

# Fenland Health and Care Forum Zoom meeting 10-12 Thursday 13<sup>th</sup> Aug 2020

#### **NOTES FROM MEETING**

Attending		
Miranda Knell- Chair	Sue Harris	
Debbie Drew	Yueh-Wen Chiu	
Caroline Tyrrell-Jones	Gill Langley	
Rebwar Hussein	Roxanne Boughen	
Barbara Tinsley	Karen Chambers	
Chelsia Lake	Eileen Murphy	
Liz Fowler	Michelle Mansfield	
Laura Skaif-Knight		
Apologies		
Jennifer Broadie	Stuart De Prochnow	
Nik Patten	Malcolm Bruce	
Nadia Shaw	Margaret Jakeways	
Gina Edwards	Kay Mayor	

### Welcome

Introductions were made. Miranda reminded everyone that any experiences should be anonymized and that the meeting would be recorded for the purpose of minutes. The recording will be deleted once the minutes are approved.

### Notes and Actions from previous minutes.

Minutes were approved.

**ACTION** 

- 1. Still ongoing
- 4. LSK reports that consultants do look for the nearest place for physio.
- 10,11,12 completed.

### Update from QE hospital- Laura Skaife-Knight

COVID- the teams at the hospital have been very impressive with their response to Covid 19. At the hospital we have had 455 confirmed cases 297 of those who had positive tests were discharged. We had 153 deaths including one staff member. We do not have any Covid patients in presently-the last patient was 13<sup>th</sup> July. We now have one Covid ward and we did have split A/E provision to separate Covid from non Covid but that is now back to normal.

One positive from Covid has been the digital transformation. Fifty percent of the outpatient appointments are being done virtually. We are working with the patient to see what suits them best.

We have been very cautious to relax the rules around visiting. We now are allowing one nominated visitor for 1 hr per day. This needs to be booked in with the ward staff so people cannot just turn up.

We have introduced a health and well-being programme for colleagues. We have employed a clinical psychologist for staff and are recruiting a PTSD specialist as well. We have a named senior nurse for BAME staff so their concerns and needs can be addressed.

GENERAL- as you may remember we are in special measures. We had 206 actions to complete and we are pleased to say that 128 of these have been completed and are sustainable.

We have due another inspection from CQC in the Autumn but are not sure what the arrangements are for this yet.

The hospital had a positive visit from Ted Baker Chief Inspector for Hospitals from CQC.

We have been working with the 3 areas from our new strategy -Quality, Engagement and Healthy Lives.

We are lobbying for a new hospital build and hope to hear more within a month. There problems with the concrete roof (as there are in other hospitals). We feel it is more cost effective for a new hospital or even to have a hybrid of old and new.

We have also been in talks with BMI around the Sandringham Private hospital and we may be looking at incorporating an elective treatment centre.

### Feedback from local groups or patient experiences

BT- reported that she had emailed for a prescription from GP at 9.30 in the morning and 4hrs later it was delivered to the home. Excellent service.

EM- asked that people with symptoms that could be cancer to make appointments to see GPS. Referrals have been down 25% so those being referred in are getting seen quickly.

A discussion took place about how people feel about going out. Many had seen an increase in young people and to some degree older people out and about. The 30-50 age group seem to be more cautious. Is the increase in seeing older people out and about because the services that were delivering to them have now been stopped or families who were supporting are now back at work.

MK- The forums are a good way of feeling how the community are feeling.

BT- Is still shopping for those with out internet and sorting it when it arrives at hers.

MM- is worried particularly with people not wearing face coverings.

EM- NWAFT are preparing for a possible 2<sup>nd</sup> influx of cases.

## Update Healthwatch- Caroline Tyrrell-Jones

We are pleased to announce that we have received the Investors in Volunteering quality mark Our survey about experiences during Covid is still ongoing and we have had a good response. Our first briefing is on our website but can be sent on email if anyone wants it. The second briefing is now out and our third being worked on.

We have found that people have been putting off having appointments for minor things, 3 out of 4 people have said their mental health has been affected, but when people have used services they have been good or excellent.

The survey will be running until the end of August so please complete it and share with family and friends.

A small number of staff have been working in the office on a part time basis. This is being kept under review. All the Health and Care forums have been done virtually.

We have been doing an audit of GP websites to see if they are user friendly and to see if they are being updated.

Our signposting team have been very busy. Questions around appointments and treatments, some issues around registering with a GP and an increase in people needing help getting dentist appointments.

#### The future of community based care- Karen Chambers

Karen is the commissioner for home and community support for both Cambridgeshire and Peterborough. Karen explained that the councils were looking at ways to improve home care and home care options for adults (mostly older people).

The councils want people's views on what is good home care provision. What works well what doesn't. What do you think is important if you designing the care for yourself.

A discussion took place

- Better communication between agencies- often families struggle to find the information they need
- Important that the person is told what time to expect the carer and for them to arrive with a smile
- To treat people with respect and help them stay as independent as possible. Letting them make decisions.
- Engaging with the families.
- Some familiarity so there is continuity in care.

KC- How can we pull together what is available in the community? There are things available that may mean someone does not need care. As a council we are trying to learn from what has been happening

during lockdown and we are going to run a pilot in Peterborough to see if we can work differently and looking at what is available locally.

We are also keen to promote Micro enterprises.

We are also looking at the hospital discharge pathways to ensure a smoother transition for patients.

#### Library Services- Yueh-Wen Chiu

From the 3<sup>rd</sup> of August all libraries except Histon (due to revamp) have reopened but with reduced opening times. Volunteer libraries such as Somersham, have their own arrangements.

We are running a select and collect system- people can choose book online or ring and book then collect their books.

We are allowing people to book the use of the computers for 45 minutes slots that need to be pre booked. People will not be able to browse through books.

All people must wear a face covering in the library.

The Library at Home Service has been running and priority was given for those who are shielding. The library has expanded its ebooks and e newspapers/magazines.

We have been running an online timetable of activities including some exercise classes, audio books and some children's activities.

We are looking for more volunteers for the Libraries at home to help with the increased deliveries. If anyone is interested please contact Fay on 07442022926.

**ACTION-** DD to share information after meeting.

#### **Update from Providers**

LF ran through her presentation highlighting the changes to the service since the last meeting. The model of the courses is the same as before but not face to face. There is the opportunity to use FUZE app for a dial in conference (90 mins) and since July Microsoft teams (60 mins).

As we are running virtually people get a bigger choice of sessions to join in on and many are done in different languages.

On the National Diabetes website you can now assess your risk of diabetes. This can then allow you access to the courses or prompt you to get the HbA1c test from your GP.

Since this has been launched it has provided 1000 referals. Peterborough and Cambridgeshire have the highest retention rate.

QU How easy would it be to roll out the blood test across the county/ maybe to certain age groups?

LF- We need a lot more promotion to encourage people to ask their GPs. It would be great to get a community prevention campaign for 30-50 year olds and BAME community.

RB- Everyone Health is a prevention service and we do offer NHS health checks for people as well as help on weight management, smoking cessation and alcohol consumption.

LF some collaborative work has been done on a newsletter bringing what is on offer in one place.

### **ACTION** LF to share the newsletter

SH- AJM have continued to work throughout lockdown. Now people are starting to go out more our service is in more demand. I attended the wheelchair user forum this week and we were talking about the health and wellbeing of wheelchair users.

EP- it would be good to get some service users into our co production and we would like to interview a carer. Ekta.patel@peterborough.gov.uk

GL- We have started to see an increase in calls now for the ambulance service. We are working on our 5 year strategy.

EM- We have been doing some work with Maria Finch (NWAFT) looking at support for cancer patients. CPFT- Rebwar read an email from CPFT- services are now taking referrals although many services are not running face to face yet. The recovery college has been working on producing online support courses.

#### AOB-

**ACTION** to add Ekta to forum mailing lists.

Eileen is the Macmillan Transformation Manager for NWAFT and is developing a cancer strategy for trust. She would like to hear about people's experience of cancer services.