

# Healthwatch Coventry Steering Group Pre-meeting DRAFT Notes

Held via Zoom at 10:15 am on 26 January 2021

**Attendees:** Stuart Linnell (Chair), Catherine Smith, David Spurgeon, Ed DeVane, Dennis Saunders, Apollo Economides, Sue Ogle (VAC), Steven Hill (Coventry and Warwickshire Mind)

**Staff Present:** Ruth Light, Samantha Barnett, Owen Lawrence

**Apologies:** Ed Hodson (Citizens Advice Coventry), Christine McNaught (FWT), Hakeem Adedaja, Sonja Woodhouse (Carer's Trust Heart of England)

Stuart welcomed everyone to the meeting.

## 1. Integrated care systems

Steering Group members received a copy of a national consultation paper about future structures of the NHS, and the future of Clinical Commissioning Groups (CCG's) and the response Healthwatch England had made to this consultation. Steering Group members had seen the consultation last year and RL advised she had attended a workshop organised by Healthwatch England about this consultation just prior to Christmas. A representative from NHS England had presented and responded to questions.

RL said local Healthwatch at this session had raised concerns that a move towards Integrated Care Systems (ICS) would reduce the amount of engagement with patients and the public, and that the structures were becoming less transparent.

Coventry and Warwickshire Health and Care Partnership had informed the Coventry Health and Wellbeing Board yesterday that they aimed to be confirmed as an Integrated Care System (ICS) by the beginning of April.

DSau said he agreed with the overall mission being stated but felt that Healthwatch needed to make sure that it balanced co-operating with the new structure with maintaining its independent voice.

Queries were raised about the definitions of 'Place', 'community' and 'neighbourhood' and Healthwatch not seeming to have a link or role to the strategic area above 'Place'.

EDV said that he had hoped Healthwatch England would be more critical in its response.

RL said that she is working on connecting Healthwatch Coventry to the emerging Coventry Place structures in order to make sure the voice of the local people is there.

AE said that he noted that Healthwatch was not consistently mentioned in the proposals and that Healthwatch should push to try and get a role as commissioning should be done as locally as possible. Harnessing the role of Healthwatch would help.

RL said that these points were fair and noted that the last few years had seen some steps some backwards in regards of public engagement.

Members were informed the new Chief Executive of Coventry and Warwickshire Partnership Trust had started in post and so had the new Accountable Officer for the merging CCG. An introductory meeting with the accountable officer was proposed, SB has been trying to arrange a date and RL has asked for Rose Uwins to assist with getting a date too. It was agreed to invite the Accountable Officer to the March Steering Group meeting.

### **Actions from the meeting**

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| <ul style="list-style-type: none"><li>• RL and SL to meet with CCG Accountable Officer</li><li>• Invite CCG Accountable Officer to 30 March Steering Group meeting</li></ul> |
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## **2. Recent developments**

SL and RL provided an update on the current level of the pandemic in Coventry based on information given at the Health and Wellbeing Board meeting the previous day.

Steering Group members shared information related to COVID-19 and the developing vaccination programme:

- RL said the staff team had put new content on the Healthwatch website to help people understand the different potential routes they had to getting vaccinated.
- RL is attending a community session run by the CCG after the Steering Group meeting which will advise on how to get the right messages and information out into the public.
- Members said that inequity around vaccines needs to remain at the forefront of thinking, as currently there is an emphasis on having to travel to vaccine sites by car, which is not possible for everyone. An outreach vaccination service is travelling to people who need vaccinations to help address this.

**Meeting ended at: 11:00**

# Healthwatch Coventry Steering Group meeting Held via Zoom at 11:15 on 26 January 2021 and live streamed on YouTube

## DRAFT Minutes

**Attendees:** Stuart Linnell (Chair), Catherine Smith (left at 12 noon), David Spurgeon, Ed DeVane, Dennis Saunders, Apollo Economides, Steven Hill (Coventry and Warwickshire Mind),

**Staff Present:** Ruth Light, Samantha Barnett, Felicity Haines, Owen Lawrence

**Apologies:** Ed Hodson (Citizens Advice Coventry), Sonja Woodhouse (Carers Trust Heart of England), Christine McNaught (FWT), Sue Ogle (VAC), Hakeem Adedjoja

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

SL welcomed everyone to the meeting and asked if there were any conflicts of interest. None were noted.

### 1. Minutes of the meeting held on 17 November 2020

SL stated that the minutes from the meeting held on the 17/11/2020 had been circulated and asked if everyone deemed them acceptable. Everyone agreed that they did.

RL said there was one point of accuracy that needed to be noted, on page 1 in the action box, there was a typo where 'declarations of interest' in fact read 'decelerations of interest.'

SL asked if there were any points not covered by the agenda that people wished to raise:

- RL said that the 'Declarations of Interests' log needed to be updated. Steering Group members were asked to fill in forms regarding their interest declarations and submit them.
- RL asked SH to share information regarding the PCN's that Mind had been working with.
- RL said that information had been received from the Clinical Commissions Group (CCG) about their campaign about NHS Business as usual, however this information was aimed at the population of South Warwickshire rather than Coventry.

## 2. Healthwatch Activity

RL provided an update to Steering Group members on Healthwatch Coventry work, reach and the information line service.

RL highlighted work on:

- providing local people with clear information about the COVID-19 vaccination programme and a meeting with the Chair of the CCG about this
- A pilot survey on SurveyMonkey to collect in-depth case study information about people's experiences of using NHS services. Twenty entries had been received. A report regarding people's lived experiences of using services will be produced from this.
- The time Stuart had given to a number of recruitment processes for the new combined CCG

RL noted that there should be a review of the current work priorities which were agreed by the Steering Group last June.

RL explained figures in the report regarding information line enquiries and the changes in approach since the beginning of November. The information line has moved from Citizens Advice into the new structure of Healthwatch team at VAC. There will be a reduction in people re-contacting the information service in relation their IHCA cases; it is better for people to be in communication with the service provider rather than having to communicate with them through Healthwatch.

The report also gave figures for different types of reach to local people. RL noted that social media reach totals were reducing and website usage was increasing.

A session planned with UHCW regarding their quality goals and strategy was cancelled due to COVID-19 pressures.

Owen Lawrence has started at Healthwatch, to provide maternity cover for SB.

### **HWE campaign because we all care - carers element**

RL said that Healthwatch England have launched a new campaign focused on gathering views from unpaid/family carers and the Chief Executive of the Carer's Trust has joined the Steering Group.

FH said she had been working with the Carers Trust on a joint piece of work, whereby the Carer's Trust collect case studies of experiences carer's have had accessing NHS or Social Care services in order to understand how COVID-19 has affected this. We are hoping to have results from this in March.

DSau asked how people access the advocacy service for NHS complaints. RL said that the information for this was on the Healthwatch website.

[This can be found at: [www.healthwatchcoventry.co.uk/help-making-complaint](http://www.healthwatchcoventry.co.uk/help-making-complaint) ]

#### **Actions**

- Review of work priorities to be scheduled

### **3. Policy and Consultation updates**

RL said there are 3 consultations open relating to:

1. A&E access standards, and what alternatives could be put in place to the A&E 4 hour waiting time target
2. Reformation of the Mental Health Act
3. The CQC future strategy.

A new rare diseases framework, focusing on how people with rare diseases are supported and treated had also been announced by the Secretary of State for Health and Social Care.

RL asked if members thought Healthwatch Coventry should respond to any of these or if it was more appropriate for Healthwatch England to do so with the option of people making individual responses if they wanted to.

AE said that he thought the phrase “waits of 12 hours or more in A&E will not be tolerated” did not provide information on what was happening to prevent long wait times or what would happen if wait times were that long. RL said that different methods have been used including some penalties for organisations being ‘in breach’ of their targets.

SL asked group members if there were any actions they wanted RL to undertake in relation to these consultations. There were none.

### **4. Hot topic - COVID-19 vaccinations**

RL said helping people receive clear information regarding vaccinations has been made a priority for the Healthwatch team. It is important that Healthwatch develops its understanding, so the public is given the right information. The situation is ever-evolving, meaning guidance can change quickly. A new section of the Healthwatch Coventry website has been created.

Some members of public have received an invitation to visit a vaccination hub based out of Coventry before being invited to their GP, leading them to think visiting the hub was the only way for them to be vaccinated. NHS England has now redrafted this letter following comments received.

Healthwatch also needs to understand the practicalities for people travelling to be vaccinated. People currently being called for vaccination could have mobility issues and may not have access to a car.

SL said people who receive their first dose will be automatically registered for a second dose within 12 weeks.

DSau said that in his view it was important to not oversell the vaccine's capabilities to the public. Initially it will protect vulnerable people, but it will not be able to prevent transmission yet. That will happen later when the majority of people are vaccinated. SL reiterated that people who are vaccinated still need to follow the lock down and social distancing rules. This message is nuanced and therefore needs consideration.

DSpu said that vaccination sites can be uncomfortable and queried why outdoor tents were being used instead of buildings and queried why larger and /or empty buildings, for example the old Ikea, were not being utilised.

DSpu said there was some confusion surrounding cohorts and who has priority for vaccinations, citing a 70-year-old that had already received their dose seemingly ahead of those who are older.

SL said that buildings may not be optimised for vaccine delivery, and that whoever owns a particular building may not want it used for COVID-19 vaccinations, making the situation more difficult. RU said that many sites were reviewed under a specific checklist, IKEA in Coventry City Centre was one site that was looked at which was deemed not suitable.

RU said that it is not possible for vaccination sites to store vaccines for a long period of time, meaning that any left-over vaccines were given to citizens able to travel to the site quickly at the end of the day. Leftover vaccines were still offered to people in priority groups. At the last time of recording, 62% of Coventry's over 80's had received a first dose.

RL said that there was evidence of the outreach programme in Coventry now vaccinating people in their homes. Progress will differ across the country, with different groups being vaccinated at different times due to geography.

SH said that over 100 staff had been vaccinated at Mind and the process was very good.

## **5. Coventry and Rugby CCG update**

RU said the CCG's main focus is COVID-19 vaccinations. There are 20 local vaccination centres in Coventry and Warwickshire being run by GPs or Coventry and Warwickshire Partnership Trust (CWPT) in some cases.

In addition to this, there are 4 hospital hubs which focus on hospital staff and frontline workers for health and social care.

A large vaccination site in Stoneleigh opened on the day of the meeting. Filming had been undertaken at Stoneleigh to give people practical information e.g., where the entrance and exit is.

Being vaccinated at these large vaccination sites will be quicker for people, however it is not the only method for people who have received this invitation to be vaccinated. CCG's key message is that large vaccinations sites are not people's only chance of a vaccine.

Outreach vaccination teams were being used to vaccinate care home residents, however it is not possible to vaccinate residents in a care home with a COVID-19 outbreak, until the outbreak has passed.

The CCG has been encouraging people to take the vaccine by holding sessions with GP's where members of the public can ask questions. For example: concerns about the vaccine's impacts on fertility. GP's were able to confirm that all studies agree the vaccine has no impact on fertility.

Digital media content had been produced with 5 videos discussing specifics around the vaccine available for sharing on social media. These videos were in the process of being translated into different languages e.g. Urdu.

RL said that the Healthwatch website would be updated with information regarding vaccines and that Healthwatch would seek to link with the CCG around questions being raised.

SL asked if family carers and domiciliary carers were included in priority groups.

RU said that domiciliary carers fell under frontline health and social care workers and would be included.

SL said that he thought family carers should be included as a priority group. RU said that the CCG has to abide with the priority groups that were passed down to them by the JCVI.

NB: Carers are listed in Priority Group 6 by the JCVI, but they will need to be registered with their GP or receiving Carer's Allowance for them to be invited.
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RL asked for an update on the CCG merger process. RU said that the merger was still on track for completion by 1 April 2021.

A new CCG website is being developed to be live for 1 April 2021 with a focus on accessibility and information. Once the website is up, the CCG would appreciate Healthwatch's help in finding out what information the public wants the website to be updated with.

RU reported that engagement has suffered due to COVID-19 pressures on the CCG, but it remains a priority and will be picked up again when possible.

RL asked for an update on the potential service change for neuro rehabilitation services. RU said the timeline had shifted slightly, but the impacts of this shift were not yet known. Interviews on Teams had been performed with people on wards with the support of a speech and language therapist. These findings will be written up and published over the next few weeks. They will then be sent to the Steering Group and next steps will be revealed.

#### **Actions**

- RU to share the digital media content with Healthwatch to help share via social media
- RU to forward report of engagement regarding neuro rehabilitation when ready

## **6. Representatives report of attendance at external meetings**

Steering Group members received the representatives' reports for information.

EDV said:

- The CCG now has a significant overspend in the GP budget but a significant underspend in other areas e.g., primary medical services.
- Quality of care in GP practices is difficult to update on as data collection is often suspended e.g. collecting patient satisfaction data. The POD call centre was meant to help with this but there had been an issue with updating the script for the call operators.
- Satisfaction with the flu and the COVID-19 vaccines was high.

## **7. NHS services**

Steering Group members were given reports for information:

### **A) Summary relating to the review of maternity services in Shrewsbury, Telford and Wrekin**

RL said there are actions for every NHS system and organisation that have maternity units, these are explained in the summary paper. The local Quality Surveillance Group had discussed this and provided assurances about what they were doing in response to this.

### **B) Local pharmacy changes**

An update on recent pharmacy contract changes was noted.

### **C) HWE report Dentistry and the impact of Covid-19**

The latest Healthwatch England report related to the impact of COVID-19 on dentistry. DSpu said that there were not enough dentists offering NHS services and that this caused an increase in inequality. DSpu then asked if there was any local information relating to this.



RL said that this had not been flagged up to Healthwatch Coventry but recognised that this did not mean that there were not issues. Some recent comments had been received about routine NHS appointments starting at some practices. There are additional pressures on the capacity dentists due to COVID-19 and the need to deep clean between treatments and use full PPE, which means that dentists were not able to see as many patients as they normally would. Coventry has NHS dentists but the number of people on 'dental lists' for NHS treatment is large.

## **8. Research publications**

RL flagged additional research reports for information:

- The State of Ageing in 2020 [www.ageing-better.org.uk/state-of-ageing-20](http://www.ageing-better.org.uk/state-of-ageing-20)
- A TELLING EXPERIENCE: Understanding the impact of Covid-19 on people who access care and support - a rapid evidence review with recommendations [www.thinklocalactpersonal.org.uk/covid-19/tlap-insight-group/TIG-report/](http://www.thinklocalactpersonal.org.uk/covid-19/tlap-insight-group/TIG-report/)
- CQC Covid-19 insight report [www.cqc.org.uk/publications/major-report/covid-19-insight-issue-6](http://www.cqc.org.uk/publications/major-report/covid-19-insight-issue-6)

## **9. Future dates of meetings**

Pre - meet for members at 10:15. Meeting public at 11:00 am  
30<sup>th</sup> March  
1<sup>st</sup> June  
10<sup>th</sup> August  
12<sup>th</sup> October  
7<sup>th</sup> December

**Meeting ended at: 12:15**