

Minutes

Healthwatch Peterborough Public Community Meeting

Held on: Thursday 21 May 2015

At: Italian Community Association (ICA) The Fleet, Fletton, Peterborough, PE2 8DL

Time:

09:30 -10:00 welcome/networking (refreshments available)

10:00 -12:00 Community Meeting/reports/updates

12:30-1:30 Adult Safeguarding Training

13:30-15:30 HWP Enter and View Training

Attendees and apologies

Directors: David Whiles (Chair) Gill Metcalfe, Louise Ravenscroft

Apologies: Gordon Lacey

Management Group: Dennis Pinshon, Gill Bachelor, Jean Hobbs, Rosemary Dickens, Nicky Hampshaw, Suzie Henson-Amphlett, Geoffrey Bovan, Annette Beeton

Apologies: Margaret Robinson, Ian Arnott, Susan Mahmoud

CCG:

Jane Coulson acting on behalf of Jessica Bawden (apologies given)

Sue Stephenson: Development officer Pboro LCG

PSHFT: Lesley Crosby acting on behalf of Jo Bennis (apologies given)

UnitingCare: Jane Fannon: Comms Mge

Welcome -David Whiles

- Welcome & Introductions; Apologies; Declaration of interests; none
Minutes of 16 April 2015 accepted as correct version

Action by	Area/action	Completed/further comment
All members	King's Fund Report on Local Healthwatch	All to read and provide discuss at next meeting. No feedback as yet, no feedback given at May meeting. To be re-circulated.
JH	PCC Youth Health Champions to get younger perspective	For involvement in OOH/111 consultation Meeting with YHC in June and will be discussed then.
HWP	action to provide six patient reps from a range of demographics.	For involvement in OOH/111 consultation
AB	Send letter to C&P/SL CCG re: info/Patient Exp. PSHFT	Completed and Sent TO BE FOLLOWED UP POST AGM/Annual Report
AB	PSHFT Complaint Questionnaire/reports	Final report shared with the Trust, will be published following reply. Following work from PSHFT confirmed as independent.
AB	Bowel Cancer: Request regional data on take up of screening for area. Figures not at national levels. Ongoing work to be done.	ONGOING
AB	Minor Illness and Injury Unit (MIU)	ONGOING need to monitor service provision and site. Appeal to members to collect and escalate any feedback to HWP.

Action Plan updates (Chair)

Membership update - new members Chair

Mary Bryce is now no longer a Director with HWP and we wish her well and thank her for her role in the early days of Healthwatch. We have had two applications to become members of the HWP Management Group. For best practice, requirement that members have a specific project. We are pleased to say that Suzie HA has officially joined HWP and will be working on a number of projects including supporting JH on the Dementia Friends sessions. MH has also made an application, we will have further discussions with MH to identify what role he will plan.

HWP developments (long term) Chair

DW It is assumed that we will continue in some form. We have had a three year contract that will come up for renewal in April 2016, current finding stream of £153,000 a year which may decrease in light of other decreases in funding across the sector. Currently the CAB employ HWP staff and provide office space, this is currently subject to VAT meaning an additional cost of approximately £20k a year. One option to improve our financial efficiency is to hand the contract over to the CAB and/or another provided not subject to VAT. This has been looked at by the Directors and the LA, and there are other alternatives. We are currently going above and beyond our remit and unfortunately still having to park projects due to lack of resources. Open to the group for any comments and seeking approval to begin discussions with organisations.

GB We need to maintain our independence and take this in to consideration when discussing contracts with other charities/organisations. Agreed amongst the group.

AB The draft proposal put forward to drive these efficiencies is that the contract funding would be ring fenced within the CAB, as is with all other contracts they hold. The CIC could be dissolved or frozen. They would be a subcommittee at the CAB and one member would be elected to be a Trustee at the CAB. **SHA** the other advantage of the CAB is that they are a well established central point for many other issues (housing, finance, etc.). **DP** If we were to go to another organisation it needs to be well established and respected. Approval given from the group for the directors to enter in discussion with organisations.

HWP activity: handout (AB) to also be shared by email

If there are any other meetings regularly attended on behalf of HWP please inform us.

Project/work stream - Updates - Angela Burrows

Projects:

MIU - update

S.H-A. has the issue of charging for medication been clarified? **AB.** Yes there is now a notice that states that if you would normally pay for a prescription then the same charge will be made. Please feedback any information you obtain from acquaintances or from your own visit to the service, good and bad.

Non-clinical Cancer Services (Wellbeing Centre/RHMC) (AB)

This is ongoing, met with Kathy and shared very valuable and rare feedback. Very happy with the increased activity at the RHMC that has been evident recently. We continue to work closely with them to ensure a relevant and positive local service. Request to support drive for additional local patients/carer feedback as part of the development. Delighted the drive for participation during design stage.

Complaints Handling-

Final report shows significant improvements in levels of satisfaction of complaint handling, but not to level of first quarter.

Previously stated PSHFT would not require HWP to provide independent evaluation of complaint handling; this would be done in house. **AB** raised concerns. **Lesley Crosby** confirmed this had now been reconsidered and it will be an independent evaluation of complaint handling. **AB** welcomed this direction.

Prisoner Engagement Project - (CQC/HWE) update (AB)

HWE have purchased the project, they are providing all resources to further develop it ready to be shared nationally. HWC have asked us to deliver the training within their prison alongside one of their.

Through evidence from the project, HWP has made a submission to NICE Call to Evidence on prisoner health around awareness, and to CQC as part of their consultation on inspecting secure settings.

Engagement/involvement:

111/OOH Consultation: update/overview (GL) on hold, Royston engagement events to follow.

Hydrotherapy continues to provide range of highly sought after services. High demand and usage. Feedback for satisfaction remains very high.

We share their newsletter, we would advise everyone to look at this as it covers a broad range of their services and advice as well as case studies. It is now self supporting which we often signpost to and share their achievements but this is now not relevant to be a large project.

Enter & View Programme (update) PSHFT Joint LHWs E&V overview (AB) Report shared with those who took part and Jo Bennis for comment/action.

Further unannounced planned for MIU before autumn.

Schedule of E&V at care homes from September (new CQC regulations - rating notices etc)

Children/Young People engagement (Videoscribe MH/Primary Care) (Jennifer)

Angela shared overview of our work with engaging with young people with the Patient Forum Group. Jennifer will present at the H&WBB on 18 June.

Millfield Patient Info Stand - pending

Soft Intelligence/activity - Management Group update

Feedback and activity confirmed since previous meeting date (16 April-21 May)

Nene Valley, Doctor First telephone consultation. JH (Botolph) experience of it has been excellent, heard back very quickly and was then able to see the Doctor a couple of hours later. Also very useful to be able to discuss and get prescriptions over the phone. Overall very positive feedback about this service. Alleviates pressure on the GP in the surgery as well as services further down the line. JC It is not promoted by the CCG but initiated by the practices themselves.

Minor ailment service, you can have a repeat prescription provided at pharmacies, normally used for long term conditions including inhalers, skin creams, allergy medication, etc. (free for children and over 60s). Reduces pressure on GPs. DW Would be useful to hear from the pharmacies to learn more about these types of useful services (JC to talk to pharmacy services to attend a HWP community meeting).

DP be aware of social media, large organisations do monitor comments made about them on social media and often very quickly.

Soft Intelligence/activity - Director Update

Feedback and activity confirmed since previous meeting date (16 April -21 May)

Any areas of discussion/ideas for actions/activity etc (possible follow up meeting)

CCG - Jane Coulson

Royston now going out to engage with three practices that are part of Cambs, when this is completed the procurement process will start up again. Norfolk and Norwich CCG decided not to consult, has caused slight issue in Wisbech. Work has been done with HWN to address this ensuring that all patients do have the opportunity to voice their opinion.

111/OOH decision has been delayed for obvious reasons, **the consultation document** will be online within the week as it could not be published during the election period.

System transformation programme, joining providers on the system transformation board. All providers, commissioners, councils and other strategic partners come together in order to look at services holistically to look at options to streamline services to ensure that patients don't have to visit several different services for connected parts of their health. Not just health and social care, it includes MH, housing and other factors/services. Patient involvement assemblies, there will be one held in Peterborough 7-9pm to outline what the programme is looking at as well as to collect patients issues with services. SHA concern that this will lead to the 'usual suspects' providing their experiences and opinions. By going out to a range of community areas and collecting peoples experiences out in the community you will have more meaningful engagement with a better representation of the population. JC of course these assemblies and coffee mornings are only one part of the engagement.

Peterborough Forum group, ran by local patients with a slightly different role to HWP but there are some issues of overlap that need further discussion with AB. They are very aware that they do not currently represent the diverse population of Peterborough, to address this they have sent out surveys to all patient groups to find out how they can make themselves more accessible.

PSHFT - Lesley Crosby

We have been awarded an equality award; staff member has received an Equality leader award.

Children and young people survey, nationally was not the response what they were hoping it to be, possibly broke it in to too many age groups. Have an action plan from areas we aim to improve on.

Patient survey embargoed until tomorrow and will then be on the website. POST MEETING NOTE: this is now available on the CQC website.

Two day CQC inspection was carried out earlier this week following the full inspection in 2014, this looked at five areas; End of life, medicine (general), paediatrics, emergency department and complaints. Feedback at the end of the two days stated that staff were very open and responsive with the inspectors, **AB** agreed with this from our experience on conducting E&Vs (full report expected to be published at the end of July to the public). Staff reported that they felt able to raise concerns and were listened to. Improvements found in children services and end of life. New assessment unit has made an improvement for both the experience of patients and the staff working in that area. Full report not yet available.

Local HW Quality Statements (standards)

- Local voice and influence
- Making a difference locally
- Signposting and Advice
- Strategic context - evidence for projects/ relationships
- Relationship with Healthwatch England and the CQC

Hydrotherapy getting better increasing groups and options for attending. Trying to source a new physio.

MIU CCG undertook an unannounced inspection -full report shared. Awaiting publication version to share on website.

Communications to/from HWP

Quality accounts, thank you to those that did provide feedback. PSHFT and CCS responses have been submitted. CPFT will be submitted tomorrow, if anyone had any comments please email them over.

AOB

Annual report, The deadline is 30th June; we are aiming for it to be completed by Friday 26th June and potentially an electronic version to be available for the June Community Meeting. First draft scheduled for w/c 15th June latest -for any amendments/additions.

UnitingCare are now introducing some of their new services. Point of access has been launched currently just for GPs, as it proves to be robust it will then be available to care homes and then the public. A member of UnitingCare will be attending HWP community meetings **Action:** standing agenda to be added for UnitingCare.

12:00 FINISH (followed by light lunch and Complaints training)

NEXT MEETING:

Wednesday 24th June (9:30 for a 10am start)

Followed by Dementia Friends Training