

Minutes of the Healthwatch Sefton Steering Group meeting.

Held Monday 24th January 2022, 1pm.

Virtual meeting using the platform Zoom.

Attendees:

Chair:

Bill Bruce (BB) Chair

Locality Representatives:

Maurice Byrne (MB)	Locality representative – Maghull
Brian Clark (BC)	Locality representative - Ainsdale & Birkdale
Anne Major (AM)*	Locality representative - Central Southport
Jan Sterling (JS)	Locality representative – Formby

Organisational Representatives:

Jan Comer (JC)	Transforming Care Partnership Board
Sharon Cotterall (SC)	Every Child Matters Forum
Anne Major (AM) *	Sefton Partnership for Older Citizens (SPOC)
Karen Christie (KC)	Health & Social Care Forum

Apologetics:

Marguerite Dawson (MD)	Engagement officer (Healthwatch Sefton)
Kevin Halewood (KH)	Locality representative – Crosby
Will Mullen (WM)	Transforming Care Partnership Board
Helen Roberts (HR)	Locality representative – Seaforth & Litherland
Elllie Egerton White (EEW)	Sefton Young Advisors
Mandy Williams (MW)	Signposting & Information Officer (Healthwatch)

Staff Team:

Diane Blair (DB) Manager
Wendy Andersen (WA) Engagement & Participation manager

* has a dual role.



Agenda Item	Notes	Action
1.	<p>Welcome, apologies and Declarations of interest.</p> <p>BB welcomed all members. The following declarations of interest were shared in line with the agenda:</p> <p>AM – volunteers at Southport & Ormskirk Hospital NHS Trust. BB – daughter is a GP and works in a practice in Formby and is also a member of Southport and Formby Clinical Commissioning Group.</p>	
2.	<p>Minutes of the last meeting for approval.</p> <p>The minutes from the previous meeting were agreed as an accurate record.</p>	
3.	<p>Action Tracker</p> <p><u>Walton Centre NHS Foundation Trust - (installation of an additional car park pay machine):</u> WA has contacted the Walton Centre to find out if patients are paying for the car park at the Sidney Watkins centre and for an update on the pay machine. There had been no response. Action: issue to be followed up.</p> <p><u>GP access/ case studies:</u> BB had drafted a letter which was to be sent to the three primary care networks (PCN) leads. This had been shared with members. Suggestions were reviewed and the final version was agreed. Action: letter to be emailed to the 3 PCN leads.</p> <p><u>Accessibility of Rowlands pharmacy (Birkdale):</u> DB had been in touch with the Chair of SAFE, Fiona, who had confirmed that they had been in touch with Cllr Sonya Kelly about Birkdale village generally and she has written to Rowlands as part of her work trying to improve the accessibility. Fiona has spoken to Cllr Kelly who is more than happy to work together on this. Action: Healthwatch to contact Cllr Kelly.</p>	<p>WA</p> <p>DB</p> <p>MD</p>



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	<p><u>Access to patient transport services (PTS) & discharge:</u> the previous issues raised had been shared with North West Ambulance Service.</p> <p>Both the Liverpool Royal and Aintree University hospital sites, have staffed discharge lounges, which have been operational throughout covid. Recently there have been a lot of staff absences (covid related), resulting in longer waiting times.</p> <p>Southport hospital has an 'Ambulance Liaison Assistant' in place, employed by North West Ambulance NHS Foundation Trust (NWAS), and all acute trusts are encouraged to use the PTS online service to book discharges rather than going to the assistant. Many hospitals have turned down the offer of having a liaison officer in place to support discharge and out-patient appointments.</p> <p>MB highlighted a recent example of a local resident who following a fall, had to wait 12 hours on the floor, waiting for an ambulance. They had someone with them, but it was discussed how a solution for this could be a nurse led mobile service who could triage, preventing the need for the 999 service. BC agreed but described how triage would have already taken place during the initial call. MB felt that an alternative service was needed to save people having to wait for hours.</p> <p>AM explained that NWAS had recently updated on how 999 and 111 services would be working to triage more effectively together. AM also updated on the two new discharge matrons which have been employed at Southport hospital. They will be in place for the next 6 months and AM suggested it may be helpful to find out more about their role and if the service would be available at weekends. Action: further information on discharge procedures and the work of Southport & Ormskirk Hospital NHS Trust to be requested.</p>	<p>DB</p>



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4.	<p>Sefton Place Based Partnership/ Integrated Care Boards (ICB)/ Integrated Care Partnerships (ICP).</p> <p>DB updated that the new health and care structures will now be in place from 1st July 2022.</p> <p>The recruitment of place directors is currently taking place and it was thought that recruitment was via NHS England.</p> <p>The local task and finish group was held last week and the key elements included an update on governance (including the drafting of a partnership agreement being described locally as a collaborative agreement). Healthwatch is recognised as a system partner and will be asked to sign the agreement. There has been the offer of a presentation to the board prior to sign off.</p> <p>Other areas discussed included progress on population health management, which is looking at how all systems can share data and intelligence to prioritise areas of need and also an update on the child poverty strategy. SC updated that child poverty was the theme for the next 'Every Child Matters' forum.</p> <p>BB commented on local progress and the larger structure and MB expressed his concerns. DB shared how it was helpful for all the local Healthwatch managers to be meeting up every week to ensure we are all up to date and reviewing local progress and representation.</p>	
5.	<p>Shaping Care Together Update</p> <p>In response to NHS England's letter of 24 December 2021, 'Reducing the burden of reporting and releasing capacity to manage the COVID-19 pandemic', 'shaping care together' events and meetings had been temporarily suspended.</p> <p>However, the communications and engagement steering group will be taking place tomorrow. JC explained that an update had been provided at the last Health & Social Care forum meeting.</p>	



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6.	<p>Healthwatch Sefton Chairperson.</p> <p>DB presented information and members were asked for their comments based on:</p> <ul style="list-style-type: none"> • Historically we have struggled to recruit to this role. • Our ask within the role description • It's a volunteer (unpaid) role • The board have previously discussed renumeration for the post but the budget does not allow for this. • Recruitment pack is word heavy and possibly makes the role look more onerous than the ask. <p>At the board meeting held (December 2021), there was an ask for the steering group to review this role and look to pull together a number of recommendations for moving this forward.</p> <p>BB shared how the 2 days of volunteering cited within the role was probably not accurate. In his role, there had been no meetings in person, no enter and view visits for example.</p> <p>BC welcomed the introduction of the vice chair/ joint role option. BC had picked up the informal role of vice chair and it was often unclear about the role and responsibilities. BC asked about having a joint chair role and also commented on time commitment and felt that it should be clear on what is included within this, for example, would travel time be included in the 2 days.</p> <p>SC commented on how broad the responsibilities were felt that it needed to be simplified. SC suggested that informal chats with current members about what would encourage them to take up the role/ why they wouldn't take it up, may help in understanding what is needed.</p>	



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	<p>It was agreed that it had been useful to have this conversation to help review what we want from the role and to ensure we get the role filled.</p> <p>AM asked if community champions and other community members could apply for the role, DB confirmed that this was open to all members.</p> <p>KC asked if BB would review the role from his perspective and asked if there was a budget for advertising the role. KC had recently paid for an advert to be shared by 'Reach' and this had been really successful. Action: All next steps to be followed and an update to be brought to the next meeting.</p>	DB
7.	<p>Work Plan (Overview of progress)</p> <p>a) <u>GP access update</u></p> <p>WA provided an update. Commissioners had updated on the response to their GP access survey; 3,800 responses for Southport & Formby and 2,500 for South Sefton (which had a later launch date). Commissioners were reviewing the responses and were contacting those practices which had low response rates.</p> <p>The briefing for community champions had not been shared and it had been made clear that this was an engagement exercise and not a formal consultation. MB had received the survey for his practice at the end of last week, the deadline for responses being today. MB also felt that the survey was difficult to complete.</p> <p>WA explained how she was currently drafting the Healthwatch report detailing the feedback gathered on GP practices. A couple of key emerging themes included; communication, access to routine health checks and general access to appointments. The report would detail the feedback from local residents and the</p>	Page 6



Agenda Item	Notes	Action
	<p>information gathered from holding sessions with community champions.</p> <p>There will be further meetings with commissioners and WA will continue to feedback to the steering group.</p> <p>b) <u>Supported Living.</u></p> <p>DB explained how she had been chasing up the response to the letter which had been sent to Alisa Nile, detailing further concerns and opportunities for solutions. However, DB had been informed that there is a new head of adult social care in place, Sarah Alldis. DB has requested a catch-up meeting with Sarah alongside Sefton Carers Centre.</p> <p>c) <u>Strengthening and supporting Patient Participation groups (PPGs)</u></p> <p>WA updated on the draft support packs. There is a pack to support practice staff and a separate one to support patients. Both are currently being reviewed for final approval. The date for the next steering group meeting had been set and best practice will be reviewed.</p> <p>BC shared how he had previously been invited to attend a meeting of the Ainsdale Medical Centre group, and as he had not heard anything and would chase this up.</p> <p>d) <u>Review of domiciliary care</u></p> <p>DB had met with Pippa McHaffie (commissioner) and there had been an agreement to progress this work within the next month. Work to finalise the client letter and the conversational questions will be completed within the week. Action: both the letter and questions to be shared with members.</p> <p>BC commented on the shortage of people who are working in social care. There is a national recruitment campaign on the TV at present. DB also explained how Sefton Carers Centre had a</p>	<p>DB</p>



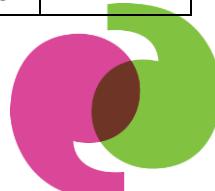
Agenda Item	Notes	Action
	<p>number of concerns, which they had shared with Healthwatch and Cllr. Cummins.</p> <p>JS spoke about the high turnover of staff, with many not remaining in their jobs for long. They are on minimal wage and don't receive any pay for their travel between visits. There is minimal training and supervision in place. JS also emphasized the many people working within the role, who are passionate and caring.</p> <p>BB agreed and spoke about the person power shortage. People are moving from health and care into supermarket jobs, as they are better paid and less stressful.</p>	
8.	<p>Area of Interest Action Plan.</p> <p>a) <u>Impact of local housing developments on health and care services.</u></p> <p>There is an online session scheduled for 26th January for the small working group to meet with Martin McDowell from the local clinical commissioning groups. BB felt that one of the key issues to be explored would be the need for planning and projection. At present the group has been told that until people move into new housing and there is a need identified, then no planning can take place.</p> <p>BC updated on the recent pharmaceutical need's assessment, an assessment based on hindsight, to review local need. This is undertaken on a three-year cycle and supports local planning.</p> <p>JS updated on the building in Formby. If estimating that there will be 3 people per household, this will result in an extra 3000 people requiring local support and access to services.</p> <p>MB reminded people that this applies to education too. Action: Update from the session to be shared at the next meeting.</p>	DB



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	<p>b) <u>NHS 111 update</u></p> <p>WA wanted to provide an update from the case studies which had been shared with providers and commissioners. The case studies had highlighted a lack of patient information and patients accessing Accident and Emergency departments and still having long waits for treatment. WA shared how there were now care navigators positioned in local departments to support patients to access care in the right place. There had been a soft launch. Care navigators can talk to people about other supportive services but can not turn people away from the department.</p> <p>AM thanked WA for the update and agreed to share this with the NWAS patient panel.</p>	
9.	<p>Issue for consideration</p> <p>a) <u>The Walton Centre NHS Foundation Trust – Chairperson recruitment.</u></p> <p>WA updated on the request which had been made by the Walton Centre. They had asked Healthwatch Sefton to attend a session which is supporting the recruitment of their new chairperson. The event is online, (10th February) and there will be a presentation followed by focus groups. MB expressed how refreshing this was for NHS providers to involve local stakeholders. Members agreed that it would be beneficial for Healthwatch Sefton to send a representative. Action: WA to arrange for a representative to attend.</p> <p>b) <u>Discharge from Ormskirk & District Hospital NHS Trust.</u></p> <p>AM spoke about an experience which had recently been posted on a social media page. The post had detailed feedback about the difficulties of getting home when discharged late at night from the children's Accident and Emergency department at Ormskirk hospital. Mum had no money to get her child home</p>	WA



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	<p>and it was only the kindness of another patient within the department, who gave them money which supported them to get home safely. Members discussed how providers should have policies in place for safe discharges, particularly when discharged late at night.</p> <p>WA shared her observations at Aintree hospital when undertaking engagement sessions in the main entrance during the early evening. Patients would be waiting in the main entrance for taxi's to pick them up (booked by the trust).</p> <p>MB asked if this was related to the current system pressures, there being no inpatient beds, leading to discharges which may not be planned.</p> <p>Action: it was agreed that Healthwatch should make enquiries with local NHS providers about their policies in relation to this area.</p>	DB
10	<p>Any Other Business</p> <p>AM asked if Healthwatch had been involved in the stroke services reconfiguration consultation. AM had attended one of the online meetings and there had been concerns about discharge back to Southport & Formby District General Hospital. WA explained that presentations were being made at both Community Champion meetings in January by Liverpool and Sefton Clinical Commissioning Groups. BC had attended a meeting of the overview and scrutiny committee and it had been agreed that there would be significant impact, a joint committee being formed.</p> <p>JC had completed the online survey and felt that the emphasis of the survey had been on acute stroke care, with little detail being given to rehabilitation services back at local hospitals. BC clarified the discussions held; that there would be a specialist centre, which would rely on a hub model for further rehabilitation. It was agreed that further clarity on rehabilitation was required.</p>	Page 10



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	<p>AM agreed as NWAS had also raised concerns about pressures this may put on existing ambulance provision. WA informed members that she had made a note of the questions and they could be raised at the meetings.</p> <p>Diane shared an opportunity for members to receive an update on the current market position within social care. Members agreed that this would be a useful session for Healthwatch to host. Action: online session to be organised for members.</p>	DB

Key decisions log

[key decisions will be included in the action tracker of the next meeting held]

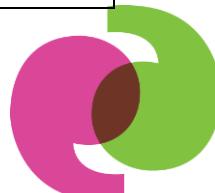
Agenda item	Decision agreed	Agreed action(s)	To be actioned by
3.	Approved letter to be shared with the three primary care networks leads to support in relationship building.	Look at decision.	DB
3.	Accessibility of Rowlands Pharmacy (Birkdale)	To contact Cllr Kelly	MD
3.	Patient transport issues and discharge	Contact to be made with Southport & Ormskirk Hospital NHS Trust about their discharge lounges, role of discharge matrons and discharge procedures at weekends.	DB
6	Chairperson recruitment	To follow up on all suggestions made by steering group members to review the role and feedback to steering group members.	DB



9	The Walton Centre NHS Foundation Trust. Chairperson recruitment event.	Representative to attend the session (10 th February 2022)	WA
9	Late night discharges	To make enquires with local NHS providers about their policies for discharges (late at night)	DB
10.	Current market position (adult social care)	Session to be organised for members to find out more about the current market within social care	DB

Attendance Tracker

Name / Representing	Oct 2021	Nov 2021	Jan 2022
Bill Bruce – Chair	x	✓	✓
Locality representative: North Southport	Vacant	Vacant	
Anne Major. Locality representative: Central Southport	✓	✓	✓
Brian Clark OBE. Locality representative: Ainsdale & Birkdale	✓	x	✓
Jan Sterling. Locality representative: Formby	✓	x	✓
Locality representative: Hightown & Ince Blundell	Vacant	Vacant	Vacant
Kevin Halewood: Locality representative: Crosby	x	✓	x
Helen Roberts: Locality representative: Seaforth & Litherland	x	x	x
Locality representative: Bootle		Vacant	Vacant
Locality representative: Netherton	Vacant	Vacant	Vacant
Maurice Byrne: Locality representative: Maghull	✓	✓	✓
Karen Christie - Health and Social Care Forum	✓	x	✓



Yael Smith- Every Child Matters Forum/ Sefton Parent Carer Forum	X	X	X
Sefton Equalities Network	Vacant	Vacant	Vacant
Anne Major - Sefton Partnership for Older Citizens (Jan 2021 onwards)	✓	✓	✓
Brian Causey: Sefton Carers Independent Action Group	X	X	X
Carers Voice	X	X	X
Ellie Egerton- White - Sefton Young Advisors	X	X	X
Transforming Care Partnership Board Will Mullen and Jan Comer	X	✓	
Sharon Cotterall – Every Child Matters Forum	X	X	✓

