

## Draft minutes

### Healthwatch Peterborough Public Community Meeting

Held on: Tuesday 23<sup>rd</sup> September 2014

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

**Time: 9:30-10.00 welcome/refreshments 10 - 12noon Meeting (followed by network light lunch)**

#### Attendees and apologies

Directors: Gordon Lacey (GL), Gill Metcalfe (GM), Mary Bryce (MB),

Apologies: Louise Ravensthorpe (LR), David Whiles (DW),

Management Group: Rosemary Dickens (RD), Margaret Robinson (MR), Nicola Hampshaw (NH), Gill bachelor (GB), Susan Mahmoud (SM), Annette Beeton (AB), Dennis Pinshon (DP)  
Anne Lockwood-Hall

Apologies: Barbara Cork; Ian Arnott; Geoff Bovan, Jean Hobbs (JH),

#### CAB HWP

Angela Burrows (AB) COO

Jennifer Hodges (JH) SO

#### Other Attendees

Rosemary Steele

#### C&P CCG

Jane Coulson (JC)

Apologies: Jessica Bawden (JB)

#### PSHFT

Lesley Crosby (LC)

Apologies: Chris Wilkinson (CW)

#### Welcome -Gordon Lacey (Chair in David's absence)

1. Welcome & Introductions;
2. Apologies;
3. Declaration of interests;
4. Minutes of 20 August 2014 - ratified

#### Actions

Action by	Area/action	Completed/further comment
AB	Further info on GMC consultation	Sent and inc. In Enews/social media
Jane C (C&PCCG)	provide current engagement/comms between community GPs and acute doctors/Consultants.	Pending – to be shared with Annette B & Susan M.
AB	PCC Pharmaceutical Needs. To respond with MR as interested party.	Completed.
AB	Children Safeguarding Training for volunteers	Communicated with FV – who also need training for volunteers. Session to be jointly run (pending further info)
JH	Videoscribe for next public mtg	completed
All	Feedback experiences re: ED at PCH (A&E)	tbc
All	Raise awareness in networks re: GMC consultation in afternoon of next mtg	tbc

#### Action Plans/Activity - Updates - Angela Burrows

#### Request for representation/support:

**GMC** - Reviewing how we deal with concerns about doctors Consultation - Jo Wren; joining us in afternoon session 22<sup>nd</sup> October (**info provided at meeting**) This is a large consultation ending 14<sup>th</sup> November and will be carrying out the consultation, going through the questions at the meeting in which they will collect our feedback which will make HWP's response. It is an important consultation to be involved in and put forward our perspective on the number of issues and areas being discussed. Everyone will also have an opportunity to give their own individual feedback. Members are welcome to bring other people they believe would be interested. **Action: A.B to send GMC consultation info.**

R.S Rose questions about the communication between GPs and Hospitals.

J.C There are meetings that facilitate this, however it does not include all GPs or Consultants as there is a massive time constraint on these practices.

**AGREED** - matter to be brought forward by Annette Beeton/Susan Mahmud Action **JC to provide current engagement/comms between community GPs and acute doctors/Consultants.**

**NICE Prisoner Health** - JH- mental health AB - Physical health - consultation starting on the 1<sup>st</sup> October, finishing on the 30<sup>th</sup> October 2014 -GDG members invited. We may well be asked to go provide further info from our project. They are not rewriting anything that is already there but there will be specific guidance on what standards need to be for prisoners taking in to account the specific challenges within the justice system; however it will be referencing existing guidance.

**NHS England GP Surgery Procurement (GL provisionally agreed pending agreement)** undertaking procurement of a local GP and they would like some patient representation, G.L would initially speak to the current PPG in order to get their perspective/feedback - also what they want bidders to be asked in the process.

**Stanground Surgery PPG - extension (Letter shared from PPG Chair)** most of the planning has been agreed but some obstacles have come up and they are looking for some support. If anyone would like to contact the practice please inform us. We are always in support of a local health service that would increase access and have a positive impact on local health.

**Peterborough City Council - Peterborough Pharmaceutical Needs Assessment project group** - looking to review the 2011 Pharmaceutical Needs Assessment in line with statutory obligations (**more info pending**). **M.R declared interest.**

**ACTION: AB to share with group and confirm with PCC.**

**Hydrotherapy** - Fun day raised over £1k - for waterproof lockers/defibrillator. AB has requested a steering group meeting to discuss commissioning/long-term provision of hydrotherapy. There is medium term stability in funding (2 years) but they now need to be thinking ahead for the long term solutions to ensure that Hydrotherapy provision exists in Peterborough.

**Non-clinical Cancer Services (report)** waiting formal confirmation of Wellbeing Centre project - HWP would be part of project Board. We have been working on this for over 2 years when patients/carers raised concerns over lack of local services and what was being delivered at RHMC. The news of a Wellbeing Centre proposal is excellent and the results from our survey will help the group make decisions about what non-clinical services are most important to local people.

**Complaints handling - Update HWE Training Session - Nov/Dec proposal)** HWE have commissioned Cab to make some training for LWH's, it is very good training and we would like to deliver this training over the next couple of months and invite other stakeholders to attend (PCH, LCG, CGG, etc). It looks at how we deal with complaints locally and nationally.

R.S issue of the term "complaint", often people want to make a comment about a service and be listened to without having to go through complaints procedures.

**Coronary Heart Project proposal** - lead Mge/Dir TBC Still waiting for PSHFT to get back with us to confirm this project.

**Enter & View Programme** (all previous inspections to be reviewed and published. Awaiting new volunteers DBSs, will then share programme of visits going forward

by October meeting. If you do need a DBS completed please contact PCVS. **AB to look in to Children Safeguarding Training**

**Mental Health** (Jennifer) - Videoscribe project update. CPFT Mind your body event, 11<sup>th</sup> October. Feel The Force event, 18<sup>th</sup> October. **JH to provide the Videoscribe at next meeting**

**SEND Reforms** (L Ravenscroft) (report) Concerned that Contact a Family have mentioned HW several times within their national publications which showed a mix of positive and negative feedback regarding LHWs. As well as all schools, each LHW has to provide a local offer, worrying that HWE was not aware of this requirement and therefore could not inform LHWs. There is a potential for a national meeting to inform LHWs of their duty to complete this. A.B highlighted this to HWE and Kathryn Rake.

**Prisoner Project** - Interest in the network to use our system on engaging with prisoners. Difficulty may be cost of course/material/training (although is reasonable). Group to continue to engage and share concerns and best practice from feedback from Wellbeing reps.

**Community engagements** - Inspire Accessible Britain; **JH gave update** Polish school AB attended - approx 500 in attendance, gave presentation to attendees, over 70 signed up for Enews, will include some items in Polish. Many said that they had never had another organisation like HWP come and give them a talk; hopefully we can raise awareness of this school to other organisations as well as signposting Polish community to the local services.

Upcoming Community engagement: CCS AGM 2pm St Ives; Fresher's Fayre 10-2pm Wed 1<sup>st</sup> Oct PRC; World Mental Health Day 10<sup>th</sup> Oct TBC; Sat 18<sup>th</sup> Feel the Force Kingsgate 11am. Millfield Medical Centre launch of Patient Information Centre; Carers Conference 16<sup>th</sup> Oct 9:30 The Fleet.

#### **Soft Intelligence - Management Group/Director**

Further discussion around the subject of GPs and Consultants communications - Annette B and Susan M.

Where an informal lunchtime meeting use to be a good use of time, it has now not seen as a valuable use of time to conduct important meetings like this. It is very beneficial to all patients for GPs, consultants and hospital staff to meet.

#### **Reports from Mge Gp/Directors/Staff (all distributed to Dir/Mge Gp) taken as read**

No.	Date	Committee/meeting	Attended/report by
1	17/09	HWP Non-clinical Cancer Services Report (1 <sup>st</sup> Draft)	GM
2	17/09	Non Clinical Cancer Services Mtg	GM
3	05/09	LCG Boards, Joint & Borderline	GL
4	04/09	CCG Commissioning Intentions Workshop (via PRG)	GL

5	05/09	Cancer Services User Group (CSUG)	GM
6	05/09	Peterborough LCG Board Meeting	GM
7	12/08	Patient Safety & Quality Committee	MB
8	14/08	Older Peoples Partnership Board (PCC)	MR
9	01/08	Borderline LCG	MB
10	17/09	Older Peoples Programme Board Workshop	GL

#### Communications to/from HWP

Date	From - to	Details (overview)
17 Sept	HWP - PSHFT	Report from Non-clinical services review (see meeting reports) to be shared CCG/LCG/Website - pending
12 Sept	HWP - Luton CCG	HW feedback re: CCS - bidders for community services
8 Sept	HWP - CCG	Info re: ENT procurement for Peterborough
Aug	HWP - Numerous	Prison Training info
Aug/Sept	HWP - numerous	Provided numerous communications to members of the public info/signposting
Aug	PPG - HWP	Issue with expansion
Aug	GMC -HWP	Support/engagement for consultation
Sept	NHS England - HWP	Support for Procurement
Sept	PCC - HWP	Pharmaceutical Needs Group - request for rep.
Sept	CCG - HWP	Request for info - clinical audit of ED admissions
Sept	Millfield Medical Centre	Invite to launch of Patient Info Hub, opening by Stewart Jackson MP

J.C If anyone is interested in evaluating the ENT procurement documents please do get in touch. S.M agreed to be involved.

A.B any soft intelligence about admissions to ED and the issues around this please get in contact, for example issues with the 111 service and GP out of hours. This does also include other A&E department in the region.

#### PSHFT - Lesley Crosby for Chris Wilkinson

New CEO has started who has given a lot of interview, committed to reduce wait in A&E. Has a strong patient field experience. New COO who is responsible for making sure there is flow in the system. New HR leader starting soon. Giving us a stable board without interim. Working hard to maintain capacity and looking at the type of patient we get in, where our peaks are and how we can work with the community to address findings. Also hoping to utilise the Discharge Lounge better. Dementia Nurse Specialist appointed, singing for the brain will be running in November again. Appointed a female Muslim Chaplin who is working closely with the Muslim community for the Hospital and have seen some positive feedback and interaction with this community.

Cancer survey to be released at the end of the month (Sept).  
ED national patient survey has gone out but we are waiting for the CQC National benchmark for this to be able to see how we are performing against other  
Hoping to rejuvenate Patient Experience Group and would like a representative from HWP.  
Meetings are thought to be bi-monthly to start with then quarterly. **S.M happy to represent HWP. R.S shown interest.**

#### **C&P CCG - Jane Coulson**

Bidder announcement due before next HWP meeting, beginning of Oct but no specific date being given. Being discussed privately by the CCG Governing Body and bidders will be announced. A.B the date keeps changing - is this a definitive date?

J.C Depends on the decisions and discussions from the CCG Governing Body, this evaluations process is in-depth and it is vital that all those who should have a vote are there. Allow some time for the successful bidder to agree on certain conditions.

CCG, with the rest of the health economy, are working on the Service Transformation Strategy (5 year plan). We are a struggling health economy. It's a CCG led 5 year plan but is run across a lot of systems so we have to work with all of these systems and boards. If HWP would like a talk it can be arranged. J.C and A.B to liaise about dates.

A.B was there going to be any feedback from PwC?

J.C there work was to start and establish this 5 year plan, not sure if there was a report but will check this and confirm this. Their recommendations used to develop plans Working with all ED departments across the whole of the county, within Peterborough we are looking at GP out of hours and what links there could be made in potentially moving these GPs to the ED department to reduce pressure from less urgent cases.

A.B how can we get involved and ensure that there is service engagement.

J.C Group has been recently created, will find out more about this and inform HWP on it.

L.C It is very positive and reassuring that the acute trust and CCG are talking about this major local issue.

#### **Open to questions/feedback from attendees/ AOB**

##### Patient signposting/referrals

**Susan M.** Soft intelligence, there are some condition such as Varicuss Veins that are seen as non-vital for procedures but that there are also clinical cases where co-morbidity makes them more important. Is there anywhere that patients can be informed about this sort of situation? GP awareness is being questioned.

Gordon Lacey to raise concern at the Patient Engagement Group.

Awareness about mental health stakeholder group is becoming ineffective, as many organisations are not sending representation. Means that people and organisations have a lack of knowledge about current issues, what is going on and who is doing what. Letter is now going out from a senior member informing organisations that they must provide a representative.

##### Homeopathy

**Rosemary S:** need to raise awareness of NICE approved availability.

**NEXT MEETING; WEDNESDAY 22 OCTOBER**

**BOWEL CANCER OVERVIEW**

**GMC Consultation**