



Minutes of the Board Meeting

Date / Time: 11th May 2016, 19:00-21:00

Venue: The Meadows Community Centre, Family Wing, 1 St Catherine's Road, CAMBRIDGE, CB4 3XJ.

Present: Val Moore (VM)- Chair
Mike Andrews (MA), Graham Jagger (GJ), Karen Begg (KB), Ruth McCallum (RM), Sue Westwood-Bate (SWB)

CEO Sandie Smith (SS)
Trisha Napier, (Minutes)
Julie McNeill (JM), Information Manager

1 Introduction and Apologies

1.1 The Chair opened the meeting and welcomed all present.

Apologies were received from Non-Executive Director Mike Hewins, and Guarantors Anne Campbell and Victor Lucas.

2 Declarations of Interest

2.1 None recorded

3 Minutes of Previous Meeting 20 May 2015

3.1 Approved as a true copy with all actions complete.

4 Action Log

4.1 SS referred to Action Log:

Point 4.1: SS asked that this action be brought to the main Board Agenda.

Action: Carry forward primary care to next Agenda.

Point 5.1 OPACS review: The learning event was successful. A press release will be issued. Healthwatch Cambridgeshire will produce a timeline regarding the contract and documentation on what happened.

Point 7.2: Safeguarding: Informal interviews are being held for Safeguarding Adults Board representatives.

Point 7.2: Perception Survey: Results will be reflected in the refreshed Strategy and Work Programme.

Point 7.2: Gypsy, Romany and Traveller Report: This will be reported further at the AGM.

Point 8.5: Research Opportunities: VM and RM will attend the Forum convened by Addenbrookes Hospital regarding public/patient involvement in research on June 21st.

Point 10.5: Feedback Centre: Awaiting full implementation in other Healthwatch.

Action: Carry forward Feedback Centre to next Agenda.

5 Chair's Report

- 5.1 The Chair highlighted the CQC ratings section of her report. VM explained that primary care inspections are not complete yet. The results of The East of England Ambulance Service NHS Trust (EEAST) inspection in April 2016 will be available soon. The table also shows care homes, domiciliary care, hospices and homes for people with learning disabilities.

The table also included Peterborough and Stamford and Queen Elizabeth Foundation Trusts, as Cambridgeshire residents use those hospitals.

- 5.2 Paragraph 12: The Sustainability and Transformation Programme is ambitious, extensive, and now has clinical leadership throughout. SS has asked the CCG to show how patients and public are involved throughout the programme. Healthwatch Cambridgeshire cannot attend all meetings and input from patients and public is essential.

The Board noted the report.

- 5.3 A question was raised regarding the Better Care Fund and whether there are any specific targets to meet by 2020. SS replied that there were regarding admissions and confirmed that there is join-up between the Better Care Fund and the Sustainability and Transformation Programme.
- 5.4 Another question asked why Papworth wasn't included in the CQC ratings table. This was an omission. It was explained that their overall rating was good and will be included in future reports.
- 5.5 At the end of the item, a member of the public raised a question regarding two new drugs which become mandatory funded this year costing £2m.

The member of public was asked to supply Healthwatch Cambridgeshire with information.

6 CEO Report including Work Programme Summary 2015/16

- 6.1 SS reported that the Community Learning Event, organised to assist stakeholders with setting a way forward for the Older People & Adult Community Services Contract (OPACS), went very well.

Section 7: A report by Healthwatch Cambridgeshire regarding focus groups to inform the redesign of Child and Adolescent Mental Health (CAMH) has been sent to CCG. This will be published shortly.

Section 8: Enter and View inspections have been carried out at three outpatient's clinics. Reports will be available within two weeks.

Section 10: SS was pleased to report that NHS England came to talk to Healthwatch Cambridgeshire regarding procurement of primary care provision in NW Cambridge.

Section 11: Healthwatch Cambridgeshire supported a recent workshop organised by Encompass which highlighted the poor experience of older LGBT people in care homes. We will work with other organisations to see what can be done to address this.

Section 12: Annual Outcomes and Strategies listed. All the information has been previously reported to the Board throughout the year.

The slides from the Strategic Review meeting, attended by Board members, staff and volunteers, are included with the CEO's report for information.

The Strategy and Annual Work Programme to be approved in July.

The Board noted the report.

- 6.2 The Chair asked the CEO what had satisfied her the most over the last year? SS responded by saying that it was the Engagement Events, of which there were over 80 in the last year.

The Chair also asked what challenged the CEO the most? SS replied capacity and focusing on priorities.

7 Strategy and Work Programme

- 7.1 VM informed the meeting that a review of the strategy was recently undertaken involving the Board, staff and volunteers. SS highlighted the priorities which are on pages five and six of the Strategy.

- 7.2 VM invited comments regarding the Strategy and draft Work Programme.

A Board member commented that contextual themes helpfully provides Board members with the rationale for involvement at key meetings, and the list in the Chair's Report indicates Trusts marked inadequate or needing improvement helps us to prioritise Trust Board and associated meetings.

It was suggested that a Non-Executive Director be selected by experience to champion each of the four topical areas, and to contribute where appropriate to the contextual strategic themes.

- 7.3 The Strategy incorporates Healthwatch England’s Quality Statements as a way of explaining how Healthwatch Cambridgeshire will achieve its targets. They will be used with the Healthwatch Cambridgeshire commissioner to evidence our progress.

8 Information and Signposting Service Report

- 8.1 JM presented the report highlighting the Key Issues and update for this period.

- There has been a reduction in contacts but the calls are frequently complex
- There has been a considerable rise in the different organisations signposted to
- A large number of experiences were collated via Enter & View inspections at outpatient clinics and visits to Hinchingsbrooke Health Care NHS Trust
- Developing relationships with other information providers is a priority as well as developing a full picture of health and care issues to enable challenge
- Point 15 - shows the majority of people contacted the Information and Signposting Service following contact with a member of staff or volunteer
- Point 18 - on a number of occasions we have provided a ‘warm hand-over’ to other organisations
- Access to mental health services for both adults and children and young people (CYP) remains a concern
- Many people are reluctant to complain in case it affects their care
- People remain generally happy with GP services but the main issue is trying to get appointments.

VM thanked JM for the report.

- 8.2 GJ observed that it was a key role for Healthwatch Cambridgeshire to be there for people and encourage them to raise concerns and share experiences. Signposting is central to all Healthwatch Cambridgeshire does.

- 8.3 VM: Access to Mental Health services is a concern and although people report their GP care, it is apparent that getting appointments is difficult. SS agreed. The difficulty in getting appointments is a driver as to why people use the walk-in centres and A&E. SWB said GP practices are merging and federating. New ways of supporting people are coming forward.

- 8.4 At the end of the item a member of public raised their concern about the waiting time for mental health services and the time taken for a response to a complaint to PALS.

Healthwatch Cambridgeshire are aware and have highlighted this to the Trusts.

- 8.5 A member of the public raised an issue where a family member with borderline personality disorder waited 10 months for treatment, causing stress for the person concerned and also their family.

JM confirmed this is a known concern. We have been informed of a new service model and will monitor experiences.

- 8.6 Another point raised was regarding GP access where an older person requested a GP home visit but was told to either attend the surgery or book a telephone consultation. They commented that it is a flaw and there are inconsistencies between surgeries.

SS asked for experiences to be reported so a full picture can be compiled.

- 8.7 Volunteer Nick Roberts asked if it would be useful to feedback information from opportunities shared by the Consultation Network.

Action: JM to add a footnote to email notifications to the Consultation Network, asking for feedback when taking up opportunities to get involved.

9 Public Questions

9.1 Question 1

There are reports across Cambridgeshire about the difficulty in getting GP appointments due to a growing shortage of GPs and population demographics. Will it be possible for Healthwatch to ascertain what the actual situation is?

SS: Healthwatch Cambridgeshire receives many comments which show that the appointment system is inconsistent. This is reported to the Joint Primary Care Co-Commissioning Committee (CCG and NHS England). The Primary Care item at the next Board meeting will set out the position with some options for Healthwatch Cambridgeshire action. Primary Care is a priority area for Healthwatch Cambridgeshire but careful consideration is required to make sure that what we do is helpful and informs service improvement.

9.3 Question 2

National media has been full of reports re inadequate funding of mental health services and in some cases criminally poor care. How is Healthwatch monitoring local services?

Healthwatch Cambridgeshire receives experiences about poor access to Mental Health services. These are collated and fed back to providers, commissioners and regulators.

A new crisis service has been commissioned by the CCG, the Sanctuary Project. Healthwatch Cambridgeshire will look at how the Sanctuary Project is working and if successful, that it is maintained after the initial funding has expired.

Healthwatch Cambridgeshire is working closely with the Service User Network (SUN) to ensure that patient and public voices are heard and used to inform service improvement.

AOB

VM informed the meeting that Non-Executive Director Mike Andrews will retire from the Board at the AGM. VM thanked MA for the support and help given to both Ruth Rogers and herself during his time on the Board.

MA replied that it had been a privilege to work with the Healthwatch Cambridgeshire Board, staff and volunteers.

VM closed the meeting by thanking everyone for their attendance.

Date/venue of next Meeting:

AGM: 13th July 2016 19:00 - 21:00
Swavesey Memorial Hall, High Street, Swavesey, Cambridge, CB24 4QU