

**Healthwatch Coventry Steering Group pre-meeting**  
**At: 10.00 am on 31 January 2017**  
**Held At: Queens Road Baptist Church Centre**

**Minutes**

**Attendees:** John Mason (Chair), Carol Fawkes, David Spurgeon, Dennis Saunders, Derek Rawle (Koco Resource Centre), Des Patalong, Kyla Craig (Grapevine), Marcia Jarrett (Tamarind Centre), Nobby Clarke, Steve Banbury (VAC), Taruna Chauhan, Gaile Allen

**Staff present:** Ruth Light, Sam Barnett, Rob Allison, Louise Stratton, Natasha Ramrous

**Apologies:** Ed Hodson (CAB), Karen Keates, Moira Pendlebury (Age UK Coventry), Penny Collard (H2H Board)

## **1. Welcome**

John welcomed everyone to the meeting. As there were new Steering Group members everyone introduced themselves.

Steering Group members were given a list of all Steering Group members detailing their interests and groups they are already involved in for Healthwatch.

## **2. Maternity service queries**

Healthwatch uses an Issues Log to record information gathered about NHS and Social Care services. These can then be categorised and filtered to show themes. Ruth briefed the Steering Group on a meeting with managers at UHCW raising queries regarding maternity services which had flagged up on the Issues Log through Healthwatch ICAS work.

The Steering Group discussed the findings of the meeting and potential implications regarding resources/management and further information which had been sent by the Trust on its Better Births five year plan. Key points were that recent midwife recruitment had worked well and that a review of staffing ratios was said to be underway.

David said that no definite plans have been publicised to date but there are still rumours about George Eliot maternity unit closing and transferring to UHCW.

It was agreed to pass on the notes of the meeting with UHCW to CRCCG along with a letter highlighting that Healthwatch wished this to be considered alongside any intelligence the CCG had and as part of the engagement work related to maternity service in the Sustainability and Transformation Plan (STP).

Actions
<ul style="list-style-type: none"><li>Ruth to forward the stated information to the CCG</li></ul>



### 3. Information sharing on specific issues and service area

#### i) Continuing Healthcare

The Steering Group discussed a letter from NHS England detailing a new national programme to support the commissioning system around NHS Continuing Healthcare and recent media coverage suggesting that some CCGs were reducing funding and fears this will mean people being placed into residential settings rather than receiving support packages within their own home.

Nobby said that there are risk factors associated if there was a reduction in this budget.

Taruna wondered whether there might be a corresponding increase in personal health budgets.

Within the Healthwatch work programme there is a piece of work on hold which is related to Continuing Healthcare.

#### ii) CCG 360 degree review

The CCG 360 degree survey is an annual survey which aims to find out what is working well and where there are areas for improvement. Ruth proposed that the same process as in previous years was used: Ruth, John and David discuss the answers to the questions and then the survey is submitted. Steering Group members agreed for this to be the process for this year.

Actions
<ul style="list-style-type: none"><li>Ruth, John and David to discuss the 360 degree survey and submit answers</li></ul>



### 4. Report from Safeguarding Adults Board meeting

- i. Des gave a brief overview of the Safeguarding Adults Board. Dennis asked a question about DOLs and what made this area a success? Des said thinking back to the meeting this was with regards to the figures on the dashboard showing that there were fewer DOLs assessments.
- ii. Ruth has met with Lizzie Edwards, Safeguarding Boards Combined Business Manager and Joan Beck, Chair to discuss the constitution which requires all attendees to sign up to. It was agreed that for Healthwatch there would be additional wording drafted which means Healthwatch would not be signing up to the whole of the constitution.

- iii. Healthwatch will be sent a forward plan of topics for the Safeguarding Adults Board which will help with Healthwatch being more pro-active in able to provide discussion points / evidence at meetings.
- iv. Ruth said that she needs to follow up with Jon Reading about Healthwatch attendance at the Provider Escalation Panel (PEP) - the interagency meeting where intelligence is shared and if any action is needed because of this e.g. stopping placements to care homes.

<b>Actions</b>
<ul style="list-style-type: none"><li>• Ruth to contact Jon Reading about Healthwatch attending the PEP meetings.</li></ul>



Meeting ended 10:45

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**Attendees:** John Mason (Chair), Carol Fawkes, David Spurgeon, Dennis Saunders, Derek Rawle (Koco Resource Centre), Des Patalong, Hakeem Adedaja, Kyla Craig (Grapevine), Marcia Jarrett (Tamarind Centre), Nobby Clarke, Steve Banbury (VAC), Taruna Chauhan, Gaile Allen,

**Staff present:** Ruth Light, Sam Barnett, Rob Allison, Louise Stratton

**Apologies:** Ed Hodson (CAB), Karen Keates, Moira Pendlebury (Age UK Coventry), Penny Collard (H2H Board)

**Additional attendees:** Suman Ghaiwal - Equality and Human Rights Projects Manager, Kate Montgomery - Involvement Lead, Roma Holland, Sharing Information Programme Manager. Phil Jones - Resident, Vanessa Biddulph - Voiceability.

## **1. Welcome**

JM welcomed everyone to the meeting.

## **2. NHS Equality Delivery System (EDS)**

Kate Montgomery, Involvement Lead: Suman Ghaiwal, Equality and Human Rights Projects Manager attended the Steering Group to discuss Healthwatch involvement in the Equality Delivery System (EDS).

KM introduced the EDS. The EDS was developed nationally in 2009 as a system that helps NHS organisations improve the services they provide for their local communities and provide better working environments. Once a year the EDS framework is used on a portfolio of evidence in relation to four quality goals:

- Better Health Outcomes
- Improved Patient Access & Experience
- A representative and supportive workforce
- Inclusive leadership

The idea is to get the views of different stakeholders on this portfolio of evidence through a grading process.

CRCCG has also set up a new Coventry and Warwickshire Partners Equality Group

Kate asked if Healthwatch would like to be involved in the grading of the portfolio. RL said that Healthwatch would like to be involved but would need to consider the best way to do this. Kate said that the deadline for receiving feedback is end of February in order for this to be taken to the next Equalities Group in March.

DSa asked if there was national oversight of the evidence produced. KM replied that meeting the equality duty was mandated by NHS England.

NR asked whether the EDS framework feeds into CCG policies e.g. regarding Individual Funding Requests. KM said that there is a Governance process that is followed for establishing such policies and in order for it to be approved an Equality Impact Assessment (EIA) will be completed.

NC asked if there has been any forward thinking for the NHS workforce post Brexit? KM replied that this was part of national work by NHS England.

RL said that there is an equality duty factsheet which would be useful background for Steering Group members

Actions
<ul style="list-style-type: none"><li>• Equality factsheet to be sent to all Steering Group members</li><li>• Ruth to confirm plan to Kate regarding Healthwatch taking part in scoring the EDS (EDS - John Mason and Dennis Saunders volunteered for involvement)</li></ul>



### 3. Draft leaflet regarding patient record sharing

Roma Holland, Sharing Information Programme Manager for CRCCG attended the Steering Group to present information on a draft letter and leaflet regarding patient record sharing.

RH reported that at the moment in order for services to share information about a patient this is done via fax, letter and courier. The plan would be for this to be done using a secure online system.

Steering Group members were given a copy of the draft letter which is going to be sent out to every household to explain the new system and draft text for a leaflet which is going to be going into acute trusts, GPs, Local Authority settings and community settings.

TC said that GPs currently use different computer systems (Vision, EMIS), and asked if this will be an issue? Roma said that testing is currently taking place but with the Black Pear System this should be able to connect with all the different GP systems.

DP asked about the IT systems that are currently used for Social Care and whether there will be an issue? Roma said that at the moment the GP protocol has been agreed and gone through the legal requirements. Social care would be the next step but does not foresee any issues.

NR asked if there would be an easy read leaflet as the letter and leaflet are too complex, plain English is needed and with the option for people to be able to get the leaflet in different formats e.g. different languages

DSa asked whether a paragraph can be added to give people the negative (or other) side to sharing their information in order to give them a balanced view.

VB (Voicability) said that some patients with mental health problems may have concerns about what is written about them in their notes and possibly not agree with what is written. This could mean they may not want their notes shared between services.

KC asked if learning disability information would also be on the system e.g. annual health check and flagging systems. Roma replied not within the current plans

DSp asked if it was going to be possible for patients to view their own notes? Roma said this is part of the patient portal which is going to be a future phase.

RL summarised that plain English information would be best, for reading age 8/9, with options to find out more if people wanted, frequently asked questions can be useful.

RL offered further input from Healthwatch to support the process.

Roma said that it would be useful to have the views of Healthwatch to help take this forward and if an individual could be identified for this. RL said she would let Roma know who could help.

Actions
<ul style="list-style-type: none"><li>Ruth to confirm how Healthwatch will be involved in the information will be provided to people about sharing their record</li></ul> <p><b>Patient Record Sharing</b> - John Mason, Kyla Craig, Carol Fawkes and Taruna Chauhan volunteered</p>



#### 4. Minutes of last meeting and matters arising

Minutes of the last meeting were reviewed with three amendments:

1. On page 4 under paragraph four Dennis needs to be changed to **David**.
2. On page 4 in the last paragraph the sentence should read **the** key factor rather than **a** key factor
3. On page 7 in the actions box the word **Health** should be **Healthwatch**

#### Matters arising

There were no matters arising from the minutes

#### 5. CQC inspections primary care

Steering Group members discussed the CQC reports of the two Coventry GPs which were rated as inadequate. Nearly 11,000 patients are affected. The Steering Group noted the significance of the findings.

Steering Group members were also given a summary document of all the CQC ratings for Coventry services between April 2016 - January 2017. DP asked if this could be sorted by organisation category rather than date order.

TC asked whether the CRCCG played any part in inspecting GP services. RL said not at the moment but at the last Steering Group meeting Andrea Green said that an application has been put into NHS England to for the CCG to manage GP contracts from April 2017.

JM said that at a recent meeting he attended WMAS reported they had been rated as Outstanding. Thy has also said that they keep data with regards to number of falls in residential care settings but at the moment this data is not given to anyone. Ruth said this data would be useful.

Steering Group considered the latest inspection report for University Hospital Coventry and Warwickshire (UHCW) which is a follow up inspection to re look at outpatient and imaging which were previously rated as in-adequate. It was noted that further enforcement notices had been place on the Trust after this inspection.

<b>Actions</b>
<ul style="list-style-type: none"><li>• Ruth to ask our CQC contact if the CQC makes use of WMAS data on falls in care homes</li></ul>



## **6. Healthwatch Activities**

### **a) Work programme**

Ruth highlighted areas of work:

- i. Planning is taking place for the UHCW Enter and View visit to wards. A pilot visit took place to ward 42 on Friday 27 February
- ii. Two Care Home Enter and View visits have taken place and reports have been sent to care homes for comment
- iii. Pharmacy survey has closed - 502 hard copy surveys completed and 81 online surveys completed. Work is taking place to input the data
- iv. Sustainability Transformation Plan (STP) was published on 6 December. The Warwickshire and Coventry Councillors have said they are not going to sign up to the STP.
- v. The hospital discharge report is with UHCW to check accuracy. RL proposed that in order to have the report published in a timely manner that it should be published and sent to Andy Hardy for official response and to other organisations at the same time. The action plan and from UHCW can then be added at a later date. Steering Group members agreed.

Ruth raised two requests for Healthwatch involvement:

- i. It was agreed that Healthwatch would still participate in the PLACE inspections with CWPT as this is a very useful exercise

- ii. It was agreed that Ruth would take part in the piece of work which is out of hospital element of the STP

<b>Actions</b>
<ul style="list-style-type: none"> <li>• Hospital discharge report to be published and sent to UHCW for official comment</li> </ul>

**b) Reports from Healthwatch reps on external groups**

Steering Group members received reports from Healthwatch representatives on external groups and bodies for information.

**c) Quarter 2 report**

Steering Group members received the quarterly report which goes to Coventry City Council for information. DSa asked about the CRCCG Lay Person and how the person is appointed. Ruth confirmed this is a paid post in CRCCG and is appointed through an open application round.

**5. CQC Consultation on its next phase of regulation**

RL is going to be pulling together the response to the CQC consultation and will send this out to Steering Group members for approval. If there any Steering Group member who want to provide comments on the consultation they can send through their comments by the end of the week to RL.

<b>Actions</b>
<ul style="list-style-type: none"> <li>• Steering Group member to send through their comments on CQC consultation by the end of the week</li> <li>• Ruth to pull together the Healthwatch consultation response and send through to Steering Group members for approval</li> </ul>

**6. Any other business**

None

**7. Dates of future meetings:**

28 March	10 October
6 June	5 December
15 August	Annual meeting - 11 July (9:30 - 1 pm)

Meeting closed 12:35