

Welcome to the Healthwatch Coventry member's newsletter bringing you up to date with work and developments in health and social care

## Healthwatch News

### Healthwatch appoints new Chair

Following an open recruitment process we have successfully appointed John Mason as the new Healthwatch Coventry Chair Person.

This important volunteer role is created to ensure Healthwatch makes the views and experiences of local people known to influence better outcomes and experiences in health and social care for Coventry people.

The chair sits on the Coventry Health and Wellbeing Board; works with a range of decision makers and managers to ensure Healthwatch has influence; and works to ensure the Healthwatch Steering Group is effective.

John has been involved in different volunteering roles over the past 40 years. In the last two years he has been a volunteer Steering Group member for Coventry Local Involvement Network and carried this on into Healthwatch Coventry.

John possesses experience as a City Councillor for Woodlands Ward and a non-executive Director on the Board of Coventry PCT where he linked in with various community health action groups, so has plenty of knowledge regarding local Health and Social Care Services and some

of the issues faced in Coventry and surrounding areas.

John says: *"I am very proud to have been chosen as Healthwatch Chair. Sometimes when things go wrong in large organisations like the NHS and councils it is because no one has listened and taken account of the people most affected: patients and users of care services and relatives/carers. That is why Healthwatch exists, to pick up on concerns and hold organisations to account."*

David Spurgeon, outgoing Healthwatch chair, says *"I am delighted that John has been recruited to be the new Chair, his passion and enthusiasm for representing the interests and views of Coventry people will ensure Healthwatch brings the issues that matter most to local people to those who deliver, plan and pay for health and social care service in Coventry"*.

### Patient transport

Healthwatch Coventry has referred the commissioning of patient transport in Coventry to Scrutiny Board 5 of the City council for them to investigate. Healthwatch has been following up work by Coventry LINK which looked at the experiences of renal patients of patient transport. Concerns grew about the handling of a tender process for the patient transport service by the local Clinical Commissioning Groups.



## Volunteering in Healthwatch Coventry

Can you help us gather and represent the views of local people?

Volunteers were incredibly important to Coventry LINK, to Interim Healthwatch Coventry and will continue to be vital to the work of Healthwatch Coventry.

We are developing new volunteering roles to add to the existing authorised representative role and are looking for people who are interested in giving some valuable time to Healthwatch.

Could you be an:

- Authorised Representative
- Community Connector Volunteer
- Service Quality Volunteer
- Topic Team Volunteer

You can find out more at our next Volunteering in a Snapshot session.

See the enclosed flier and expression of interest form.



If you use the Internet have a look at the new Healthwatch Coventry website at:

[www.healthwatchcoventry.co.uk](http://www.healthwatchcoventry.co.uk)

Follow us on Facebook at:  
<https://www.facebook.com/pages/Healthwatch-Coventry/339711536150552>

Follow us on Twitter at:  
HealthwatchCov

## Give your feedback on list of rights

Healthwatch England is consulting on a proposed rights framework setting out eight rights for those who use health and social care services.

Their aim is to develop consumer rights to help us all get the safe, dignified and high quality care we deserve. Healthwatch England will be using its rights framework to challenge the system to become more consumer focused.

Recent research by Healthwatch revealed that as a nation we see ourselves as 'grateful patients', broadly satisfied with the health and care services we receive even when they fail to meet our most basic expectations.

The draft rights are:

1. The right to essential services
2. The right to access
3. The right to a safe, dignified and quality service
4. The right to information and education
5. The right to choose
6. The right to be listened to
7. The right to be involved
8. The right to live in a healthy environment

Anna Bradley, Chair of Healthwatch England, said: *"Setting out the rights was just the first step, what we are doing now is talking to people about their experiences of these rights in action and the responsibilities they think go with them."*

After the consultation we will create a list of responsibilities that reflects our rights framework. Early findings will be published on World Consumer Rights Day on 15 March 2014

A copy of the consultation can be found at: [www.healthwatch.co.uk/thewayforward](http://www.healthwatch.co.uk/thewayforward)  
The deadline for responding is **10 March 2014**.

### Contact us

Healthwatch Coventry is provided by the Here2help Voluntary Sector Consortium

The Healthwatch team can be contacted on 024 7622 0381 (option 5)

### Mental health care in Coventry is changing

Coventry and Warwickshire Partnership Trust are putting in place changes to how some of their services are organised. If you, or someone you care for, use Coventry and Warwickshire mental health services you can find out more on

**Wednesday 26 February 2014  
at Queens Road Baptist Church, Queens  
Road, Coventry, CV1 3EG**

Places are limited so please book directly with CWPT by contacting Nicola Broomhead on 024 7696 7876 or emailing [nichola.broomhead@covwarkpt.nhs.uk](mailto:nichola.broomhead@covwarkpt.nhs.uk)

### New Chair person at UHCW

The NHS Trust Development Authority (NHS TDA) has confirmed the appointment of Trevor Robinson as Acting Chair of University Hospitals Coventry and Warwickshire NHS Trust.

Trevor Robinson was appointed to the Trust as a non-executive director in December 2008. His previous roles include Finance Director of Hillingdon London Borough Council for 10 years and he was the first Finance Director of the newly formed Greater London Authority in 2000.



### Improvements in A&E

Clinical leaders at NHS Coventry and Rugby Clinical Commissioning Group (CCG) are praising University Hospital, Coventry, for its improved performance against the national four hour A&E target.

Targets have been set nationally for A&E

departments across the country to see, admit, transfer or discharge patients within four hours of attendance. Last winter the hospital, like many others in the region, was not regularly achieving the target and since then has worked hard to turn its performance around.

NHS England last week published data for performance against the target during the first week in January. The hospital, which is part of University Hospitals Coventry and Warwickshire NHS Trust (UHCW), saw 97% of patients attending A&E within the set target.

This comes at a time when nationally there is a huge focus on A&E waiting times and performance, with national performance showing a slight decline.

Andy Hardy, Chief Executive Officer at UHCW, said:

*“Since the launch of the Trust’s Getting Emergency Care Right campaign in September we have seen massive improvements but we know this is not complete. We will continue to work hard to maintain our position.”*

### Local views needed to drive healthcare priorities

The next Coventry and Rugby CCG patient, public and carers event is on:

**Wednesday 19 February  
from 10:30am-1:00pm  
At Coventry Rugby Club, Butts Park  
Arena, The Butts, Coventry**

Everyone is welcome.

Booking is essential so that attendance numbers can be managed.

Book your place now by phoning 01926 353810 or email [communications@ardencsu.nhs.uk](mailto:communications@ardencsu.nhs.uk)

## Results for maternity service friends and family test

The first results of the Friends and Family (FFT) Test for NHS-funded maternity services across England have been published

The Friends and Family Test asks women up to four questions at three stages during their pregnancy, seeking feedback about antenatal services, the labour ward/ birthing unit or home birth services, the postnatal ward and the postnatal community services.

They are asked whether they would recommend maternity services to their nearest and dearest based on their own experience. Their responses will build into the most comprehensive feedback exercise ever undertaken with pregnant women and involves 138 trusts and more than 200 maternity sites nationally.

Over the first three months, more than 93,600 pieces of feedback were gathered from pregnant women and mums.

At University Hospitals Coventry and Warwickshire feedback raised issues over the new birth centre's discharge process, visiting for partners and making FFT more visible.

As a result staff have worked to speed up the discharge process, changed the visiting for partners so dads can now stay on the ward at night, and have designed new boards making feedback opportunities more visible to mothers as part of their drive towards "Improving the Post Natal Experience".

Details of the Friends and Family Test maternity data for December 2013 can be found on the NHS Choices website.  
[www.nhs.uk/NHSEngland/AboutNHSServices/Pages/nhs-friends-and-family-test.aspx](http://www.nhs.uk/NHSEngland/AboutNHSServices/Pages/nhs-friends-and-family-test.aspx)

## Full authorisation of Coventry and Rugby Clinical Commissioning Group

NHS England has confirmed that NHS Coventry and Rugby Clinical Commissioning Group (CCG) has now been fully endorsed to purchase local health services on behalf of its 77 GP member practices across Coventry and Rugby.

When the new organisation was given the initial go-ahead to take control of the local NHS budget in April 2013, the CCG, together with other CCGs, was asked by NHS Commissioning Board to look more closely at its Constitution (how it is structured and operates as an organisation) as a condition of its authorisation.

The CCG undertook a full and detailed consultation with their GP practices and with the Local Medical Committee about their Constitution.

Following a recent review, NHS England has confirmed that NHS Coventry and Rugby CCG has now successfully met this final operating condition. This means that it is now fully approved to act as local commissioner of healthcare services for people in Coventry and Rugby.

Its responsibilities include management of an annual budget of over £500 million to purchase services from hospitals such as University Hospital in Coventry, and St. Cross in Rugby, along with community and mental health services.

### Become a dementia friend

Attend a Dementia Friends session in Coventry, where you learn a bit more about dementia and the small things that can be done to enable people to 'live well.' The next session is at 2:30 pm 13 March 2014 in Diamond Rooms 1 & 2, Council House. You can book at the dementia friends' website:

[www.dementiafriends.org.uk/session/4765#.UvJGLf1FAdu](http://www.dementiafriends.org.uk/session/4765#.UvJGLf1FAdu)

### Mental health: priorities for change

The Government has set out 25 priorities to improve how children and adults with mental health problems are cared for *in closing the gap: priorities for essential change in mental health*.

This action plan details how changes in local service planning and delivery will make a difference to the lives of people with mental health problems in the next 2 or 3 years.

The Government is working for mental health care to be on a par in importance to physical health. It has identified unacceptable practices to be addressed including:

- long waiting times,
- people being transferred long distances to get a bed,
- face-down restraint being used too often
- children being cared for on adult wards.

People with severe mental illness also face shorter life expectancy - this shows that more needs to be done to help those with mental health problems stay physically healthy.

From April, patients needing treatment for a mental health problem will be able to choose where they get their care. Choice will not be limited to an NHS provider - patients will also be able to choose a voluntary or independent organisation providing NHS services.

From next year, waiting time standards will also begin to be introduced for mental health.



### Francis Inquiry - one year on

Health Secretary Jeremy Hunt has spoken about how there have been positive changes in the NHS since the publishing of the Francis Inquiry report into Mid Staffordshire hospital. The Health Secretary highlighted a number of changes including:

- 14 hospitals in special measures are being turned round, with 650 extra nurses and nursing assistants hired, and 49 board level managers replaced
- Nearly 40% of hospitals now have the names of a senior responsible doctor above patients' beds
- 165 nursing students piloting a new training approach working as healthcare assistants before their nurse training
- 84 patient and public representatives have taken part in CQC inspections. In July 2013, 2,446 patients offered to take part in an inspection

Jeremy Hunt said: *“Twelve months on, we cannot expect to have solved everything or to have completely transformed the culture of the country’s largest and finest institution. But we have seen a real shift in priorities - new inspections, more nurses and a stronger voice for patients...”*

Yet the Patients’ Association has called for further change, saying: *“There is still a lot to change. There is a culture in the NHS where processes precede patient care”.*

In all, 290 recommendations were made by the Francis inquiry which set out a clear blueprint for the creation of a care system which ensures that the safety, dignity and well-being of patients is paramount

The government will publish a progress report on Francis in November this year.

## New Care Quality Commission's approach to inspection

The Care Quality Commission (CQC) have published their 'fresh start' document, setting out new ways for inspecting healthcare in the community, including more inspections carried out by larger teams and spending more time observing care.

Health services are now increasingly likely to be delivered in people's homes, health centres and community hospitals, making joined up care between different providers and agencies important. The new approach to inspecting these services will see teams include:

- expert CQC inspectors
- sector specialists and clinicians - for example nurses, health visitors, allied health professionals such as occupational therapists, GPs, paediatricians, sector directors and managers
- experts by experience - involving people who have experience of using care services.

You can read more about the new plans by visiting the CQC website:  
<http://www.cqc.org.uk/public/news/new-approach-inspecting-community-health-care>

## Introducing fundamental standards

Proposed changes to the Care Quality Commission's registration requirements set out fundamental standards that all health and care organisations must provide, by law.

A consultation asks for views on new draft regulations, which will implement these standards as legal requirements. All providers of health and social care will need to meet these fundamental standards, to be registered with the Care Quality Commission (CQC).

These have been developed in the light of the Francis Enquiry recommendations

following the Mid Staffordshire hospital scandal.

The standards make clear the basic level of safety and quality that should always be met. The CQC will be able to hold providers to account if they are not being met, including through the courts where appropriate.

Standards include that care and treatment must reflect service users' needs and preferences; uphold dignity and respect; be safe; and must only be provided with consent. Other standards focus on nutrition; dealing with complaints; and staffing levels.

View the standards and reply to this consultation at  
[www.gov.uk/government/news/consultation-to-improve-regulation-of-health-and-social-care-providers](http://www.gov.uk/government/news/consultation-to-improve-regulation-of-health-and-social-care-providers).

The deadline for views is **4 April 2014**.

### Developing new social care standards

As a result of a previous consultation 5 topics have been identified for the National Institute for Health and care Excellence (NICE) to produce guidance on:

1. falls - regaining independence for older people who experience a fall
2. care and support of older people - with learning disabilities
3. medicines management - managing the use of medicines in community settings for people receiving social care
4. regaining independence - short term interventions to help people to regain independence
5. adult social care - service users and carer experience of adult social care

## Nursing and midwifery revalidation

The Nursing and Midwifery Council (NMC) has launched a consultation about revalidation of nurses and midwives.

Amongst other criteria, revalidation will require every nurse and midwife to confirm that they continue to remain fit to practise by meeting the principles of the revised Code, have completed the required hours of practice and learning activity through continuing professional development and have received confirmation from someone well placed to comment on their continuing fitness to practise.

They are seeking opinions on how revalidation can be applied in practice to ensure it will work for all nurses and midwives. The NMC are also consulting on what a revised nursing and midwifery Code should include.

Visit the NMC website [www.nmc-uk.org/Get-involved/Consultations/](http://www.nmc-uk.org/Get-involved/Consultations/) to take part in the consultation and have your voice heard. This is part one of a two part, six month public consultation, which will run from January until July 2014.

### What do the terms "palliative" and "end of life care" mean to you?

The National Council for Palliative Care (NCPC) is working with the Social Care Institute for Excellence to find out what people think and feel when they hear the terms "end of life" and "palliative" care.

They have created a brief survey, and although the same terms may still be used, the responses will influence policy and help professionals to communicate clearly, with insight and sensitivity.

To find out more info and to respond to the survey go to the NCPC site: [www.ncpc.org.uk/terminology](http://www.ncpc.org.uk/terminology)

## Plans for 7 day NHS services

NHS England's National Medical Director Sir Bruce Keogh has published the findings year-long inquiry into NHS care amid concerns over higher death rates for patients treated on Saturdays and Sundays.

Research shows significant variation in outcomes for patients admitted to hospitals at the weekend across the NHS in England. This is seen in mortality rates, patient experience, the length of hospital stays and readmission rates. For example, the increased risk of mortality at the weekend could be as high as 11 per cent on a Saturday and 16 per cent on a Sunday, according to an analysis of over 14 million hospital admissions in 2009/10.

Sir Bruce is setting out new clinical standards and recommended an increase in the number of senior doctors working at weekends as part of a plan to improve hospital patient care.

## NHS coping well this winter

A King's Fund quarterly monitoring report has found that the NHS is coping well with winter pressures, despite some concerns that there could have been a crisis.

However, it reveals that a growing number of hospitals are heading into financial difficulty, with more than 1 in 5 set to be in deficit by the end of this financial year.

The survey suggests that the NHS will struggle to meet its target of delivering £20 billion in efficiency savings by 2015.

The survey also found that staff morale now tops the list of concerns identified by hospital finance directors.



## NHS waiting times for elective care in England

The National Audit Office has highlighted the increasing challenge to the NHS of sustaining the 18-week waiting time standard for elective care and the importance for trusts of having reliable performance information and shared good practice.

In a report to Parliament it concludes that value for money is being undermined by the problems with the completeness, consistency and accuracy of patient waiting time data; and by inconsistencies in the way that patient referrals to hospitals are managed.

The report also says that patients were unaware of their rights and responsibilities, for example, their right to be treated within 18 weeks of referral, or that they may be referred back to their GP.

The Audit Office also estimates that patients missing first outpatient appointments cost the NHS up to £225 million a year. They recommend that trusts should ensure their access policies are up-to-date, patient friendly and publicly available.

## Patient records database concerns

Last month NHS England started a mass mail-out to every household explaining a project to gather information from GP practices to help monitor the care patients get. Information is already gathered about what happens in hospitals, but linking those records with the information about what happens to patients when they are discharged back to the care of their GPs, has been difficult.

People have been given the chance to opt out. However concerns are rising that many people are struggling to understand what is happening and there have been cases where GPs have decided to opt out all their patients themselves. Dawn Monaghan, of the Information Commissioner's office, said: *"At the moment, we don't think it is clear enough on the website or in the information that has been sent out exactly what data is going to go and what is not going to go."*

But Tim Kelsey, from NHS England, said patients need not have concerns as the information would not be "identifiable".

## Campaign launched to encourage people to seek treatment earlier

NHS England has launched 'The earlier, the better' to encourage people to seek help early on, from their local pharmacist, if they're feeling under the weather. The campaign will run from 20 January to 31 March 2014 and feature national press and radio adverts.

*"If you feel under the weather, why not pop into the local pharmacy, visit [www.nhs.uk/asap](http://www.nhs.uk/asap) or call NHS 111 for advice on what to do. If the symptoms do not go away, then go and see your GP. Of course if it's an emergency then go to A&E."*

## Got a question about NHS or social care service or need help making a complaint about an NHS service?

The Healthwatch Coventry public information line can help:

Information line: 024 7625 2011

Information line email: [info@healthwatchcoventry.co.uk](mailto:info@healthwatchcoventry.co.uk)

NB to speak to the Healthwatch admin/central office team please use the contact details below not the information line number or email.