

Minutes of the Board Meeting

Date / Time: 13 July 2016 19:45-21:00

Venue: Swavesey Memorial Hall, High Street, Swavesey, CB24 4QU

Present: Val Moore - Chair
Non-Executive Directors (NEDs): Mike Andrews (MA), Mike Hewins (MH), Ruth McCallum (RM), Sue Westwood-Bate (SWB)

Sandie Smith, CEO (SS)
Angela Grief, Minute Taker (AG)

Apologies

Apologies were received from Non-Executive Directors Karen Begg and Graham Jagger, and Guarantors Anne Campbell and Victor Lucas.

1 Minutes of Previous Meeting 16 March 2016

Approved as an accurate record.

2 Action Log

- 2.1 Sandie Smith reported that Healthwatch Peterborough will launch the Datify Feedback Centre during July. We will learn from their experience before scheduling implementation at Healthwatch Cambridgeshire.

There were no further outstanding actions.

3 Chair's Report

- 3.1 The Chair presented her report which focussed on the role of Healthwatch Cambridgeshire in the Cambridgeshire and Peterborough Sustainability and Transformation Plan (STP); a shared strategy for a sustainable health and care system for the next five years.

The development of the plan is led by the Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) and involves health and social care partners, and representatives from patient groups. Work to close gaps in access, quality of care and finance is organised through workstreams.

The STP builds on the consultation carried out for the Fit for the Future programme. Further public consultation will take place as the programme is implemented.

The CCG's STP was submitted to NHS England in June.

3.2 Healthwatch Cambridgeshire NEDs and Chief Executive are involved in the workstreams and more involvement is planned as work develops.

3.3 We are working closely with the CCG to maximise patient and carer input to ensure their views influence change. A meeting to discuss how we can further support patient engagement is scheduled later this month.

3.4 The Board noted the report.

3.5 SWB asked if there are questions to be asked about engagement with maternity services.

SS responded that we will ask questions about public and patient involvement as part of the discussion with the CCG scheduled for July.

3.6 MH said the STP was discussed at a recent Cambridge University Hospitals (CUH) Board meeting and it was suggested there was a gap between STP analysis and trust strategic planning.

VM said the plan was built on good analysis from the Fit for the Future programme and identified gaps in access, quality of care and finance. Work streams were established to address the gaps. Shared working with Healthwatch Peterborough and CCG will provide opportunities for patients to get involved and raise concerns.

Comments from the floor were invited:

3.7 Nick Roberts congratulated the Chair on the number of meetings attended during May and June.

3.8 Jonathan Wells, Rethink Mental Illness, commented that feedback from the care workstream was positive although capacity was a concern.

Jess Bawden, CCG, acknowledged the concern and hoped that fears would be allayed when the interim plan was published 20 July. The CCG will invite feedback for two months before finalising September/October. The CCG will be publishing public information leaflets later this month.

4. Healthwatch Cambridgeshire Strategy Refresh May 2016

4.1 Following feedback from stakeholders, amendments have been made to the contextual themes (sustainability, integration, access to services and new communities) and the priority areas of work:

- Mental health
- Children and young people
- Primary care
- Discharge from hospital

Key performance indicators and principles remain the same. Work is underway in all areas.

4.2 The Board approved the Strategy.

5 CEO Report including Work Programme Summary 2015/16

5.1 Sandie Smith presented the report highlighting the summary of work during the first quarter.

5.2 Kate Hales told the meeting about the Enter and View visits to three outpatient clinics at Addenbrookes Hospital (CUH), thanking our volunteers (Enter and View Authorised Representatives) who play a vital role in these visits. Reports for each clinic and a summary have been published. Points raised with CUH have been welcomed and steps will be taken to improve services.

5.3 Our involvement in the CAMHS is ongoing. We received funding for a series of Focus Groups and will be talking to young people to gather views on the service redesign. We will continue to monitor progress of the redesign and link with other Healthwatch doing similar work.

5.4 SS worked with Healthwatch England to design a Toolkit to help other Healthwatch to ask their Local Authorities about waiting times for Social Care Assessments. This issue has now been taken up by Cambridgeshire County Council Adult Social Care Forum who will also be monitoring the situation.

5.5 A tea party was organised for volunteers during Volunteers Week to say 'Thank You' for their commitment and contribution. We used this opportunity to feedback our achievements, made directly as a result of their work. The story of one of our volunteers, Emma Amez, was featured by Healthwatch England as part of their volunteer celebration.

5.6 The Wheelchair Services report is due to be published at the end of this month. The report collates feedback from people who use wheelchairs and will be used by the CCG to inform the commissioning of a new service.

5.7 The Consultation Network has circulated more than 40 opportunities April - June to get involved in consultations about health and social care services. For a wider reach, the distribution list will be combined with the E-news distribution list which has increased to 1000.

5.8 MH commented that Sandie Smith should be congratulated on the amount of work and achievements made during the first quarter.

5.9 Referring to Point 14, SWB asked if there would be a review of audiology services. SS confirmed that this issue was raised with the CCG Chief Officer and the contract has been extended to October whilst a review is

carried out.

5.10 The Board noted the report.

6 Finance Report

6.1 Sandie Smith presented the report which was in line with projected spend.

6.2 In 2014/15 Healthwatch Cambridgeshire offered a reduction of 10% in core funding from the CCC. Since approving the Annual Budget in March, funding for the Youth Engagement Worker has been secured from the CCG, Cambridgeshire County Council and Peterborough City Council. Accumulated Reserves will fund additional engagement work planned for 2016/17.

6.3 The Board noted the report. It was agreed that future budget reports would reflect the spending covered by the Reserves.

7 Primary Care Report

7.1 The report, presented by Sandie Smith, explains work currently in progress regarding Primary Care. Not surprisingly it is the single largest service which Healthwatch Cambridgeshire receives feedback on.

7.2 The findings of the First Steps to Health survey were published June 2015. Healthwatch Cambridgeshire made a number of recommendations for NHS England, the CCG and GP Practices. Progress has been made against the recommendations for the CCG and NHS England. It has however been challenging to progress the recommendations for GP practices as services are locally commissioned, planned and delivered.

7.3 People tell us that Sustainable General Practice is a concern particularly in population growth areas. We will continue to gather intelligence and feedback to the Joint NHS England/CCG Co-Commissioning Committee and the STP process to influence decisions.

7.4 Talks at some Patient Participation Groups (PPGs) have resulted in constructive discussions. The paper proposes that we extend our work through liaison with Practise Managers to offer support in developing their PPG. A test site is underway with one practice. Feedback is very positive and a case study will be written up.

The Board discussed the capacity of the team to manage this and it was agreed that the Board would work with the team to cover areas.

Action:

- SS to circulate the link to the National Association for Patient Participation (NAPP) to the Board
- NEDs to look at patient participation in their own area

- Report back to the Board in November

The Chair invited comments from the floor.

- 7.5 Nick Roberts said NHS England published the results of a GP patient survey 7 July. (Headline Findings can be found [here](#)).
- 7.6 Sandra Ferrelly commented that there was a cost for Patient Participation Groups to join the NAPP. Membership of groups is largely made up of older generations and would benefit from younger members. Could Healthwatch Cambridgeshire help to promote the groups to younger people?

Action:

SS to include Patient Participation Groups on social media in the PPG development package.

8 Public Questions

8.1 Submitted Question:

Patient rep volunteers attend MSLCs (Maternity Service Liaison Committees) to improve our communities' maternity and neonatal services, to bring about patient-led changes. I want to know why Healthwatch Cambridgeshire does not attend the local MSLCs?

Sandie Smith responded that Healthwatch Cambridgeshire are aware of those issues and compiled a report “Engaging Women in the Provision of Maternity Services in Cambridgeshire” in 2014. The findings of this report was fed into the recent National Task Force.

The role of Healthwatch is not to participate in Patient Experience Groups but to support them. For example, we have worked closely with Addenbrookes and Hinchingsbrooke Hospitals as those Trusts are in Special Measures. We attend the PEGs annually or when invited to advise and update them about the work of Healthwatch Cambridgeshire.

Currently, there is concern about service provision at the Rosie for children requiring tongue-tie services, feedback is being collated to put to the CCG.

The Chair closed the meeting at 9pm and thanked everyone for attending.

Date/venue of next Meeting:

14 September 2016, 7pm

The Meadows Community Centre, 1 St Catharine’s Road, CAMBRIDGE
CB4 3XJ