

POSTURE & MOBILITY GROUP EXECUTIVE COMMITTEE MEETING
13TH FEBRUARY 2014
James Leckey Design Ltd, Lisburn, Northern Ireland, BT28 2SA

PRESENT		APOLOGIES
Clare Canale (<i>chair</i>)	(CC)	Jane Chantry (JC)
Helen Critten-Rourke	(HCR)	Kirsty-Ann Cutler (KAC)
Paul Dyer	(PD)	James Hollington (JH)
Richard Earl	(RE)	Alison Johnston (AJ)
Craig Egglestone	(CE)	Linda Marks (LM)
James Foy (<i>teleconference</i>)	(JF)	Gail Russell (GR)
Pam Harper	(PH)	
Joanne McConnell	(JMcC)	
David Porter (<i>teleconference</i>)	(DP)	
Monica Young	(MY)	
Minutes: Olwen Ellis	(OE)	

<p>1. Minutes of October 2013 meeting approved.</p> <p>2. Chair report – CC reported on key developments since the October meeting:</p> <p>i) PMG has employed a new Events & Marketing Co-ordinator, Nicholas Hunt (NH), who is starting work on 17th Feb 2014 on a full time fixed term contract of one year.</p> <p>ii) To coincide with this, PMG has acquired a one year lease on an office space in Exeter City Centre.</p> <p>iii) PMG has commissioned a piece of work to consult with service users in England about what they expect from wheelchair services. The project is being overseen by Joanne Goodship, of Admiralty Consultants, who will present the findings at NTE 2014. OE reported that Birmingham may not come through as one of the services invited to participate, and wondered about possibilities in London instead. PD to investigate.</p> <p>3. Department of Health – progress report</p> <p>DP added his thoughts to the report recently provided by Henry Lumley (HL) on a recent meeting with the Department of Health, at which John Warrington (JW), Amjad Kazmi, HL, LM, Ian Swain and he were all present:</p> <p>JW explained that the wheelchair service review work has not been a priority, with the focus on the NHS deficit. However, David Nicholson is still expecting a report on wheelchair service review before he leaves his post. JW thought that getting tariffs in place for Wheelchair Services by 2014/15 was unlikely and even 2015/16 was ambitious. Even when tariffs agreed, JW concerned that there was still uncertainty around commissioning. The aim is to try to get consistency across CCGs. Furthermore, definitions of criteria for standard and specialist services are still unclear. Wheelchair Services don't really fit in specialist commissioning and NHS England is unsure what to do. There was to be a meeting on 30th January with Specialist Commissioning teams invited to join representatives from DoH and Monitor to look at costing specialist services. It is expected that Monitor will explain the process and ground rules with view to setting up projects.</p> <p>JW aware that it is not clear who should be driving the wheelchair service review since it was detached from AQP. He had led the work - although initially only tasked to look at commissioning. He announced that Ben Dyerson (BD) of NHS England has now been given responsibility to take the wheelchair services review work forward. JW is to provide a report on what has been done and what is recommended. He will then handover to BD, who is working with Caroline Humphries, and they are already planning to get a few commissioners together to take this forward with a meeting planned at the end of February.</p> <p>JW's report will cover three areas:</p> <p>A) Understanding of existing situation</p> <p>B) What can be done around procurement</p> <p>C) Recommendations for development and shaping of future policy</p> <p>A. Current Situation</p> <p>Assumptions made include:</p> <ul style="list-style-type: none"> • Generally accepted there is inefficiency (not in every service) • Potentially 10-15% savings possible (no reference for this other than anecdotal) 		ACTION
		PD

<ul style="list-style-type: none"> Any saving released to be reinvested in the service. <p>There is a need for consistency and transparency across services. JW trying to find ways that commissioning can be carried out to give greater visibility / transparency. He is thinking of asking providers to put forward business cases against a template to tease out plans, costs and data relating to key metrics / benchmarks etc. It was agreed it would help to get clarity about the standard / complex service definitions and the potential single pathway before the development of such plans.</p> <p>B. Procurement</p> <p>JW thought current model not working with bigger providers getting better deals from manufacturers. This was not providing best deal to NHS and tax payer. JW had tasked Supply Chain with coming up with ideas to do this differently. They had looked at several different models and some good ideas had come out of this work. JW wanted to see equipment linked to the tariff categories described by Deloitte's. This would need to be driven at national level. It was suggested a national group should decide on a matrix and the appropriate equipment options. Ways to achieve the best deals would then be explored. The DoH is willing to invest in initiatives that would create longer term savings.</p> <p>C. Recommendations</p> <p>JW went through the recommendations that were likely to appear in his report including:</p> <ul style="list-style-type: none"> Pilot tariffs Pilot competition model National coordination Evaluation before potential mandatory tariff in 2015/16 (possibly 2016/17) Any saving should be reinvested in the service DoH to appoint someone for next 12 months to work full time on this initiative <p>It was explained that PMG were commissioning a scoping exercise to consult users on their views on choice and development of services. This might help to inform the above process.</p> <p>4. Finance Report – PH reported that the current financial situation remains healthy, but with the additional expenditure in the current year – see Chair report – caution should prevail.</p> <p>i) Therefore PMG finance committee recommend that the development of the PMG website be put on hold until the outcome of NTE 2014 is known. JF reported that Joomla 1.5 will not be supported after April 2014 and that there may be risks surrounding that. Agreed that a 3rd quote for developing the website should be sought, in addition to getting new quotes from Alienation Digital and Zulu on an updated spec. JF to develop new brief to include implementation of Direct Debit for membership subs. Other considerations from PaM are:</p> <ul style="list-style-type: none"> Purchase of new equipment for webcasting (approx £500). PaM to get quote. Subtitling of webcasts <p>ii) PH reported that there are sufficient funds in the ring fenced Research pot to cover current calls on the fund. If this changes during the course of the year, the Research cttee will come back to Finance to ask for more.</p> <p>iii) Reported that once the new office phone line is in place, the 0845 service will be discontinued.</p> <p>iv) CC aims to report on the 2010 International Conference accounts by AGM.</p> <p>5. Report on recent Mary Massery (MM) Tour</p> <p>i) this had been a highly successful venture in terms of delegate satisfaction and, although the numbers were lower than had been initially anticipated, a surplus had been realised, despite the heavy costs incurred – international and inland travel, hotel bills, expenses for speaker, staff and committee members.</p> <p>ii) MM has approached PMG to consider hosting her 4 day lab course in the UK, but Education & Training (E&T) committee recommend against. Agreed. OE to inform MM and put her in contact with Active Design, who had expressed an interest in doing so if PMG couldn't.</p> <p>iii) Agreed that E&T should host more training, but to minimise the costs based on recommendations in Ffion Lane (FL)'s feedback document from the MM tour. FL had also recommended that any future international presenters need to be briefed on the way the NHS works.</p> <p>6. Collaboration with National Wheelchair Managers' Forum (NWMF)</p> <p>i) MY reported on the recent meeting between Gail Russell (GR), chair of PMG E&T, and Krys Jarvis (KJ), chair of NWMF, at which it was agreed that the two groups should work together on training. This was as a result of the recent publication of NWMF competencies.</p>	<p>JF</p> <p>JF</p> <p>OE</p> <p>CC</p> <p>OE</p> <p>MY</p>
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<p>ii) Agreed that -</p> <ul style="list-style-type: none"> PMG (specifically E&T committee members) would work with NWMF to gather up information about existing courses PMG would work with NWMF and attempt to map these against the competencies so that we end up with a framework for personal/professional development PMG to do any required promotional work. <p>iii) E&T committee to get this underway ASAP, in consultation with KJ.</p>	MY/OE
<p>7. National Training Event update – JMcC reported that:</p> <p>i) She and NH are doing a site visit at Leeds Uni on 25th Feb, to see if it is suitable for future NTEs.</p> <p>ii) The welcome evening at NTE 2014 is to be held at Techniquet in Cardiff Bay, but only if sponsorship is forthcoming.</p> <p>iii) Submissions for Parallel session presentations have been disappointing. Decisions on these now postponed until next meeting on 17th March.</p> <p>iv) The local wheelchair service at Treforest has offered to host an open afternoon for a limited number of NTE delegates on Monday afternoon, 7th July. Invacare may help with transport if required.</p> <p>v) Concern remains about the new format in terms of the accommodation being separate from the conference booking, and how this may impact on delegate numbers.</p> <p>vi) NTE cttee had recommended an increase in the value of the book token from £10 to £15 for 2014, but PMG finance committee turned this down. They recommend scrapping the book token altogether this year, and offering 10 bursaries instead of 5. Executive approved this recommendation.</p> <p>vii) NTE cttee wish to send a letter to all exhibiting companies discouraging them from taking delegates away from networking events. Executive approval given.</p> <p>viii) HR reported on costs for employing palantypists at the event. This is as a result of a request from a deaf delegate. Agreed that the delegate's employer is responsible for her training and that they should look into getting funding from Access to Work. OE to follow up with the delegate and also check with venue. JMcC suggested the Welsh Assembly also.</p>	OE JMcC OE
<p>8. Best Practice Guidelines (BPGs)</p> <p>i) PD expressed his concern over the delay in publication of the BPGs from the International Conference in 2010.</p> <p>ii) Only 2 have been published on the PMG website so far, with Barend ter Haar (BtH) currently editing the others. The latest deadline for completing them has now passed (Dec 2013). PD feels that they are becoming out of date even before publication.</p> <p>iii) PD tasked with writing to BtH to express the concern of the PMG executive, and to inform him of the wish to launch the remaining BPGs at NTE 2014 in July. PD will also re-affirm PMG's desire to support BtH in the task.</p> <p>iv) JF reported that the website will require some work to ensure there is enough space to publish the rest.</p>	PD JF
<p>9. Journal</p> <p>OE reported that PMG Finance have approved the idea of creating a rolling online journal to replace the current bi-annual hard copy, which uses up a disproportionate amount of PMG's limited resources to produce, and very few members read it. Agreed that PaM be tasked with designing the online resource for launch in 2015, with the second volume of 2014 to be the final hard copy version.</p>	JF/OE
<p>10. A.O.B.</p> <p>i) Staffing – agreed that OE's contracts with PMG require rationalising. CC will negotiate a new agreement when the current ones expire in August 2014.</p> <p>ii) Scotland – agreed to support the 2014 Perth meeting of the Scottish services in consultation with JH. OE to arrange for the Scottish charitable status of PMG to be shown on the website alongside the current information.</p> <p>iii) CIO status – CC is aiming to consult the membership on the change of status from Charity to Charitable Incorporated Organisation in due course.</p> <p>iv) Health, Design and Technology Institute (HDTI) – Agreed that PMG will continue to promote the HDTI courses in return for its members getting a discount on attendance fees. CC to inform KAC.</p>	CC OE CC CC