly far bigger a contract than we would be able to take on, having been amalgamated in to all the greenspace work that MSDC currently contract out. While this is a matter for Amenities & Tourism Committee regarding the contract and the loss of revenue, this is a matter for this committee as it is a service that we will need to watch next April regarding attendance times to rid the town of unsightly graffiti on MSDC owned land.

Old Police Station: we are advised that this will be going to the open market, we have been approached by the agents to ask if we wish to revise the Councils original offer to buy, this will be going to Finance & General Purposed for consideration in two weeks time and then on the Council, and this is just for information to the Committee.

The Fire Station now works 7am-7pm; 5 days a week with full time officers and Saturday and Sundays with part time officers.

The Council also liaise with Tandridge and Surrey County Council regarding infrastructure in the town and there are now regular of meetings planned.

Pharmacies: All Lloyds pharmacies are up for sale nationally, the East Grinstead and surrounding ones have all got new private owners except the one in Sainsburys which will close in June.

24 DECLARATIONS OF INTEREST

Cllr Dabell declared that as a member of West Sussex CC, he declared any matters on the agenda as an elected member of that Council.

Cllrs Whittaker and Dabell also declared that they were elected to Mid Sussex DC for any matters that arise.

25 POLICE MATTERS

The Chairman introduced Insp Dave Derrick and welcomed him to Mid Sussex. He was pleased to advise that the police patrols were increased. He explained briefly the DISC businesses reporting system and confirmed that the Chequer Mead Police Hub was open 2 days per week.

Cllr Reeves made a brief vote of thanks for Insp Derrick attending the meeting.

26 MODALITY PARTNERSHIP HEALTH SERVICE

Mr Sai and Dr Pruden were welcomed to the meeting. The Chairman advised there have been a lot of concerns about accessing services at the Modality run practices and he was grateful that Modality had recognised the need to improve their services. He thanked them for coming to outline these to the Committee.

Mr Sai gave a presentation which is included in the minutes as an appendix. He started by thanking the residents who have attended and addressed the committee. He explained that the pressure on the Drs surgeries was significant and the surgeries were at breaking point when they took over. The staff were keen, they wanted to improve the services and Modality was the option to do this. The partnership is funded £160 per patient per year. This is very different to the private sector charging policy. The service is run by the GP partners, this has not changed. Modality provide the back end admin by offering efficiencies. They were aware of the petition that had been started on social media and want to address all of the comments and concerns. There are simply not enough appointments, however they have some ideas to help to ease this pressure. The changing need of patients, affects the time needed to give to each appointment. Many appointments have complex levels to them which can also take a toll on the Drs and staff at the practices. The surgeries are two GPs short so have been using some other GPs from other areas to help support the East Grinstead surgeries, using locums and some international support. The team are taking small steps to hopefully get the momentum and improve the services. He gave a plea that the social media trolling please stop as the staff who work at the surgeries are doing their best and they live here too. Patients please while they make the changes needed. There will be ongoing focus groups with patients to get feedback and to continue to build the relationship with the community. They are also looking to keep their pharmacy open, and are aware that others are closing.

Questions followed from the committee and invited guests:

Are you still delivering the 14 day referral for the most important concerns (eg Cancer)?, Yes, these are in place and are prioritised.

There has been so much change over the past few years, Drs appointments etc, the ICB have in their plan to improve access to GP surgeries, given the NHS targets within the ICB, how confident is Modality that they can reach these targets and ensure that appointments can be accessed, including appointments within 14 days?

While they cannot guarantee they will meet every target, they will try. The concerns are still around the demand from the public which is difficult to

Many of the problems are more national (NHS), the concern in East Grinstead is that modality are falling behind the non-modality practices in the town. Modality have not been proactive in the recruitment, they want to deal with that. They are looking to amend the telephone system to help to deal with the call backs and handling. Many other small practices are not investing but Modality are and they have a future proofing plans to get improvements. GP's are in short supply, Modality have increased the support roles (paramedics pharmacists etc), the public also need to understand that these roles are valid and you don't necessary need to see a GP.

Communication remains a very real issue, and the small number of people who are blocking the appointments needs to be educated and tackled. A plan as to how Modality are going to change their formats to make sure that there is access to the surgery and that the community needs to work together as to how this is goes forward is key.

The Vice Chair thanked Mr Sai and Dr Pruden for attending.

27 COMMUNITY SERVICES UPDATE

The Chair asked Alice to introduce her report. She highlighted some of the events that have taken place.

The youth club was highlighted, this has funding and around 25 young people attend each week. This is run by Sussex Clubs.

It was asked whether the SID can be one that records ANPR in order to have tickets issued for significant speeds. The Chairman replied this can be looked in to as to the effect on cost and what can be done, perhaps in conjunction with the LAT who also run Speedwatch.

RESOLVED: to recommend to the Finance and General Purposes Committee that a second SID be purchased.

28 ACTIVE TRAVEL WEEK

The Chair invited Cllr Ody to introduce the report. Cllr Ody explained that he was keen to promote the Bike Week as an annual event and make this part of the calendar especially combining with businesses and the LCWIP development.

RESOLVED: To Recommend to Finance and General Purposes Committee for budget allocation to be set aside for 2024/25 to incorporate active travel week, (bike week) in to the calendar and to develop a number of initiatives around this.

The Hire Bikes were discussed, it was clarified that there are additional costs if extra infrastructure is needed for example bike racks, but the maintenance of the bikes is included and of course the costs are offset with the hire charges.

RESOLVED: To recommend to Finance and General Purposes that further exploration in to the hire bikes be undertaken and then that a trial be instigated.

29 DEMENTIA FRIENDLY COMMUNITY

The Chairman introduced the report and asked that rather than a councillor volunteering tonight, it would be held over to the Council meeting on 3rd July,

30 UPDATE ON ROAD WORKS & WSCC SCHEDULE

The chairman introduced the item, he stated that the position has been difficult and we do need more information.

It was also commented that WSCC have replaced Mr Speller, but he is still in training. WSCC are getting there, but it is a big job. More funding is needed and gains are being made in East Grinstead.

It was asked as to when the jet patch machine may be seen in East Grinstead as it would be good to see this in action.

There was further discussion as to the three towns meeting with highways as to be able to address some of the local road works issues.

RESOLVED: In principal to support the devolution of some road works to the three towns such as pot hole filling if the business case is proven and Finance and General Purposes are able to allocate appropriate budgets.

The next regular meeting of the committee would be on **7th September**, He ended the meeting at 8.47 pm.

SIGNED:

CHAIRMAN

Modality Mid Sussex

Go Forward & Priorities

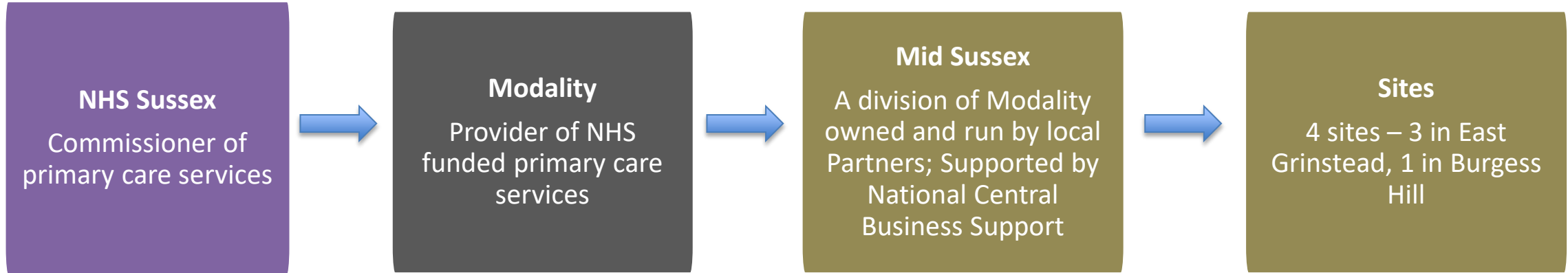
1 June 2023



- NHS GP Partnership serving over 450K patients across 50 sites / 9 regions
- Owned and led by like-minded partners seeking to futureproof and preserve the best of Primary Care
- NHS ethos / long track record of innovation and successful collaboration across the system



Contracting Model



Current funding equates to circa £160 per patient per year irrespective of how many consultations compared with private GPs charging £79 for an initial 15-minute consultation rising to £200 per hour*

* Per recent online advertisement shared in social media by Crawley Down Health Action Facebook Group

Local Partners:
Dr Ellie Flatman
Dr Stephanie Cook
Dr Sharon Pruden
Dr Layo Osoba
Dr Neelum Saleemi
Dr Dan Jefferies
Dr Riz Miarkowski
Dr Duncan Wells
Rachel Luker

Crawley Down (Main)
Ship Street (Branch)
Judges Close (Branch)
Park View (Branch)

Practice Management
Leads: Jeannette Corps
and Elizabeth Dyson

National Board

Set and manage delivery of business strategy and direction

Comprised of Group Clinical Chair, Group CEO & Divisional Executive Partners

Registered Managers for the Group with CQC

Service & Divisional Board

Set and deliver local P&L and business plan

Composition varies by need of each division but at a minimum, it will have an Executive Partner and Medical Director

National Central Business Support

Deliver functions for the business that can be managed centrally and at scale for optimal performance and cost efficiency and effectiveness

Back Office functions such as Finance, Human Resource, Governance, Infrastructure (IT, Telephony, Estates), Communications, Training and Development, and Group Business Development and Administration

PRIMARY CARE

NON-PRIMARY CARE RELATED SERVICES

ESTATES RELATED

DORMANT

Modality Partnership
(NHS Primary Care Provision)

Modality LLP
(Outpatients Provision)




Modality Medical Services Limited
Modality Services Limited
(Research, Minor surgery, Management Advisory, Pharmacy)

Modality Property Investments Limited

Modality (BV) Property Limited
Modality (SMC) Property Limited

Modality Partnership Limited
Modality Medical Spa Limited
Modality Shared Services Limited
Modality Accountable Care Organisation Limited*

Modality ACO LLP*

-  General Partnership
-  Limited Liability Partnership
-  Limited Company

* In process of moving to dormant status

Challenges

- First port of call - 85% of NHS contacts
- Unprecedented demand (200% increase since 2017)
- Workforce shortages (COVID, Attrition, Abuse, Burnout)
- Decreasing Funding – Capitated (Average £160 per patient per year, 2.1% Cost of Living Allowance)



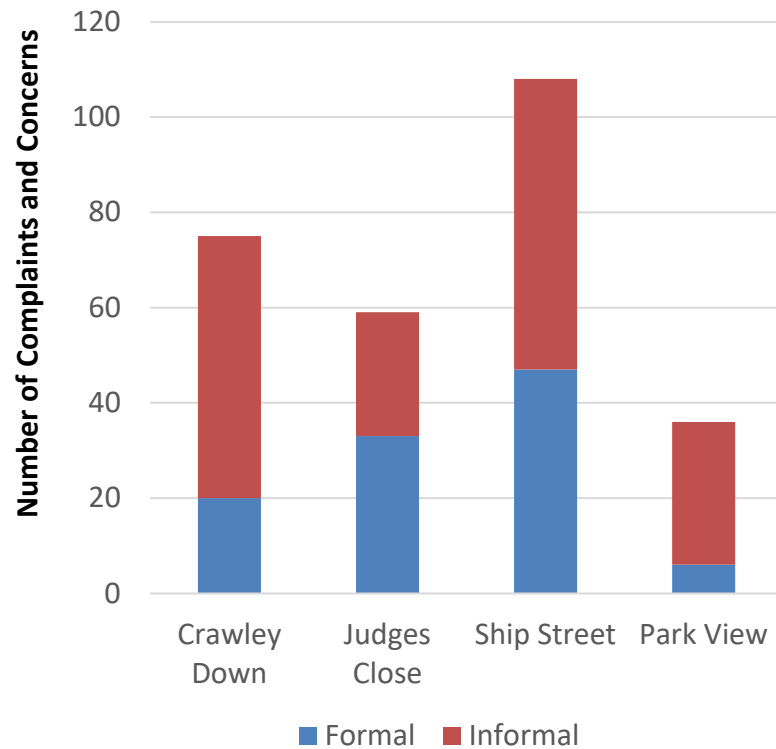
Opportunities

- Educate patients and the public about the role of the GPs (meeting needs versus wants)
- Reduce reliance on GPs – multi-disciplinary primary care team
- Working at scale – knowledge and sharing resources
- Embracing automation to reduce administration and improve the working day

Complaints and Concerns

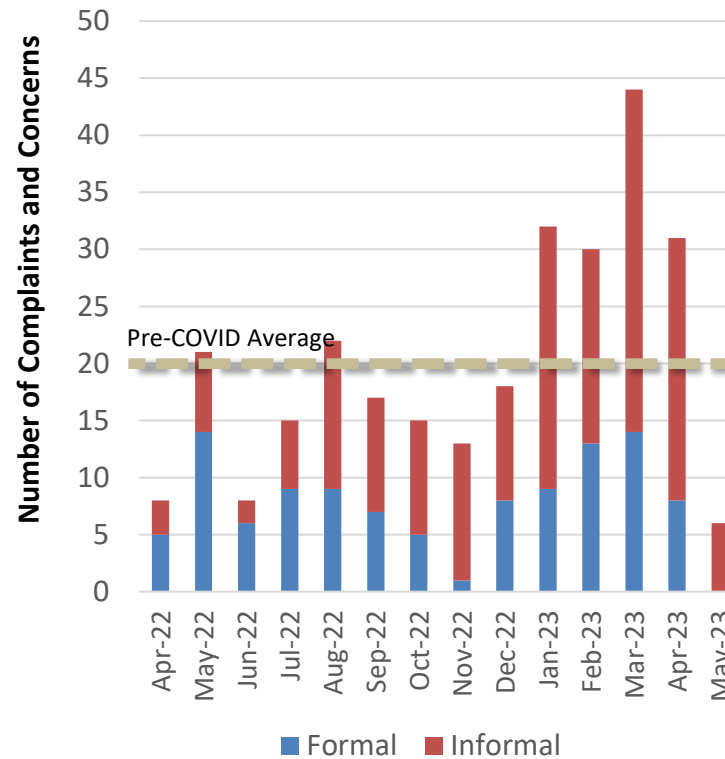
SITE

Ship Street has received more complaints and concerns due to the fact that it was originally the larger list and busier site



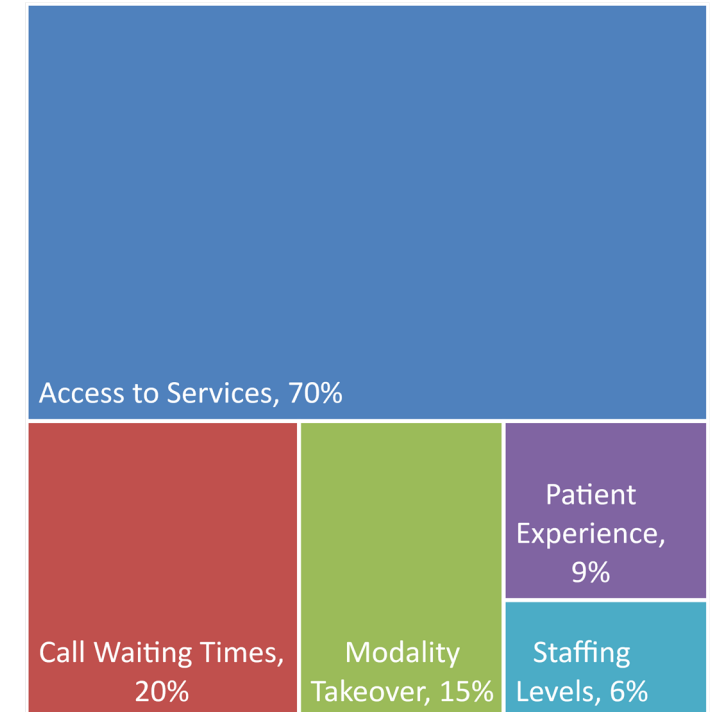
VOLUME

Consistently below Pre-COVID average but notable increase in the last 3 months linked to the petition



THE PETITION

Main issues raised can be categorised into five areas: Access, Call Waiting, Modality, Experience, Staffing

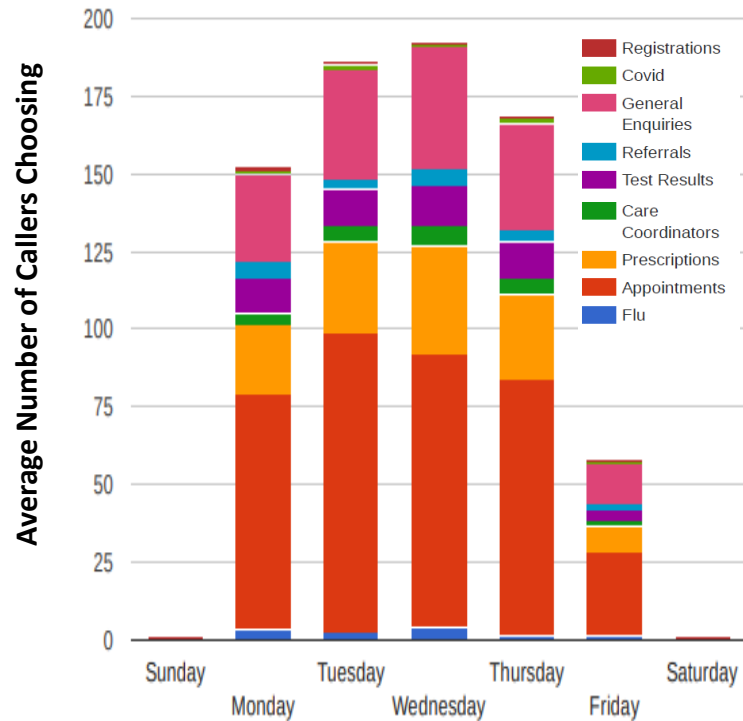


Source: Modality Patient Experience Team Complains and Concerns Log (Apr 2022 – May 2023), Review of Facebook Petition Comments

Accessing Our Services (Inbound Calls and Wait Times)

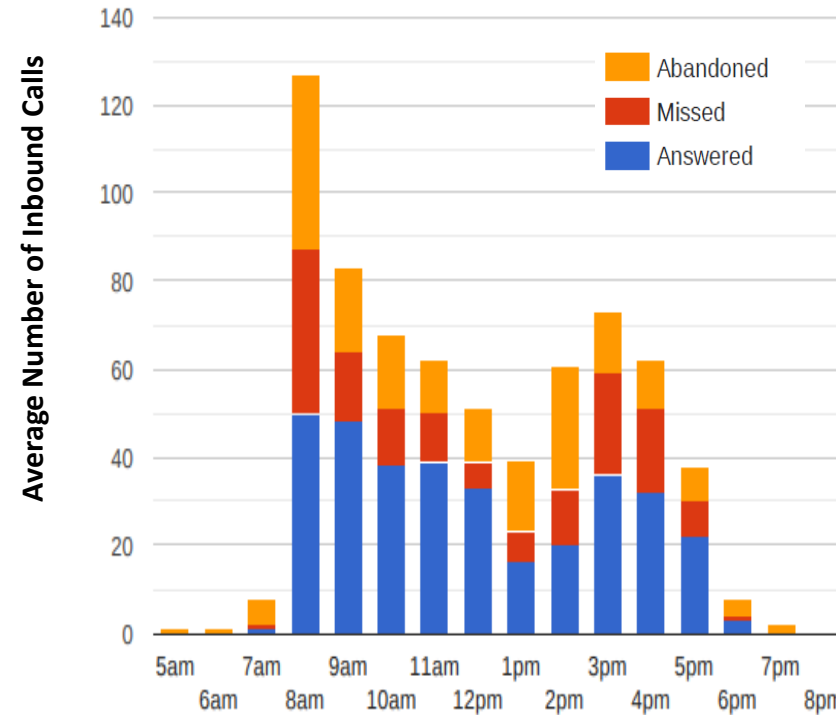
REASONS FOR CALLING

The main reasons for calling relate to making an appointment, prescriptions and general queries



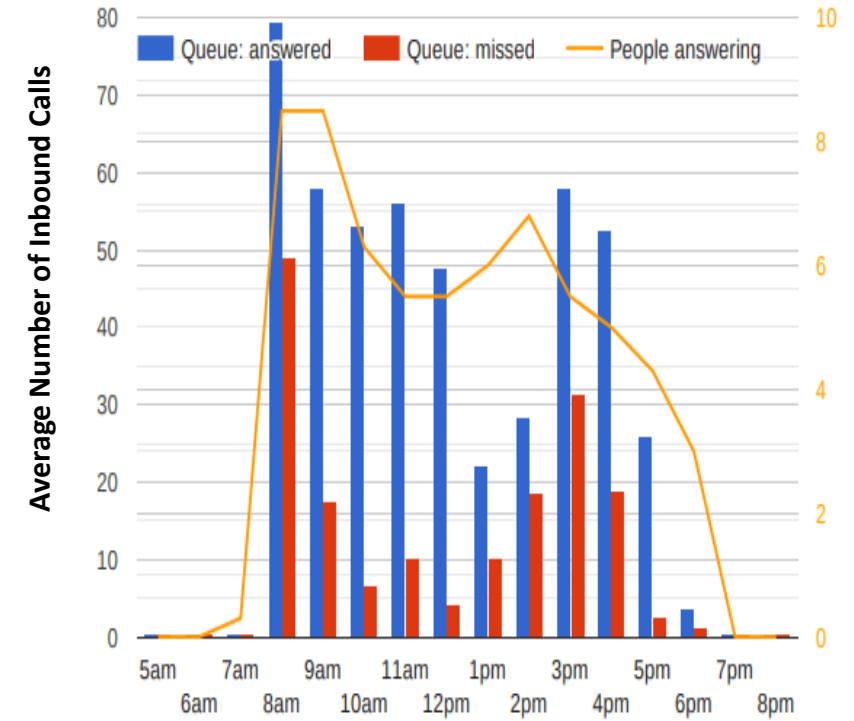
TIMING OF CALLS

The fear of missing out creates extreme pressures at the beginning of the day, resulting in significant wait times



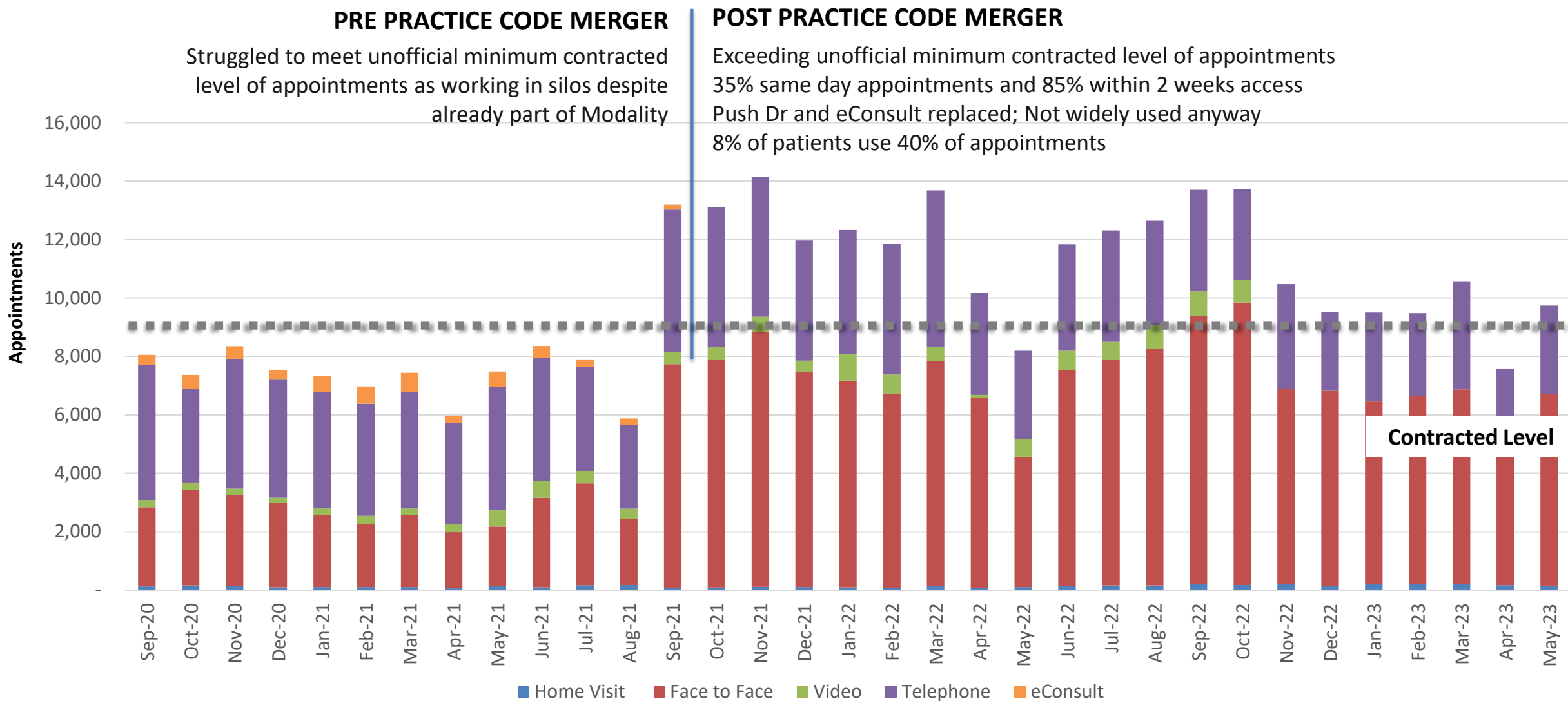
LACK OF SUPPLY

Current demand way outstrips funded level of supply of appointments. We have also struggled to recruit



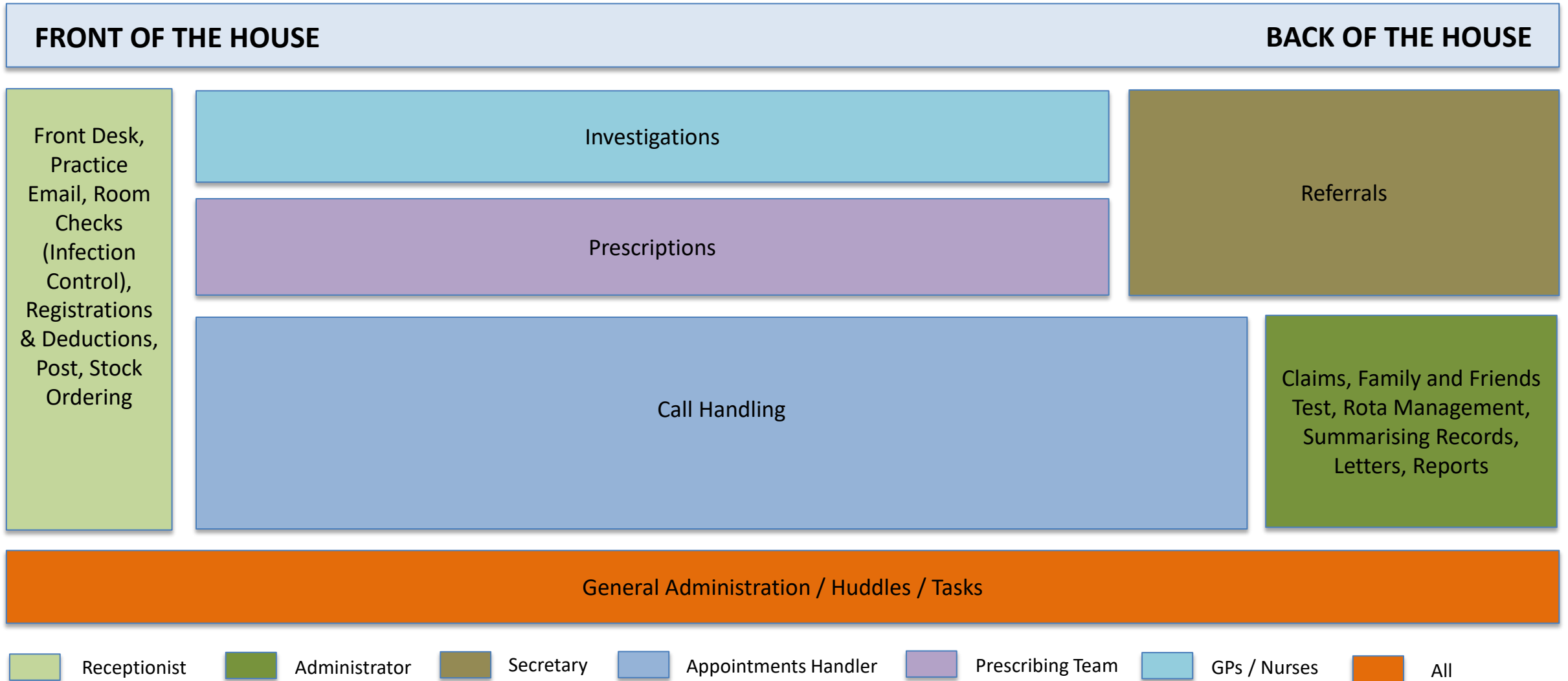
Source: Surgery Connect – X-On Phone System, April 2023 deep dive, average total of 24.1K inbound calls received per month from unique callers (May 22 – Apr 23)

Delivering Appointments



Source: Core Practice Systems for Appointments (Sep'20 - May'23)

Workload: What Lies Beneath

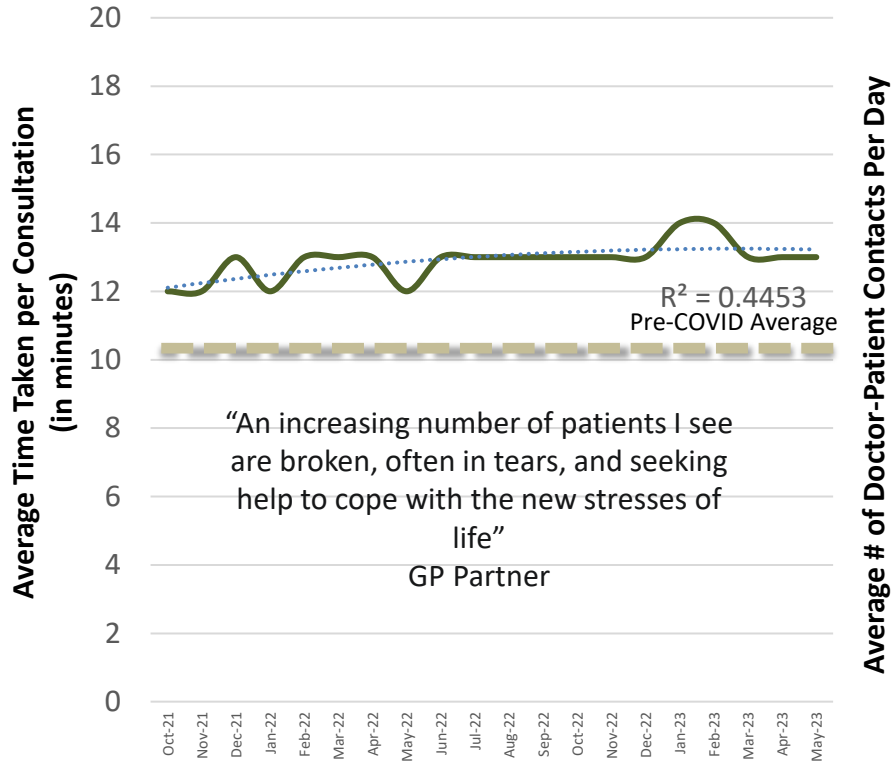


Source: % Time Spent by Resource Type, Modality Activity Based Assessment (May-23)

Workload: Additional Watch Outs

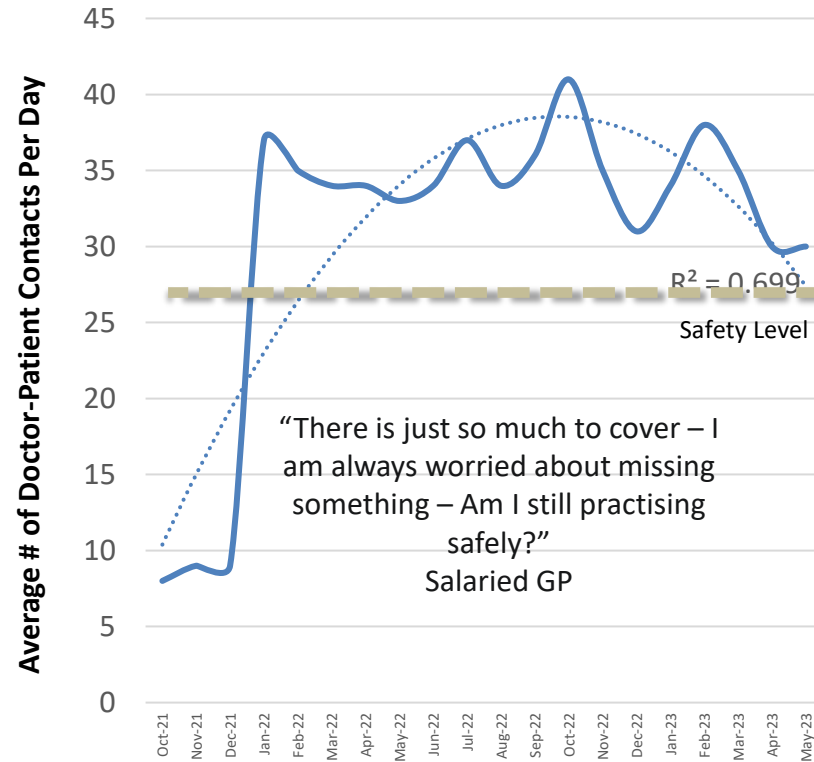
INCREASED COMPLEXITY

The nature and complexity of the patient cases have changed significantly



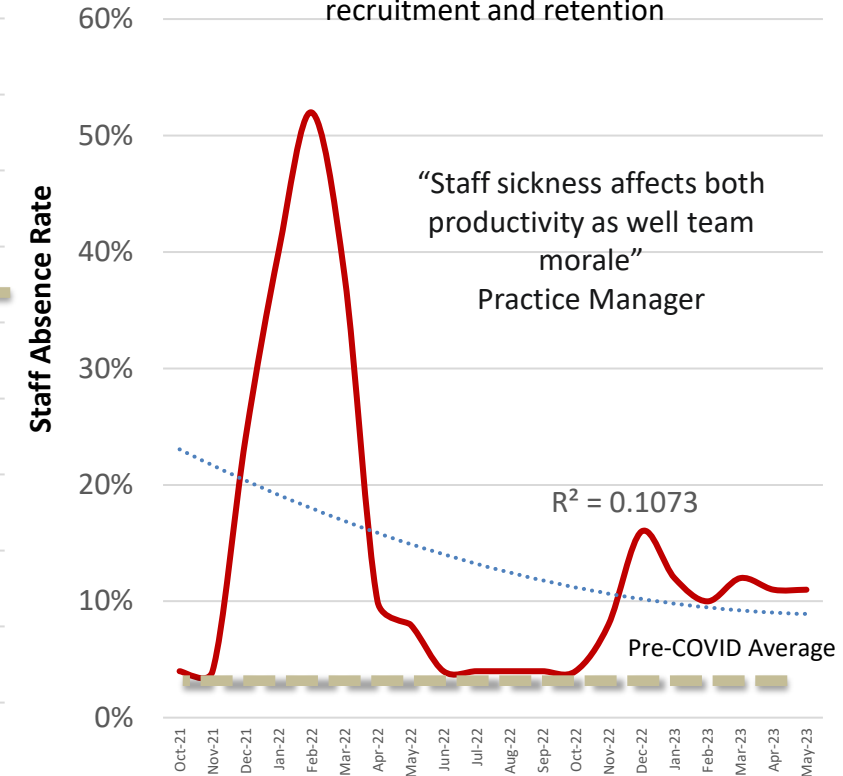
INCREASED SAFETY RISK

The number of doctor-patient contacts are breaching safety limits



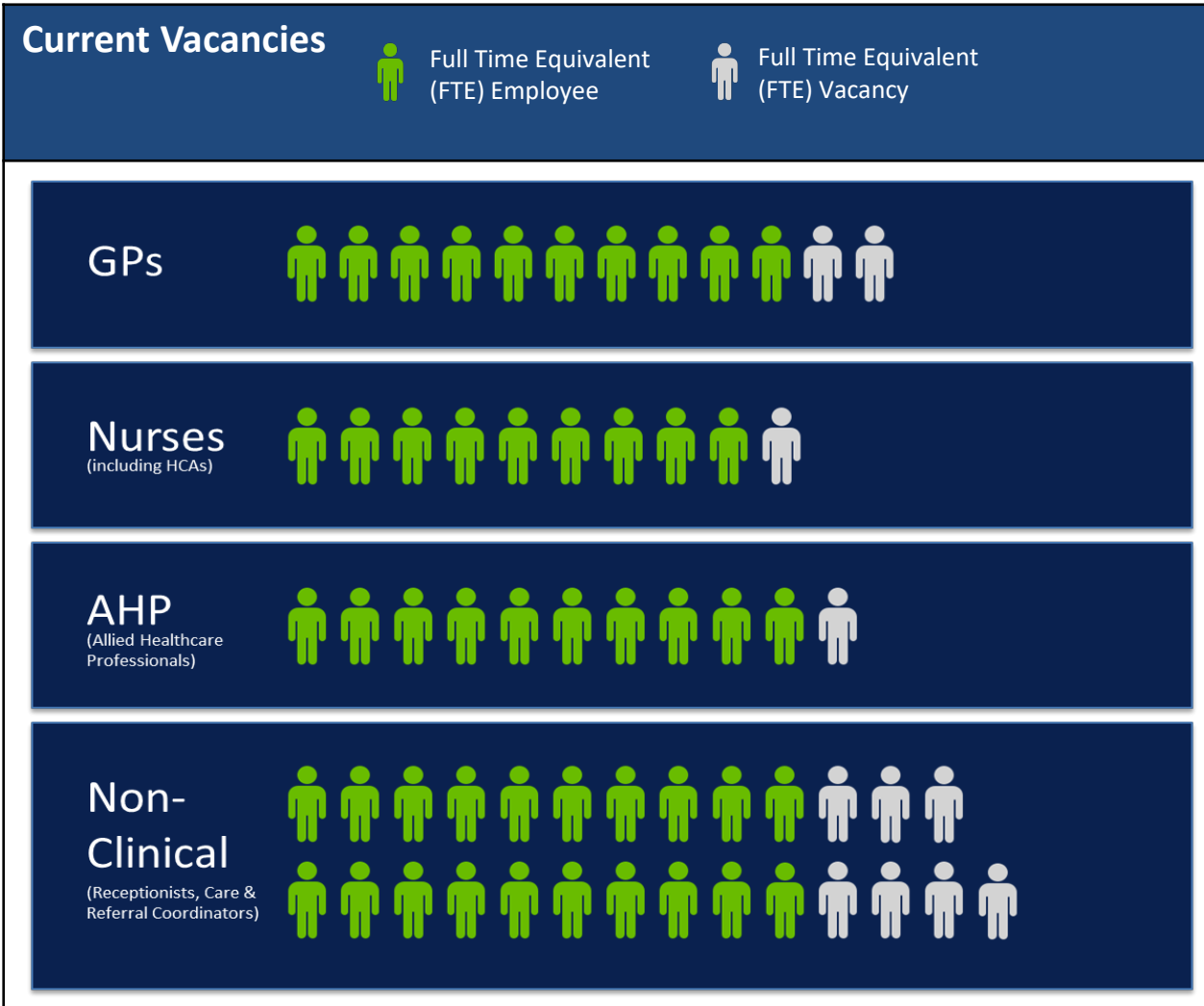
LOWER STAFF AVAILABILITY

COVID and now the social media trolling has massive impact on staff availability, recruitment and retention



Source: Modality Activity Based Assessment, Absence Management System; Absence rate is calculated based on total hours attributed to sick leave: (paid/unpaid), COVID absence:(shielding/self-isolating unwell and unable to work from home); and other absence: (compassionate, dependent: study / parental / carer / suspension) over total paid work hours (Oct 21 to May-23)

Recruitment & Retention: Filling Vacancies



- ### Proposed Plan (and Progress)
- Minimum of 7 additional (remote) GP sessions to be provided per week by experienced GPs across Modality – This is equivalent to 0.77 FTE
 - GP trainee agreed to join us post exams in August – This is equivalent to 1 FTE
 - Continued use from existing locums with the view to recruiting them longer term into the practice team
 - Launch International recruitment campaign (secured visas with the Home Office last week!)
 - Consider use of call handlers from an external call centre in the short term

Plan on a Page: Immediate Priorities, Iterative Approach

Accelerate recruitment and enhance retention



- Continue efforts to recruit and train more GPs and call handlers – additional GPs secured and starting in a few weeks
- Introduce Friends and Family Referral programme
- Faster response to trolling, unfair and unjustified feedback on social media (zero tolerance)
- Continue to drive staff wellbeing initiatives (Wellbeing Wednesdays, etc)

Improve experience for patients and staff alike



- Introduce measures to improve patient privacy when visiting each site
- Promote use of Voice Connect to help with prescription requests without needing to wait in queue
- Transition to a 2 telephone numbers to improve call handling capacity
- Increased provision of online access each day
- Re-introduce group consultations to help with access, continuity and support
- Continue to reduce pressures on GPs by building multi-disciplinary primary care team

More and better patient and community engagement



- Explain to patients and the public about Modality, use of services and the role of the GPs (meeting needs versus wants), how to provide feedback or make a complaint via both online channels and F2F events
- Introduce more and systematic collection of patient feedback
- Publish dashboard with key statistics on website on a quarterly basis
- Continue to partner with PPG and other stakeholders to engage the population

- **Incorporate feedback from the discussion**
- **Share our plans with concerned stakeholders and patients**
- **Establish cadence to share updates**
- **Continue to iterate and incorporate additional ideas**



Modality Mid Sussex

Supporting Detail



Appointments & Workload: Dictionary

Metric	Description
Total Appointments Recorded as Being Non Face To Face With A GP	Any event with a consultation method that isn't F2F, filtered down to only Doctors
Total Appointments Recorded as Being Non Face To Face With Other Staff	Any event with a consultation method that isn't F2F, filtered down to any staff other than Doctors
Total Appointments Recorded as Being With A GP As Being Face To Face	All items with a consultation type as F2F, filtered down to only Doctors
Total Appointments Recorded With Other Staff As Being Face To Face	All items with a consultation type as F2F, filtered down to any staff other than Doctors.
All Accurx Data	All video consultation, Accurx Triage
All eConsult Data	All eConsults submitted
All Push Doctor Data	All Push Dr video consults completed
F2F	All practice events recorded with a face to face consultation type.
Home Visits	All home visits completed.
Tel	All appointments with a mention of Telephone in their flags.
Text Sent to Patients	All SMS messages sent from the practice.
Capitation	Standard capitation report for each practice.
Year Snapshot	Capitation during February of each year taken as a snapshot.
All Covid Data	Received from Foundry
Average Number of Acute/Repeat Prescriptions Issued Per Day	Total number of acutes/repeats broken down by item count and patient count, divided by working days
Average Number of Correspondence Per Day	Total letter processed divided by working days
Average Number of Deductions Per Day	Total deductions divided by working days
Average Number of Doctor - Patient Contacts Per Day	Total number of items added to patient records by GPs, divided by the total number of doctor clinical system logins per
Average Number of FFT Returned Per Day	Total friends and family tests returned divided by work days
Average Number of Registration Per Day	Total registration divided by working days
Average Number of Tests (Bloods) Filed	Any report filed last month, broken down by Patient Count and Item Count separately
Average Time Taken Per Consultation Per Day (TEL)	The average is calculated from the total time taken for all telephone consultations divided by the number of consultations
MED3 Certificates Issued Per Day	Total MED3 certificates issued divided by the number of work days.
2WW Referrals	All 2WW appointments.
Other Referrals	Any appointment not classified as Routine, 2WW or Urgent.
Routine Referrals	All routine appointments.
Urgent Referrals	All Urgent appointments.

Continue with other key endeavours which we believe will help with recruitment and retention

Friends & Family Referral Scheme

Introduce Friends and Family Employee Referral programme to help incentivise team members to refer individuals into the organisation

- All staff encouraged to refer interested family / friends to available roles across the Division
- £250 bonus incentive for any team member referring an individual for a role
- Subject to the above being achieved – the referring team member will receive the bonus payment in the upcoming payroll run

Zero Tolerance

A faster response to trolling, unfair and unjustified feedback on social media (zero tolerance)

- Social Media accounts will be proactively monitored for inappropriate / abusive comments about the practice or organisation
- Immediate contact with administrators of the Facebook page / social media platform re. removal of inappropriate comments
- Repeated harassment will trigger additional escalation

Staff Wellbeing

Continued efforts to drive staff wellbeing initiatives to boost morale and team spirit and have some fun!

- Modality Wellbeing Programme – trained Wellbeing Guardians and Champions available to provide support / resources to staff
- A calendar of wellbeing initiatives – encouraging participation from staff and their families
- In time, staff and patient events to increase community engagement and wellbeing

We have taken the feedback on board and are implementing the following changes

Patient Privacy

Introduction of designated privacy point to help improve patient privacy

- On arrival patients will be asked to stand at a designated privacy point
- Each patient will be called up to the reception desk from the privacy point and will be assisted with their query
- Additional privacy screens to be used where appropriate (dependent on site layout)
- Patients can request to discuss their query in a consulting room

Call Handling

Consolidate telephone numbers for Modality Mid Sussex

- X4 individual telephone numbers for each of the sites will be ceased
- 2 new telephone numbers will be issued to all patients: 1 telephone number for East Grinstead and 1 for Burgess Hill
- This provides more flexibility with our current call handlers

Online Access

Continued provision of online access available each day

- 2 hours per day each day in order to provide online access but ensure capacity is available – to extend over next 3 months
- Additional remote (telephone / video) GP consultations will be provided
- Online questionnaires links to be sent directly to patients i.e. sore throats / ECG

We are also going to re-launch group consultations which we expect will help free up appointments

How do Group Consultations Work?

- ❶ Cohorts of patients identified by GP / Clinician as benefitting from a group consultation (diabetes / lifestyles) by GP
- ❷ Patients invited to join session by SMS
- ❸ X1 Face to Face 90-minute Group Consultation appointment (monthly) – led by an experienced GP
- ❹ Resource packs / information provided to patients with information relating to topics discussed in the group consultation
- ❺ X1 15-minute individual appointment with Coach (monthly)
- ❻ Personalised plan / goals set per patient (and progress monitored)



Benefits

- Increases patient network of support + great patient outcomes can be achieved
- Continuity - multiple patients seen by a single professional
- Longer more personalised care appointments (goal setting, lifestyle / dietary advice, exercise etc)

Next Steps

- A dedicated Health & Wellbeing Coach from Modality Hull has been assigned to Modality Mid Sussex to run remote group consultation sessions for patients re. Blood Pressure and Cholesterol
- Other sessions will be setup based on how well received this approach is with patients

Experience: Multi-Disciplinary Primary Care Team

We will be deploying 6 Coaches (based in India) that will provide online appointments to help deliver more personalised care and reduce the reliance on GPs



What is a Coach?

- A Coach is a non-clinical professional that is part of your GP practice (based in India)
- Helping to manage and/or prevent longer term healthcare conditions through lifestyles management and advice
- Provide resources, education and help directly



How can a Coach help patients?

- Help you with nutrition and diet / pain management / daily struggles
- Dedicated support to help improve your day to day activities
- 20-30 min appointments to allow meaningful conversations with you to help improve lifestyle, behaviour and physical health changes



What do patients need to do?

- Attend virtual appointments with your Coach by telephone or video
- Work with your Coach to develop a personal plan that helps you meet your health & wellbeing goals
- Regular check-ins with your Coach to ensure progress is being made

What can patients expect?



Your GP will refer you to the Coaching Service



You will need access to a Smartphone to access the service



You will receive a welcome SMS from NHS THRIVE on behalf of your GP



Download the (free) GOQII App from the App Store – you will find a link in the SMS



You will be able to select a dedicated (internationally based) Coach, highly trained and UK accredited who will work with you



Your Coach will send you a message via. App to schedule a call with you



Your Coach may call you from an international telephone number



Your Coach will work with you to build your own personal care plan and help you achieve your goals

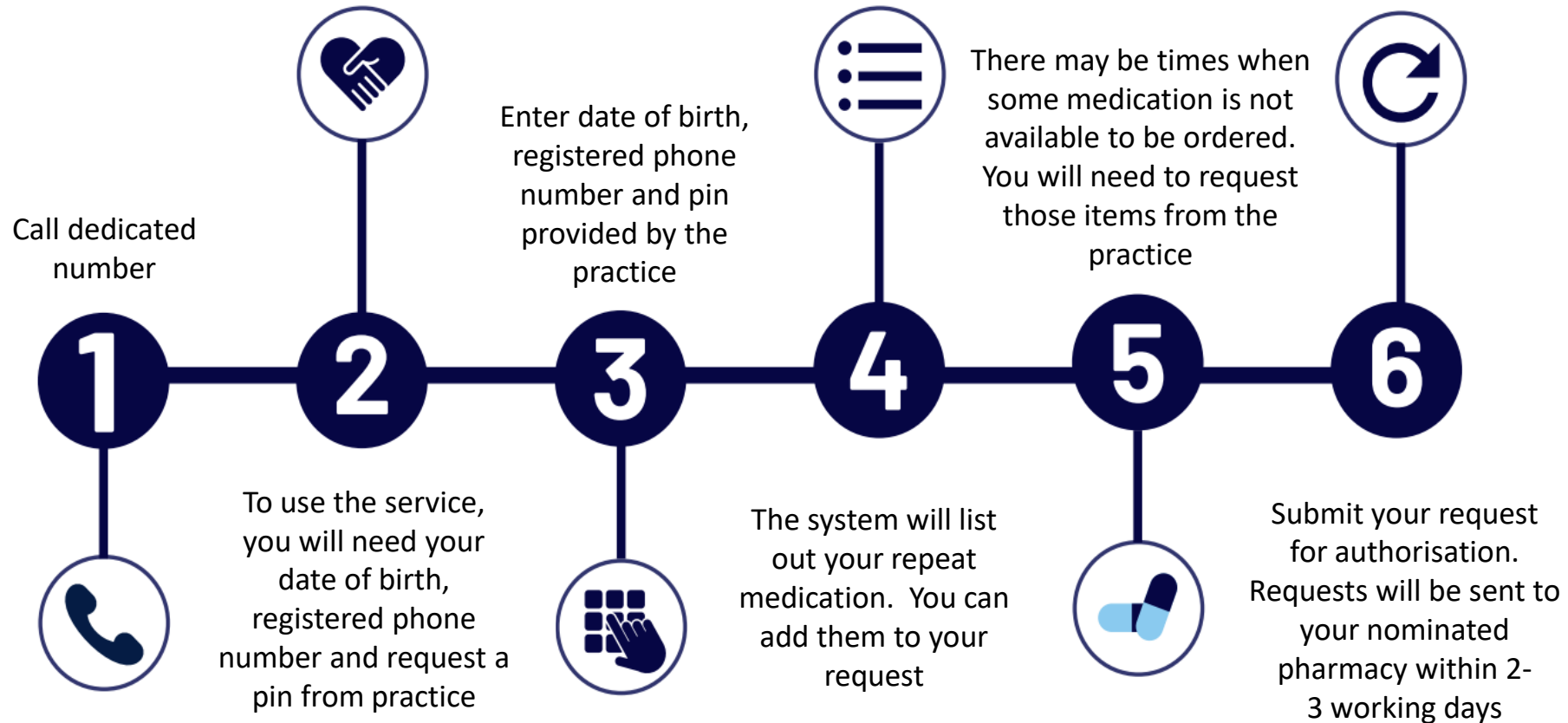


You can contact your Coach via. the App chat system or request a call



Your GP will be kept up to date with your progress

Promote use of Voice Connect to help with prescription requests without needing to wait in queue



Order Your Repeat Prescriptions 24/7

More and better patient and community engagement

Share information about Modality, services and how to provide feedback

Increased education via. Face to face events (quarterly), Website, Social Media channels, Posters, Videos to patients and the public to raise more awareness about:

- Modality (a national GP super-partnership)
- The role of GPs and services provided
- How to provide feedback or make a complaint via. online channels i.e., practice website / telephone / face to face

Publish dashboard with key statistics

An online dashboard to be published on the Modality website on a quarterly basis to show progress of delivering the right care, the first time. Key statistics will include:

- No. of calls handled
- No. of appointments provided
- No. of DNA appointments

Systematic collection of patient feedback

Introduction of more and systematic collection of patient feedback to help inform continuous improvement / changes to service delivery via:

- Website
- Short surveys
- SMS
- In practice

Continued collaborative working with PPG and other stakeholders

Launch a series of engagement sessions to help shape developments and feedback on services delivered and future services. Meetings will take place:

- Face to Face or
- Virtually via. MS Teams or Zoom