

Community Champion Network Meeting

Wednesday 25th February 2015

Held at: Linacre Methodist Mission

Chair

Val Bayliff (VB)

Sefton O.P.E.R.A.

Attendees

Adrian Lee (AL)

Barbara Rouse (BR)

Katie Oakes (KO)

Deb McCormick (DMcC)

Barbara Rouse (BR)

Joan Cummings (JC)

Galloway's Society for the blind

Bootle YMCA & Oxford House High Rise

Venus

Venus

Bootle YMCA & Oxford House High Rise

Linacre Methodist Mission

Healthwatch Sefton Staff

Diane Blair (DB)

Wendy Andersen (WA)

Healthwatch Manager

Healthwatch Engagement and Participation Officer

Speakers/ Guests

Terry Hill

Angela Curran(AC)

CCG Locality Manager for Maghull

Locality Development Support NHS South Sefton Clinical
Commissioning Group

Apologies

Keith Lloyd (KL)

Libby Kitt (LK)

Fred Roberts (FR)

Debbie Shelby (DS)

Margi Roberts (MR)

Julie Bennett (JB)

Debbie Kelly (DK)

Michelle Colleran (MC)

Brunswick Youth & Community Centre

Individual Locality Representative - Seaforth & Litherland

Individual Locality Representative - Bootle

St. Leonards Youth & Community Centre

Seaforth RAG

Individual Locality Representative - Crosby

May Logan Centre

New Directions, Bootle Resource Centre

Notes and Actions outstanding from previous meeting

Please see action log.

Apologies

Provided and noted.

Declarations of Interest

The Chair asked for network members to declare any declarations of interest prior to the meeting or during any discussions that take place during the meeting.

BR declared a declaration of interest with Liverpool Community Health (LCH) during discussions around the services. BR stated this is already recorded on a declaration of interest form held by Healthwatch Sefton.

Updates from Healthwatch Sefton

Out Patients (Deaf / Hard of hearing patients)

WA provided an update to the group on this piece of work. 3 chats planned including one open to the community being held at the Brunswick Youth & Community Centre (previously circulated to network members), Deafhealth champions and the Southport Deaf Centre. WA asked for members to promote this as much as possible in their communities. VB asked if Healthwatch had access to the PALS reports and if so can we check if there are any experiences shared with them. DB stated that we did and this would be checked.

SSP Health Contract Query

DB contacted NHS England to ask if a patient representative is routinely involved when GP contracts are awarded with specific relation to SSP practices. The response received from NHS England's Contract Manager stated ' I was not involved in the procurement process but I am confident a lay member did sit on the panel which evaluated the awarding contracts to SSP'.

Partnership agreement between Healthwatch Sefton & HMP Kennet

WA confirmed that DB had emailed Chris Barker, Head of Reducing Re-Offending to move the partnership agreement forward. Healthwatch England were copied into the email. Chris Barker has responded with some changes to the agreement due to the changes in the prison category and DB will continue to follow this up.

Locality Reps update and feedback from Healthwatch Steering Group

DB provided the update:

Podiatry - A response from Liverpool Community Health (LCH) has been received by Healthwatch Sefton which was not deemed satisfactory. DB has written to the Chief Executive to request a meeting to discuss the report and findings further. Stephen Astles from the CCG will also be invited along to the meeting.

GP Access - DB stated that she attended the Seaforth, Litherland & Netherton Locality Meeting to provide an overview of this work to the GP's and medical staff. DB said this was received well at the meeting by attendees.

Healthwatch Sefton Representative Role - With regards to members representing Healthwatch Sefton DB reported that she now had a draft role description. Once the Steering Group has viewed this DB stated she would like to bring this along to the network for their input and approval. **Action: DB to share with the network once agreed by the Steering Group.**

Share your experience form - WA confirmed that the Community Champions were given the opportunity to get involved in the revamp of the form. BR is part of the group over looking the new form. As previously requested by members social care will now feature more prominently on the form.

Transport - DB has met with Merseytravel. Healthwatch to continue to gather transport experiences. At this point evidence is still needed. VB suggested using the pop up shop in the Strand shopping centre. DB stated that a chat was held in Hightown with local residents attending a Wednesday group and it was suggested that Formby would also be an area in need.

Maghull Locality Rep - DB confirmed that the candidate who had come a close second to Karen Jones had been approached to take on the roll of Locality Rep for Maghull. VB asked if Healthwatch were looking for more reps in the future to talk with SPAC. DB confirmed they were included in the last election.

Healthwatch Locality Representative review - DB stated this year Healthwatch will be looking to carry out a review on the role of the locality representative. A one-to-one will be booked in with all the reps to discuss the role and how to move it forward.

Emerging Issues from network members

Network members are given the opportunity to present any emerging issues they are aware of from their local communities.

Men Behaving Brilliantly group - VB reported on the lack of men's health services in Sefton. VB stated that she had made contact with both the CCG & Public Health to try and get someone out with expertise to chat to the group about men's health issues and services. She now has

secured someone from the urology team at Aintree to come out and chat with the group. VB raised this as an issue considering the number of men in Sefton and the lack of information and support available on men's health. VB asked if Healthwatch could map services available?

JC stated that from attending the food bank it is apparent that there are places for women to go e.g. GP, Venus, the SWAN Centre etc... but she only knew of the Bowersdale Centre for men. JC stated that they do have men coming through the service with issues that need addressing.

Action: Healthwatch Sefton's signposting officer to do some research on what is available. DB to contact NHS England to ask what surgeries provide a men's health group and what the attendance is. Healthwatch Sefton to speak with Jan & Ann Marie to see what work if any they are doing on this.

EPEG update:

DB provided an update:

- Aintree University hospital presented on their strategy around patient and public engagement. Aintree hospital talked about their golden thread and how they use patient experiences to build into their strategies. Southport & Ormskirk hospital did attend but will need to be re-called to the EPEG as the overview was not in enough detail.
- Healthwatch Sefton submitted Quarter 1 Aintree University hospital report to EPEG. Quarter 2 has been submitted to Aintree University hospital and Quarter 3 is being compiled.
- Breast services - DB reported into EPEG that from a Healthwatch perspective the 2 diagrams re: breast services were not clear. Feedback received so far indicates people do not understand the diagrams.
- DB confirmed that at the last CCG board meetings held in both the South & North a decision was reached to decommission the 'Out of Hours Pharmacy'.

Update from Roger Driver - CCG Lay Member, Public & Patient Engagement:

A&E - RD reported that more work needed to be done around patients attending the A&E department. Questions needing to be asked include:

- How many people turned up and left without treatment?
- How many people were hospitalised?
- Was the patient at the appropriate place?

RD stated although there had been an increase in attendance at the A&E, they were ill people. More work needs to be done around analysing this issue and why more people are getting ill. As a Lay Member this is one of the issues RD will be taking forward.

End of Life Care - RD stated he has been asked to get involved in this area. If a patient wants to die at home there should be a robust system in place to allow this to happen. RD suggested this could be a topic for future network meetings. An end of life strategy has been written by the

CCG. An agreement of 'Principles & Values' has been signed up for and is displayed at the GP surgeries. RD stated that he had attended a number of meetings last year regarding this topic including with Woodlands, The Jospice and McMillan. VB suggested that as Sefton has an ageing population that the Healthwatch Steering Group might want to pick up on end of life care. **Action: Network to decide if they would like this to be added as a future agenda item.**

VB asked RD how he fed in the community concerns and if it was through the EPEG as DB sat on that group. RD stated that his role was to ensure that the public & patient voice was heard at Board level and that he would continue to put forward questions regarding the public and patients whilst attending the Board meetings. RD gave an example and stated he was engaged privately over the North Park surgery in Bootle ensuring that he put the patient voice forward. RD stated he felt it was important to have that independent role on the CCG Board. RD stated he receives information from different sources including the Health & Social Care forum. If any public or patient organisation has a view or perspective then it was his role to take this forward. In addition RD stated that he felt it was important that 'Healthwatch maintained and kept their independent position and represented issues that needed to be raised because some of those issues maybe to scrutinize and question the CCG'.

RD stated that he did have all the dates of the Community Champion Network meetings. He suggested if there was anything in particular that the network would like to talk to him about or for him to update the network on then we invite him specifically to those meetings.

Issues to be taken forward to Healthwatch Steering Group

VB suggested that as Sefton has an ageing population that the Healthwatch Steering Group might want to pick up on end of life care.

CCG Locality Lead update

Choose & Book - TH provided an overview of how the Choose & Book system worked:

Information is coming in around patients not being happy with the service in particular with regards to Aintree University hospital. TH reported that there was an Appointment Slot Issue (ASI) list and if there were no appointments available on the choose & book system a patient can be referred to the ASI list and this highlights concerns to the CCG.

A number of meetings have been held around the choose & book system and an action plan is now in place. The CCG is just awaiting confirmation from Aintree University Hospital as to when actions will be completed. TH reported that there were 4 - 5 specialities that had significant issues with the choose & book system. One of the issues being consultants not being able to see the referral letter to establish the urgency. Dummy slots will be made available to fit these patients in.

Each speciality has been asked to carry out a review. This could result in longer periods of times for appointments to be booked therefore making the service more efficient. This review

will identify how far in advance appointments can be made depending on the service e.g. between 6 weeks - 12 weeks in advance. TH stated that one system does not fit every speciality.

How the Choose & Book system works for the patient: TH reported that patients have a right to free choice in England as to where they are treated. On the whole patients will want to listen to their GP's advice and referral route. A GP can provide a patient with 3 or 4 options that are clinically appropriate, then it is the patients choice. The money follows the patient to where they are treated but mainly a high percentage of patients will choose to go to a local hospital. Prior to choose & book a patient would have just been referred to a hospital that might have had for example a 17 week wait, once choose and book came in the patient has the choice to choose a hospital based on how long the waiting list is.

There are some GP practices still not using the choose & book system and the CCG can not force them too. There are a number of reasons why, this includes DNA rates, letter templates etc... but these are being looked into. Manual referrals by GP's can result in increased waiting times for the patients. Patients need to be aware that they can ask for the choose & book system from their GP. The CCG are pushing to get more referrals through the choose & book system.

The CCG are currently looking at other hospitals who use the choose & book system to glean good practice. TH confirmed there would be a roll-out of enhancements to the system over the next few years to make the service more efficient and effective for both the patients and GP's.

Network members asked who were the 5 GP practices that did not use the choose & book system and did they have a PRG? . **Action: TH to provide the information to the network.**

Action: A choose & book coffee morning to be planned by Healthwatch in partnership with TH later on in the year.

Virtual Ward - TH circulated case studies to the network from Tina Ewart. **Action: AC / TH to email this over to WA for circulation to the network.**

Information exchange / Any other business

- Al stated that Galloway's were offering training for people who come into contact with people with sight problems. 24th March morning and afternoon - 'New skills for seeing'. 31st March 'Living with sight loss' **Action: AL to forward details to WA for circulation**
- VB updated the group re: her attendance at the Integrated Health Care meeting. VB was invited to attend as co-chair of the Community Champion network. VB stated they were looking at a model to try to keep people in their homes and provide the care they need there. VB stated that there were massive issues around budgets and that a new smarter way was needed to deliver these services with the patient voice being key to the service.

- WA shared Keystone support for dementia carers promotional materials with the network.

Requests for speakers

No further requests for speakers.

The Chair thanked everyone today for their input and attendance today.

Date and Time of Next Meeting:

Tuesday 31st March 2015 at 10.30am (10.00am tea/coffee)
Venue: TBA