

Healthwatch Coventry Steering Group
Pre-meeting notes
Held at Warwick Road United Reform Church Centre
At 10:00 am on 7 December 2021

Attendees: Stuart Linnell (Chair), Catherine Smith, Last Mafuba, Steven Hill (Coventry and Warwickshire Mind), Edward DeVane, Apollo Economides, David Spurgeon

Staff Present: Ruth Light, Owen Lawrence

Apologies: Christine McNaught (FWT), Steve Thomson (Carer's Trust Heart of England), Dennis Saunders, Hakeem Adedoja

Stuart welcomed everyone to the meeting.

1. Steering Group membership

RL confirmed that Foleshill Women's Training (FWT), Carer's Trust Heart of England (CTHoE) and Coventry and Warwickshire Mind have been offered the three VCS places on the Steering Group. Last Mafuba has been offered one of the individual places on the Steering Group. All new terms on the group start from 1 January 2022

There have been four applicants to the three individual places on offer. SL and RL will interview the candidates in the week beginning Monday 13 December to decide who is offered a place.

Dennis Saunders and Hakeem Adedoja are leaving the Steering Group. Healthwatch Coventry thanks them for all their hard work during their time as a Steering Group member.

2. Next steps from work planning meeting

Steering Group members were sent Paper B, notes of the work planning meeting held on 17 November.

Another work planning meeting will be held in January (date tbc), with the new Steering Group members present.

RL and SL met with Danielle Oum who agreed that Healthwatch will be part of the Integrated Care Board. It was also agreed that RL and SL would meet with Danielle Oum every 6 weeks. Danielle has also been flagging the need to resource Healthwatch for this role

SH asked if being on the board would be a conflict of interest for Healthwatch.

SL accepted this as a valid consideration however Healthwatch would not have voting rights on the Board.

3. Updates on emerging issues and information sharing

In the light of further communication related to Dermatology services it was agreed that Healthwatch make an information request to UHCW. SL will approve this and sign it off.

RL and SL provided an update on a meeting they had attended with the two lead GP's from Holbrook's Health Team, two representatives from the CCG and local medical committee.

Holbrooks are currently drafting and delivering their action plan after their inspection.

EDV asked how well the CQC is functioning. He had heard of difficulty recruiting inspectors.

RL said she had recently met with reps from three of the CQC teams including a new interim for primary care.

SL said that the lack of GP's and other staff is an issue for Holbrooks but that this is likely to be a long-term issue that affects more practices than just Holbrooks.

**Healthwatch Coventry Steering Group meeting
Held at Warwick Road United Reform Church
At 11:00 on 7 December 2021
Minutes**

Attendees: Stuart Linnell (Chair), Apollo Economides, David Spurgeon, Edward DeVane, Catherine Smith, Steven Hill (Coventry and Warwickshire Mind), Rose Uwins (C&WCCG), Last Mafuba, Blair Robertson (Coventry Place)

Staff Present: Ruth Light, Owen Lawrence

Apologies: Steve Thomson (Carer's Trust Heart of England), Christine McNaught (FWT), Hakeem Adedaja, Dennis Saunders, Sue Ogle (VAC)

1. Welcome

SL welcome everyone to the meeting.

2. Declarations of interests

There were none.

3. Minute of previous meeting and matters arising

The minutes of the October Steering Group meeting were approved as an accurate record.

SL asked if there were any matters arising:

RL asked if anyone had attended the Deloitte session discussed at the October Steering Group meeting and if they had any feedback. DSpu said that he had attended and that it was a good fact-finding session.

4. Coventry and Warwickshire Integrated Care System and Coventry Place

RU gave a presentation on current plans for the Integrated Care System, including its aims, progress and next steps.

Benefits of ICS approach included:

- Breaking down the barriers between organisations
- Improving people's wellbeing

RU outlined work to the People and Communities strategy and the 10 principles of working with communities within the guidance.

RU said that Care Collaboratives operating in four “places” will be responsible for shaping services to meet desired outcomes. 80% of budget is to be delivered by Care Collaboratives.

EDV asked how people will be recruited to Care Collaboratives? RU said that this was currently still being worked out and that Care Collaboratives will come into effect in 2024.

AE asked where Healthwatch would fit in the structures/diagram. RU said this would be at all levels and very much involved at Place.

CS said that COVID-19 has caused more co-operation between services and asked if this new structure supported this co-operation continuing. RU agreed that the increased co-operation between services has been a positive and said that she believes the new structure supports the continuation of this.

DSpu said that he was sceptical about how this new system will produce a seamless NHS and care. If systems do not provide money, they are going to struggle. RU said that there are some things we can control, others that we cannot. This system is a better fit than the current one.

BR said that the chair of care collaboratives will be embedded in the NHS. This gives more opportunity for looking at new ways of working.

SL said that new ways of working will not come about if the same people are doing the same roles in the same way. He also said that the priorities are in the wrong order in his view. The top priority should be productivity and value for money.

SH said there was other work going on, for example a mental health care collaborative idea.

RU said that her next steps were to develop a local mission statement for Coventry and Warwickshire engagement and involvement. The statement would emphasise cultural competence and no one size fits all approach. It would pool insight across organisations and focus on feedback. Feedback would be delivered in a “you said, we did” format. RU asked Steering Group members for their thoughts on this.

CS said that information between organisations needs to be shared and that sharing mindsets was also important.

EDV said that if there is a greater emphasis on providers you will get pushback from them.

RU replied by saying that this is why it was very important everyone signs up to the same vision.

RU said that she plans to pull together everyone’s views on why we engage and have a mission statement by 17 December and strategy to be submitted by end of March 2022.

BR explained his role as Coventry Place Programme Director.

RL asked what about the timescale for Coventry Place structures and how can Healthwatch help and be more informed?

BR said that there are five areas that need to be developed: leadership, programme management, communication, engagement, and data/intelligence. Healthwatch would focus on engagement and inform the approach.

EDV asked what is the ideal outcome of this structure?

BR said the understanding profiles of high-risk groups and best way to serve them and earlier interventions.

Action
Circulate the slides of RU's and BR's presentation to all Steering Group members.

5. Healthwatch activity

A) Work priorities

Steering Group members considered updates to Healthwatch Coventry work priorities recommended from the informal work planning meeting held in November.

Members approved all the changes and endorsed the approach of identifying areas emerging issues and fact finding.

B) Activity report

RL said that the activity report will be restructured in the new year now the work priorities have changed.

Two new members of staff are joining in December/January. One as Volunteer co-ordinator, the other as Communications Officer

OL is leaving Healthwatch in December, with Sam Barnett set to return from maternity leave in the same month.

Steering Group members noted Paper 5, Healthwatch England issues list.

6. Reports from Healthwatch representatives

Steering Group members noted Paper 6, giving reports from those attending meetings and groups on behalf of Healthwatch Coventry.

DSpu said that paragraph four of EDV's report on the Primary Care Commissioning which spoke about how some GP's were rated as 'good' despite not being

inspected for 6 years was a good example of EDV performing the function of scrutiny the group.

7. Service updates

Steering Group members were concerned about the CQC inspection findings of social care providers in Coventry summarised in Paper 8. The CQC had also rated the Life path trust supported accommodation as inadequate. Members raised concerns about what these findings meant for social care services and service users.

8. Publications

The following publications were highlighted to members as interesting:

- The state of health care and adult social care in England 2020/21, CQC www.cqc.org.uk/sites/default/files/20211021_stateofcare2021_print.pdf
- A public health model for mentally healthier integrated care systems, the Centre for Mental Health www.centreformentalhealth.org.uk/publications/briefing-57-better-together
- Adult Social Care under Pressure: Lessons from the Pandemic, Birmingham University www.birmingham.ac.uk/research/perspective/adult-social-care-under-pressure.aspx

9. Any other business

DSpu said that he felt that care homes are in crisis. Some staff are needing to be dismissed due to their lack of vaccination. The wages on offer are not competitive meaning more staff leave. This has created a ticking time bomb, with staff shortages set to get worse and worse.

RL said that the new social care plans released do not touch upon the staffing issues significantly.

10. Dates and times of future meetings

As this is the last meeting of the year, dates and times of future meetings are tbc.