# Healthwatch Coventry Steering Group Pre-meeting Notes

#### Held via Zoom at 10:15 am on 17 November 2020

**Attendees:** Stuart Linnell (Chair), Catherine Smith, David Spurgeon, Ed DeVane, Dennis Saunders, Apollo Economides, Sue Ogle (VAC), Christine McNaught (FWT), Hakeem Adedoja

**Staff Present:** Ruth Light, Louise Stratton, Samantha Barnett, Caron McKenna, Felicity Haines

**Apologies:** Ed Hodson (Citizens Advice Coventry)

SL welcomed everyone to the meeting.

# 1. Steering Group membership

Steering Group members received a paper proposing two Voluntary Organisation Co-options to the group from Coventry and Warwickshire Mind and Carers Trust Heart of England.

DSpu said that this is a good idea as there has been a lack of representation recently from organisations.

CM asked how many places there are for voluntary organisations? RL said there are three places but Steering Group members can co-opt voluntary organisations and individuals. CM agreed the co-options were a good idea.

DSau said that it is important that we don't lose the valuable input from organisations such as Grapevine who have had a place on the Steering Group. RL said that she agrees and that sitting on our Steering Group isn't the only way an organisation can input into Healthwatch work.

RL said she has had conversations with both organisations and there will be conflicts of interests due to the services they run. This will be managed through the conflicts of interest policy.

Steering Group members agreed for Coventry and Warwickshire Mind and Carers Trust Heart of England to be co-opted onto the group for one year.

#### Actions from the meeting

- RL to confirm to Coventry and Warwickshire Mind and Carers Trust Heart of England that they have been co-opted on to the Steering Group for one year
- Declarations of interest list to be updated

# 2. Feedback from Healthwatch England Conference

Staff members and three Steering Group members attended the Healthwatch England conference which took place online this year. This meant all of the plenary sessions were attended and some of the workshops. Some of the sessions were attended by more than one of us although due to online format we did not know this unless it was a workshop.

General feedback about the conference was that we didn't receive the agenda until last minute and it wasn't clear that there were some workshops for volunteers only. The workshops got booked up quickly too which didn't give us chance to attend everything that we wanted. Healthwatch England have requested feedback via an online form for all attendees.

Presentations from the conference have been saved on the Healthwatch England network site which can be accessed via the link below: <a href="https://network.healthwatch.co.uk/blog/2020-11-09/healthwatch-week-2020-what-did-you-miss">https://network.healthwatch.co.uk/blog/2020-11-09/healthwatch-week-2020-what-did-you-miss</a>

The Volunteers who attended the conference have also written up individual reports which will be circulated to everyone.

RL highlighted some useful discussion and information which came from sessions:

#### Learning around influencing

Working for change via influence is an important Healthwatch role. There was a session on how local Healthwatch can make the most in the Healthwatch network in our attendance at external meetings. Developing more of a structured plan for relationship building and influence was recommended along with using Theory of Change ideas to work backwards from identifying what we want to influence.

RL highlighted the amount of changes in terms of people in the local system, with a new CCG Accountable officer being recruited and new Chief executive of CWPT and others. Plus, legislation is expected to create integrated care systems and make other changes to NHS structures. Also the development of 'Coventry Place'.

#### **Healthwatch England priorities**

Healthwatch England highlighted a number of areas of work for us to bear in mind:

The Healthwatch England five year strategy is being refreshed and a consultation is coming out soon.

There are also operational elements: getting better data at sharing from local Healthwatch to Healthwatch England. There might be a new solution in the year. Software and IT solutions were discussed too in terms of our research work.

Regional campaigning was also highlighted as an area for development.

AE asked whether the role of Healthwatch in the social care reform was discussed. SL said this was touched on at the conference and that Healthwatch should have some input. RL said that there was a plenary session but this wasn't very interactive. All agreed that social care reform was still needed and that this needed to happen at a national level.

## Actions from the meeting

• SB to circulate volunteers reports from Healthwatch England conference

# Healthwatch Coventry Steering Group meeting Held via Zoom at 11:15 on 17 November 2020 and live streamed on YouTube

## Minutes

**Attendees:** Stuart Linnell (Chair), Catherine Smith, David Spurgeon, Ed DeVane, Dennis Saunders, Apollo Economides, Sue Ogle (VAC), Christine McNaught (FWT), Hakeem Adedoja, Steven Hill (Coventry and Warwickshire Mind), Sonja Woodhouse (Carers Trust Heart of England)

**Staff Present:** Ruth Light, Louise Stratton, Samantha Barnett, Caron McKenna, Felicity Haines

Apologies: Ed Hodson (Citizens Advice Coventry),

Additional Attendees: Rose Uwins, Coventry and Rugby CCG, Senior Communications & Engagement Manager

SL welcomed everyone to the meeting including Steven and Sonja as new co-opted members and asked if there were any conflicts of interest. None were noted.

# 1. Minutes of the meeting held on 6 October 2020

The minutes of the last meeting were agreed, and it was noted that actions were complete.

#### Matters arising:

At the last meeting we received some information about UHCW being successful in receiving additional funding for expanding A&E in relation to Covid-19 including an urgent treatment centre.

RL and SL met with UHCW Chief Executive and RL asked about this. What is being developed is more about physical expansion of what is already there and it was what the NHS describes as the 'minors' element that was being referred to as an urgent treatment centre. Therefore, an additional service is not being created on the site and the Walk in Centre remains at the City of Coventry Health Centre.

SL said that work is starting on the much awaited the car park expansion to the rear of the site.

# 2. Presentations from new Steering group members about the work of their organisations

A) Steven Hill Chief Executive of Coventry and Warwickshire Mind gave a presentation about the services they provide. The presentation is attached to the minutes.

## Comments and questions raised:

- i. SL asked how it was delivering the recovery academy online, is digitalisation the way forward? SH said that there are services where it would not be appropriate to be online but for the recovery academy it has flourished
- ii. DSpu said that he is impressed with what he has heard and asked what IAPT meant. SH said it is a service provided by CWPT which is a cognitive behaviour therapy approach with up to 20,000 people using this service.
- iii. A question was asked about the relationship with CWPT. SH said that they have a formal partnership with CWPT in terms of delivery of services. They have a very good working relationship but recognise they have a voice as independent organisations but feel comfortable to challenge each other when needed.
- iv. RL asked about the relationships they have with GPs and which PCNs they are working with. SH said that the relationship with GPs is important as sometimes it is overlooked as a gateway. This is a point where you can catch a person at the earliest point to divert them away from traditional methods. SH said that he would confirm the PCNs to RL but the ones he knows for definite are Sowe Valley, Unity and George Elliot.
- v. SL asked a question about workload for autism. SH said that at the moment there is still 2 year wait for autism. They have been brought in to do earlier work pre-diagnosis but working with the whole family unit not just the individual. They are on the 4<sup>th</sup> project for autism.
- B) Sonja Woodhouse Chief Executive of the Carers Trust Heart of England gave a presentation about their work and the impact of Coivd-19 on carers:
  - SW gave background about the organisation, she has been Chief Executive for Carers Trust Heart of England for 2.5 years and there is 200 staff who deliver regulated care. The organisation has been around for over 30 years and there has been a merger of Crossroads Care and Carers Centre.
  - The organisation delivers regulated care including domiciliary care, respite care, short break service and emergency service for carers and support adult and young carers.
  - Support is provided for the formal carer's assessment for adult and young carers. They provide information and advice, 1:1s, group support.

- They work on a social prescribing basis as it is what matters to the carer that is important.
- The organisation works closely with GPs and has a GP awards system in place to help GPs identify carers. The main issue though is carers don't identify as a carer which can be a barrier for them to access services.
  Work with Coventry hospitals has also taking place.

## SW said the pandemic had impacted carers in the early stages by:

- Practical issues such as providing passes and letters to carers who couldn't prove they were carers, shopping, prescriptions, linking people to the community or signposting to organisations for support.
- There was the added pressure of services being cancelled. Sometimes it had been the carer cancelling particular services i.e. domiciliary care as they didn't feel comfortable having people coming into the house and also under the assumption it would only last 6-8 weeks.
- Some carers feeling digitally excluded including elderly, BAME and also young carers as they may only have access to one laptop in their house and not feel comfortable asking for support in front of their parent who they care for.
- Another group who found it extremely difficult are working carers as not only did they have to work from home but they still had their caring responsibilities, they found they had no division between work and home.

## And as time has gone on:

- Increase in mental health issues for carers/cared for and deterioration of the people cared for leading to increased domiciliary care demand with higher levels of need
- Day centre service have started to re-open but with less capacity
- Carers Trust emergency response service for carers extended
- For the second lockdown a programme called Acts of kindness has taken place which involves taking out a small gift and having door step conversations with people whilst socially distancing.
- Also doing phone support
- £240,000 of additional funding has been received from Coventry City Council which has been used for a range of services including, virtual day centres, grief and loss support, providing support for online access as well as buying laptops and tablets for those who can't afford them.

DSau raised an issue related to carers who do not get the financial support they need and wanted to know if Carers Trust were campaigning? SW agreed that carers have been adversely effected and informed the group that they have joined up with Carers UK to campaign for a proper carer's allowance.

SL thanked Sonja and Steven for the presentations.

#### Actions from the meeting

 SH to confirm which PCNs Coventry and Warwickshire Mind are in contact with

# 3. Update from Coventry and Rugby CCG

Rose Uwins joined the meeting to provide an update to Steering Group members:

Healthwatch have received a letter to announce that their application to merge and become a single statutory organisation has now been conditionally approved by NHS England. Rose said that there is still work to do around meeting specific conditions.

At a previous Steering Group meeting there was a discussion about more detailed information being included in the constitution about engagement with the public. Rose said that she has discussed this with colleagues and this type of information would be included in the handbook. This is still being worked on.

A new Chair recruited for the merged CCG by December 2020.

SL asked if a decision had been made about the Accountable Officer role. Rose said that there is a preferred candidate but this needs to be approved by NHS England.

RL and Rose met prior to the Steering Group meeting to look at arranging a dedicated online session to discuss the Engagement plan. The aim is for this to take place in December and Steering Group members will be in invited to attend.

DSau asked what was happening regarding the STP? Rose said that the Health and Care Partnership Executive group still meet about the plan but focus recently has been around Covid-19.

Dspu asked if there was an agreement yet on where the HQ for the merged CCG would be. Rose said a decision has not been made yet. At the moment staff are still working from home.

There is a campaign being run at the moment talking about health services being open for business as usual and that we should have received information about this? RL said this has not been received to date, Rose said she would get Emma Hancock to send over.

Work is underway to scope a service change to move Level 2 neurology rehabilitation beds permanently to the central England rehabilitation unit in Leamington. This will involve engagement with patients and carers.

#### Actions from the meeting

- Engagement session to be arranged for December, Steering Group members to be invited
- Rose to arrange for campaign materials to be sent to RL

# 4. Representatives' reports

Steering Group members received the representatives reports for information.

ED attended the CCG Primary Care Committee. He said that he has no additional comments about the meeting he attended but thought it would be good to know the plans for this group going forward. Rose said that she would keep us informed.

ED said that there are a number of outstanding queries related to IT and it was agreed at a previous meeting that a separate meeting would be arranged with IT staff from the CCG. Rose said that she would pick this up and let RL when a meeting can be arranged.

CM asked how many voluntary groups attended the Joint PLACE forum? RL said this was a large group and the format of it is more presenting information and not much interaction, currently. VAC and WCAVA are on the group.

#### Actions

Rose to speak to IT colleagues to arrange a meeting

# 5. Healthwatch Activity

The report on Healthwatch activity since the last Steering Group meeting was received. RL highlighted the significant change within the staff team and resulting from bringing the information line service to the new Healthwatch team at VAC. This was meaning there was more of an internal focus at the moment.

# 6. Healthwatch England report on Hospital Discharge

Healthwatch England have produced a report with British Red Cross looking at peoples' experiences of leaving hospital during Covid-19.

DSpu noticed when looking at the findings, lack of communication was highlighted. RL said that when we did a piece of work looking at discharge to assess in Coventry, communication was one of the issues raised in number of different ways. The current process requires more rapid discharge processes.

ED raised a couple of points from the meetings he has attended with the CCG. The main problem with incident reporting was complaints about discharge. The post discharge testing has been suspended. Monitoring has been an issue and the only way data is collected is through POD but not too sure how effective this is.

# 7. Local publications

RL flagged additional reports for information about issues and delivery in Coventry:

 Coventry Director of Public Health's annual report Resetting our wellbeing www.coventry.gov.uk/downloads/file/34232/director\_of\_public\_healths\_an nual\_report\_20192020\_-\_resetting\_our\_wellbeing  Adult Social Care annual report <u>www.coventry.gov.uk/downloads/file/34348/adult\_social\_care\_annual\_rep</u> ort 201920

RL said if there any questions which Steering Group members would like raised, then to let RL know and she can do this at the external meetings such as the health and Wellbeing Board.

#### **Actions**

 Steering Group members to let RL know if they have any questions they would like raised regarding the local publications

# 8. Any other business

CM said that the National Research Group are running two webinars in December which Steering Group may be interested in attending. CM said she would send the information to SB to forward to Steering Group members.

#### **Actions**

 CM to forward information on the webinars to SB to send out Steering Group members

# 9. Future dates of meetings

26<sup>th</sup> January

30th March

1<sup>st</sup> June

10th August

12th October

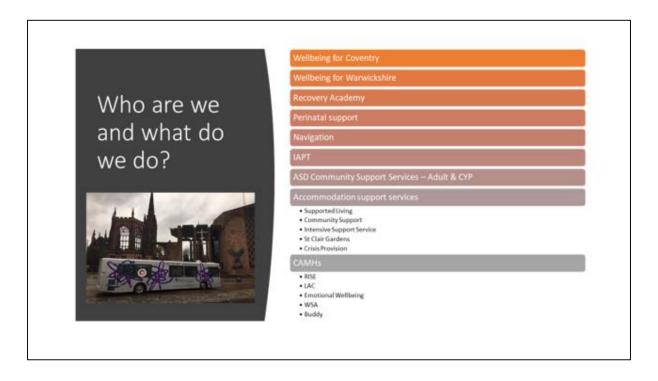
7<sup>th</sup> December

# Appendix 1 Presentation slides - Coventry and Warwickshire Mind



- · Established in 1966
- Leading third sector provider of MH services
- Turnover £7M
- 220 staff
- 180 volunteers
- Growing by average of 15% year on year





**6** formal partnerships

28 informal partnerships





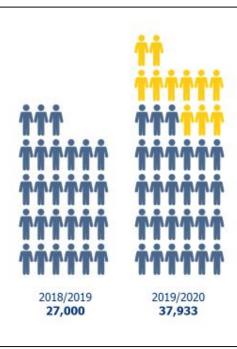












40% increase in people supported



# We monitor five KPIs

87% improved mental health, wellbeing and resilience

68% safer in their community

58% improved engagement in education, volunteering or employment

72% improved social participation

35% improved physical wellbeing



# 98% said intervention was beneficial



# Covid-19 Response/Current Activity



# Current Activity

Trying to keep the service user at the heart of everything we do...

#### Essential Services

- St Clair Gardens
- IRSS
- Housing
- Safe Haven
- Community Support
- GP Navigators
- 1-1s

#### **Working Creatively**

- · Recovery Academy
- Wellbeing Hubs
- IAPT
- Housing
- · Children and Young Peoples
- Mums in Mind
- · Buddy Service

#### Covid Secure Delivery

- Return to Work Booklet
- Building Risk Assessments
- Individual Risk Assessments
- · Safe Systems at Work
- Time to Talk
- · Service Team Meetings
- PPE

