

## Chair's Report

### Purpose

1. This report sets out public activities carried out by the Chair since the last Board meeting and the main issues noted.

### Key issues

2. Section 7-11 provides an annual summary of the quality of care described by Care Quality Commission (CQC) reports for locations of services in Cambridgeshire.
3. Section 12 summarises other important matters about the local health and social care system.
4. Section 13 notes potential joint working opportunities raised in meetings held during this period.
5. The appendix lists the Chair's external meetings from 1<sup>st</sup> March to 30<sup>th</sup> February 2016.

### Action required by the Board

6. The Board is asked to:
  - Note the report.

### Author

Val Moore, Chair

11 May 2016

## Care Quality Commission ratings in Cambridgeshire

7. As part of a national network supported by Healthwatch England we have direct links with regulatory bodies including the CQC. During the past three years Healthwatch Cambridgeshire has worked closely with the local CQC teams. In 2015 this work was acclaimed nationally as good practice through an Award.
8. Local Healthwatch role includes:
  - membership of regional Quality Surveillance Groups
  - supporting calls for patient and service user experience pre- inspection
  - as part of Improvement Oversight Groups post inspections, and
  - escalating any other concerns.
9. The Chairs report identifies key CQC interventions or judgements as they occur throughout the year.
10. The end of year position for Cambridgeshire area is summarised for Care Organisations and NHS Trusts in the tables below.
11. Please note - we do not have complete data for General Practices as they have not all been inspected, and some received inspections only (not ratings) as part of the pilot process. East of England Ambulance Service NHS Trust was inspected during April 2016 and the report is not yet published. These will be reported in the future.

*New approach ratings of active Social Care Organisation, locations in Cambridgeshire (data source as at 2<sup>nd</sup> March 2016)*

Outstanding	1
Good	110
Requires improvement	36
Inadequate	3
Total	150

Healthwatch Cambridgeshire, The Maple Centre, 6 Oak Drive, HUNTINGDON, PE29 7HN

*Cambridgeshire NHS Trusts CQC ratings, 31 March 2016*

Trust	Cambridge University Hospitals NHS Foundation Trust	Cambridge-shire Community Services	Cambridgeshire & Peterborough NHS Foundation Trust	Hinchingbrooke Health Care NHS Trust	Peterborough and Stamford Hospitals NHS Foundation Trust	The Queen Elizabeth Hospital King's Lynn NHS Foundation Trust
<b>Overall Rating</b>	Inadequate	Good	Good	Requires improvement	Good	Requires improvement
<b>Safe</b>	Inadequate	Requires Improvement	Requires Improvement	Requires improvement	Good	Requires improvement
<b>Effective</b>	Requires Improvement	Good	Good	Requires improvement	Good	Good
<b>Caring</b>	Outstanding	Good	Good	Requires improvement	Good	Good
<b>Responsive</b>	Inadequate	Good	Good	Requires improvement	Good	Requires improvement
<b>Well-led</b>	Inadequate	Good	Good	Requires improvement	Good	Good
<b>In Special Measures as at 31/03/16?</b>	Yes	No	No	Yes	No	No

## Other information about the local health and social care system

12. Matters noted during the period are as follows:

- The regulators for the NHS (Monitor/Trust Development Authority and NHS England) continue to exert oversight of this most challenged health economy.
- The Transformation and Sustainability Plan is being developed for the Cambridgeshire and Peterborough footprint through a series of Working and Advisory Groups. At our request, and so we can help maximise engagement, the CCG has carried out an audit of patient and public involvement throughout the complex governance arrangements. Plan recommendations are expected in July 2016.
- Hinchingsbrooke NHS Trust and the Peterborough & Stamford Hospitals NHS Foundation Trust are each deciding, in public on 23<sup>rd</sup> and 24<sup>th</sup> May respectively, on four recommendations for joint working.
- The Cambridgeshire Health and Wellbeing Board approved the Better Care Fund Plan for submission. It contains a drop in CCC capital grant, balanced by increases in grants awarded by District Councils and the CCG revenue contribution. Local areas will agree plans for reducing delayed transfers of care from hospital, and longer term commitments for local areas to work towards integrated health and social care services by 2020.

## Emerging joint working for Healthwatch Cambridgeshire

13. Interests raised during meetings (see appendix) are as follows:

- Exploration with the National Audit Office (NAO) about the scope and potential role of local Healthwatch and Healthwatch England in advising on patient experience input to NAO health and care related reviews where appropriate.
- Joint planning for the 11<sup>th</sup> May community stakeholder learning event on commissioning for older people and vulnerable adult's services, and the dissemination of outputs.

Appendix - Meetings attended by the Chair 1<sup>st</sup> March to 30<sup>th</sup> April 2016

Meeting	Purpose	Date
Launch of Healthwatch Cambridgeshire “Our Health Matters” report on Gypsy, Romany and Travellers health needs	Chair and participant	2 March
National Audit Office	Advisory	15 March
Health and Wellbeing Board meeting	Member	17 March
Robert Myers, Head of Care Pathways, Marbrook Centre, St Neots	Visitor to new Centre	5 April
Many Renton, Chief Nurse Cambridgeshire Community Services	One-to-one	13 April
Cambridgeshire Community Services Board Meeting	Observer and networking	13 April
Health Committee Quarterly Liaison Group Meeting	Member	14 April
Health and Wellbeing Board meeting	Member	21 April
Cambridge University Hospitals Council Governors meeting	Introduction to Healthwatch (CEO and NED attended in my absence)	27 April
Paul Watson, Regional Director, NHSE	One-to-one	29 April