

**Healthwatch Coventry Steering Group Pre-meeting
Minutes
Held online via Zoom
At 10:00 am on 18 October 2022**

Attendees: Edward DeVane, Catherine Smith, Last Mafuba (Inini), David Spurgeon, Claire Dale (CTHofE)

Staff Present: Ruth Light, Samantha Barnett, Fiona Garrigan, Ridhwana Sheikh

Apologies: Stuart Linnell (Chair), Steven Hill (Coventry and Warwickshire Mind), Christine McNaught (FWT), Apollo Economides, Sue Ogle (VAC), Rose O'Malley, Pamela Nkpuluaku

1. Welcome Introductions

ED apologies for Stuart Linnell (SL) who was unable to attend the meeting and informed everyone that he would be chairing today's meeting.

Edward DeVane (ED) welcomed everyone to the meeting.

2. Healthwatch Coventry Briefing document - summary of issues

Ruth Light (RL) explained that this briefing had been drafted in order to send evidence to the Integrated Care Board (ICB) as part of their desk research for the Integrated Care Strategy. The briefing draws together previous Healthwatch Coventry findings and recommendations which remain current issues for local people.

The group was asked to approve the publication of the document on the Healthwatch Coventry website. This was agreed by those who attended the meeting. Those who were unable to attend will be emailed to get their approval. ED said he is very interested in seeing how the ICS will respond to this report and how they will engage with Healthwatch Coventry.

Action
<ul style="list-style-type: none">• RS to email out paper A to the steering group members to get the remaining approval – completed and approved• Paper A to be published

3. Plans for enter and view visits

RL introduced paper B setting out plans to re-instate enter and view visits by a series of pilot visits to care homes for older adults.

The proposed focus of the visits is:

- How older people's health needs are met e.g. accessing medical/GP/hospital appointments. Dentistry, Podiatry, Occupational health/Physio, hearing aid and ophthalmology services etc.
- Person centred approaches – choice and control in day to day living, cultural awareness, activities, food and drink, visiting restrictions etc.
- The care home environment including dementia friendly design

The visits will use the methodology developed prior to the COVID-19 pandemic and it is a good opportunity to see how the facilities have been managed during the pandemic and how they are adapting.

Fiona Garrigan (FG) will be overseeing the Enter and View project. She has been liaising with volunteers who were previous authorised representatives and organising up to date training and DBS checks. Members confirmed they were happy with this approach.

The group decided that nominated Steering Group members would review the draft reports for care home enter and view. ED and Catherine Smith (CS) and Stuart Linnell will do this role

Steering Group members confirmed they wanted the established process for getting a response from the provider to recommendations prior to the publication of the report to continue. However, if there was delay by the provider or no response Healthwatch Coventry would publish the report.

Members present approved the plan for announced enter and view visits to care homes for older adults and delegated the day to day decision making and organisation of the visits to the Chief Officer and staff team.

Action
RL to email the Steering Group members to get the remaining approval [NB complete and approved]

4. Updates on developments and information sharing

Meetings with Healthwatch Warwickshire are continuing and positive progress is being made. A draft bid to the ICB for development monies is being created.

Healthwatch Coventry have been invited to attend the Adult Mental Health Collaborative meetings. Ruth Light (RL) is seeking further information to bring to the group to inform decision making around this.

Healthwatch Coventry Steering Group meeting Minutes Held online via Zoom At 11:00 am on 18 October 2022

Attendees: Edward DeVane, Catherine Smith, David Spurgeon, Claire Dale (Carers Trust Heart of England) Rose Uwins

Staff Present: Ruth Light, Samantha Barnett, Fiona Garrigan, Ridhwana Sheikh

Apologies: Stuart Linnell (Chair), Steven Hill (Coventry and Warwickshire Mind), Christine McNaught (FWT), Apollo Economides, Sue Ogle (VAC), Rose O'Malley, Pamela Nkpuluaku,

Last Mafuba (Inini) was called away.

1. Welcome Introductions

Edward DeVane (ED) welcomed everyone to the meeting. ED gave apologies for Stuart Linnell (SL) who was unable to attend the meeting and informed everyone that he would be chairing today's meeting.

ED asked if there were any declarations of interest. ED said that he works as a Policy Advisor at the Department for Health and Social Care, however he attends these meetings as a volunteer. There were no other declarations of interest.

2. Minutes of the previous meeting

Minutes from the previous meeting were distributed and reviewed by the Steering Group members. Those who attended have approved them as an accurate record.

Action
<ul style="list-style-type: none">RS to email the Steering Group members with previous minutes to get the remaining approval

3. Integrated Care System

A) Integrated Care Strategy – Priorities and enablers

Rose Uwins (RU) Senior Communications and Engagement Lead, Coventry and Warwickshire Integrated Care Board gave a presentation.

RU explained the vision and key aims of the Integrated Care System (ICS). RU explained the structures. The Integrated Care Board (ICB) is what the Clinical Commissioning Group (CCG) transformed in to, they are the organisation. The ICP is a partnership not an organisation and they are developing the Integrated Care Strategy. The Integrated Health and Wellbeing forum is the voice of Health and Wellbeing boards.

The Integrated Care Strategy and delivery plan is being produced to nationally set time frames. April 2023 was set so that the ICB can go into the next financial year prepared.

This Strategy is building on what is already in place, e.g. through the Health and wellbeing strategies and previous engagement activities. The ICB is leading a programme of engagement activity to gather input from different communities and groups to see what has changed since Covid.

RU shared some of the feedback they have received so far. This is the same types of things as gathered previously- an amplification of the issues. Also, people are generally struggling to access certain healthcare services.

ED asked if the cost of living crisis had come up as this was something newer. RU said that cost of living will affect people, especially those who can't afford to heat up their homes or afford meals. This will have an impact of people's health and wellbeing. However, the issue has not been raised by individuals or from any of the group feedback.

ED said it's good to work with existing health and well-being strategies but queried what had been changed with these strategies so far? RU said there is a lot of synergy between the two Health and Wellbeing Strategies and this is a Coventry and Warwickshire strategy to look at what we can fix together.

RL raised the ongoing challenges to GP access on Stuart Linnell's behalf. The variation in access has an impact on people in Coventry.

RL queried how the differences between areas within Coventry and Warwickshire would be reflected as looking across the whole area might hide the variation and inequality. RU said that it was not a one size fits all approach.

David Spurgeon (DS) said it is important to emphasise/focus on the 'integrated' element as we hear from people that the care is not joined up. A lot of people find that the information sharing between GP's and hospital isn't as good as it was supposed to be. DS also said there is a lack of money everywhere so services such as physiotherapy can't be delivered to a level to support people.

RL asked RU to confirm the timeline. RU responded December 2022 was the deadline for the first draft and for the finalised strategy plan April 2023 is the deadline. A public survey will be coming out soon.

RU confirmed that the ICB are responsible for the delivery of this project and the ICP and responsible for the strategy.

Action
<ul style="list-style-type: none">• RU to note the points raised by the group• RU to send details of the public survey and Healthwatch staff to promote

3b) Dermatology Services

RU gave a brief update on dermatology services. She said that there was a disparity between services available in Coventry and Rugby, and Warwickshire North and South Warwickshire.

Therefore, plans being developed to create a community dermatology service in Coventry. This is an additional service for Coventry residents.

There is a public survey for dermatology services. This is to help provide the services that are required for Coventry residents. The deadline for the survey is 28 October.

RL said the survey had been received however, due to the very short time frame there was relatively little Healthwatch could do to promote it. RL asked why the survey timeframe was so short.

ED asked if these new services were to help with re-prioritising of hospital waiting lists and if hospital services were being changed. RU responded that if people want to visit Walsgrave they still can, but this new service is for adding capacity.

Action
<ul style="list-style-type: none">• RS to circulate the link the dermatology survey to members

4) Healthwatch Activity

RL updated on recent work. Paper One provided an update on work across all the Healthwatch functions and priorities, including the information helpline, development work to support volunteering and work to ensure influence.

There was now agreement for Healthwatch attendance at shadow Coventry Care Collaborative meetings and for slot on agenda to share what we hear from local people.

Grant funded work

Information was provided on the successful projects agreed under the Healthwatch Coventry small grant programme for engagement activity by VCS groups. This outlined the aims of the pieces of work and funding awarded.

This is using salary underspent from vacant posts and aims to reach out to those who we don't usually get feedback from.

ED said this is really interesting and incredible work being done here and a good engagement charter using the leaderships that are already out there. ED thinks this is something that Healthwatch can be doing everywhere and maybe release some publications. Looking forward to the findings and to see what kind of responses we receive.

Healthwatch England issues we are monitoring

The group noted an update from Healthwatch England to show what they are monitoring and their recent focus, shared for information. ED said the priorities Healthwatch England were working on reflected the recent NHS priorities.

4. Reports from meetings

Reports from Steering Group Reps who attended any external meetings were shared.

DS raised concerns about the level of service user engagement for social care, as information given by ED's report of the scrutiny board meeting was that there were just 13 survey responses. DS said there was not enough engagement and the Adult Social Care User group he attended had limitations as there were a small number of user representatives on it. He would also like users to have input into the agenda. ED said he had raised at the scrutiny meeting that the methodology used was a big issue.

RL said it is positive they recognise there is a lack of engagement and a different approach is needed. They just need to find the correct method and identify resources.

DS raised the importance of gathering the input of informal carers. RL agreed and said it was important due to the level of need of social care users making it harder for them to give their views.

Claire Dale (CD) said we would welcome the opportunity to help gain feedback and Carers Trust have just done a co-production piece of work in Warwickshire.

RL said from interviews with service users a few years ago Healthwatch Coventry found that people were fearful of raising issues due to concerns about the potential impact on their care.

CD added that some of the fear comes from the terminology such as 'assessment'. Carers can be concerned they are being assessed on the care they are giving, instead of it being an assessment of the patient's needs.

ED gave an update on the Scrutiny meeting he attended. There has been significant increase in safeguarding concerns. There was an increase of 36% from last year and 82% on enquiries, which is the next stage after concerns have been raised. Pete Fahy assured that there was a dip during Covid and pre-pandemic. DS reflected if more reports were positive versus there being more issues.

5. Service updates

A) CQC inspection findings

A summary of recent Care Quality Commission Inspection Reports of Coventry services was provided, along with the more detailed reports for Holbrook's Health Team GP surgery re-inspection (rated requires improvement) and Melbourne House care home which had been rated as inadequate.

Ed said that issues in care homes were linked to management of the services.

RL said the Healthwatch Coventry had conversations to make sure commissioners and the CQC heard what patients were saying.

DS noted that the report said the Melbourne House care home had issue over a long period of time. RL said it is now in special measures and will be getting CQC input.

B) Update on NHS 111 provider

An update setting out a delay to the change of provider for NHS 111 in the Midlands was noted.

C) Pharmacy services update

RL gave a verbal update on community pharmacy changes. The most significant was the relocation of Superdrug from Hertford Street the lower precinct due to the pending redevelopment of the south of the City Centre.

RL added that the Pharmaceutical Needs Assessment of Coventry and Warwickshire had been published. This is sense check on services available in community pharmacies and on whether this meets local needs.

7. Information reports

SG members received web links to useful information and reports covering:

- Creating a highly usable and accessible GP website for patients
- PEOPLE FIRST: a response from health and care leaders to the urgent and emergency care system crisis
- Building capacity and capability for improvement in adult social care

8. Any Other Business

ED said that there was a national start with people conference. RL will find out more.

RL gave an update on the recruitment programme for new Steering Group members which was opened in September. This is for individual members – volunteers to fill places becoming vacant.

9. Date and time of future meetings

Next Steering Group meeting is on 9 December 2022.

- Members meetings start at 10am.
- Public meetings start at 11am.

All meetings to be held at the United Reformed Church, Warwick Road, Coventry, CV1 1EX

Date for February 2023 TBC. Please hold 7 February and 14 February.