

**Minutes of the Healthwatch Sefton Steering Group meeting.**

**Held Friday 26<sup>th</sup> November 2021. 10:30**

**Virtual meeting using the platform Zoom.**

**Attendees:**

**Chair:**

Bill Bruce (BB)

Chair

**Locality Representatives:**

Maurice Byrne (MB)

Locality representative – Maghull

Anne Major (AM) \*

Locality representative - Central Southport

Kevin Halewood (KH)

Locality representative – Crosby

**Organisational Representatives:**

Will Mullen (WM)

Transforming Care Partnership Board

Joanne English (JE)

Transforming Care Partnership Board

Anne Major (AM)

Sefton Partnership for Older Citizens (SPOC)

**Apologies:**

Brian Clark (BC)

Locality representative - Ainsdale & Birkdale

Helen Roberts (HR)

Locality representative – Seaforth & Litherland

Jan Sterling (JS)

Locality representative – Formby

Sharon Cotterall (SC)

Every Child Matters Forum

Karen Christie (KC)

Health & Social Care Forum

Ellie Egerton White (EEW)

Sefton Young Advisors

**Staff Team:**

Diane Blair (DB)

Manager

Wendy Andersen (WA)

Engagement & Participation manager

Mandy Williams (MW)

Signposting, Information & Administration officer.

\* has a dual role.



Agenda Item	Notes	Action
1.	<p><b>Welcome, apologies and Declarations of interest.</b></p> <p>BB welcomed all members. The following declarations of interest were shared in line with the agenda:</p> <p>AM – volunteers at Southport &amp; 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> <p>BB and members paid their respects to Jenny Meehan who had sadly passed away. Jenny had volunteered as the locality representative for Bootle and it had come as a shock to both staff members and volunteers. All at the meeting paid their respects and a one minutes silence was held.</p>	
2.	<p><b>Minutes of the last meeting for approval.</b></p> <p>The minutes from the previous meeting were agreed as an accurate record.</p>	
3.	<p><b>Action Tracker</b></p> <p><u>Southport &amp; Ormskirk Hospital NHS Trust – equality issues:</u> a meeting had been held with Lynne Barnes (Director of Nursing) and the equality issues had been discussed. The trust now has a menu which includes vegan options and it had been agreed to review the other issues once the covid/winter pressures had eased. AM told members that the trust has a transgender policy in place. Issue will be reviewed on the action plan moving forward.</p> <p><u>Clinical Commissioning Group (CCG) Governing body meetings</u> – BB updated that a formal response had not been received and further correspondence had been sent to the chairs of both governing body boards. The issues raised included; lack of conversation about the current crisis and plans to address them;</p>	



Agenda Item	Notes	Action
	<p>the current information from Marmot about local life expectancy variations and a query about how the current GP access survey will help improve primary care.</p> <p>AM asked what Healthwatch Sefton could do aside from continuing to gather local feedback and feed this into the system? BB agreed that Healthwatch should continue to actively listen.</p> <p>KH agreed that locally, people are giving up. People are struggling to access blood tests, they can't get appointments. BB agreed and felt that Healthwatch needed to be able to review the local plan which looked to improve access and services not just the results from the survey.</p> <p>AM explained how an update on the survey had been given at the last meeting of the Sefton Older Person's Partnership (SPOC) but there had been little discussion about the patient and when asked, there had been little response.</p> <p>WA updated that the 'day in the life of a GP' video, had been shown at the last meeting of the South and Central Community Champion network and members had been very vocal. BB agreed saying that people feel strongly about the issue, primary care being their first point of access with the NHS when not feeling well.</p> <p><u>Walton Centre NHS Foundation Trust (installation of an additional car park pay machine)</u> – the issue had been added back onto the area of interest action plan and the trust had responded. Although they were looking into this, they shared that this was not a problem at the moment as patients were not presently paying for parking. Members queried this and both MB and BB both shared how they had recently paid for car parking.</p> <p><b>Action:</b> WA to follow this up.</p>	<p>WA</p>



Agenda Item	Notes	Action
4.	<p><b>Sefton Place Based Partnership/ Integrated Care Boards (ICB)/ Integrated Care Partnerships (ICP).</b></p> <p>At the last meeting of the task and finish group, the draft 'memorandum of understanding' was shared, a legal collaboration agreement, which Healthwatch Sefton will be asked to sign in the future.</p> <p>Members had considered the proposal for establishing the new Integrated Care Board (ICB) for Merseyside and Cheshire. It was noted that they had decided not to have a Healthwatch representative on the board and this had been challenged.</p> <p>During November, Cheshire and Merseyside Healthwatch had presented at the ICP 'communication and engagement group', focusing on aspirations for working with the new Cheshire and Merseyside structures.</p> <p>Locally DB shared how she continued to work with colleagues from the CCG, local authority and Sefton CVS on the people and communities workstream. Healthwatch community champion networks are being highlighted as a good route for engagement.</p> <p>BB closed the item reiterating that the main challenge will be the impact on local decision making, the impact on services and how important it is to work with neighboring local Healthwatch organisations.</p>	
5.	<p><b>Shaping Care Together Update</b></p> <p>A meeting of the communications and engagement steering group, had taken place earlier in the week and one of the key discussions was an exception report for which members were asked to agree if a four-week extension to the next phase of engagement would be accepted. The main reason for the delay was the discussions required with St Helens &amp; Knowsley Hospitals NHS Trust and NHS England. Following an agreement, engagement will now end on the 7th February 2022</p>	



Agenda Item	Notes	Action
	<p>rather than the planned January date. Engagement activities will target those groups who have not previously engaged including men, people 25 and under, LGBTQ+ and those from faith organisations.</p> <p>MB felt that locally residents were confused about the stroke reconfiguration consultation taking place and were confusing this with the programme. Although generally agreeing that this is a good idea, they also were taking from it that this is another local service which won't be available. AM explained patients would be transferred back to their local hospital if further rehabilitation was required. In attempting to log onto one of the online sessions, AM had found the process complicating. WA shared how presentations would be made at both the community champion networks in January 2022.</p>	
6.	<p><b>Work Plan - Overview of progress (Quarter 3)</b></p> <p>a) <u>GP access update/ feedback from CCG and next steps</u></p> <p>WA provided an update. Following the presentation at the last meeting of the south and central community champion network, there had been a lot of feedback to commissioners. Feedback related to problems with phone lines, people not complaining direct to practices as they know they are busy, the impact on older residents and champions encouraging them not to give up. "I would like to see my own GP" was also discussed and it had been highlighted how some front facing reception staff had not been well trained and this was leading to frustrated patients.</p> <p>There had been an update on a national piece of work in which funding may be made available locally to improve telephony but it was also highlighted how staff would be needed to answer additional calls.</p> <p>The video discussed earlier had not been received well but the network had been assured that the video was part of a wider campaign and would not be standalone. MB explained how the</p>	



Agenda Item	Notes	Action
	<p>video had been shown at the ‘big chat’ online events at which they had shared how 80 – 90% of patients from a recent survey were happy with the service they received, which locally is not translating into the feedback Healthwatch is receiving.</p> <p>Commissioners would be sending an email which community champions could use to support their members to find out about the survey. Information will also be available on all GP websites and WA asked if Healthwatch should review the websites to ensure this information is being made available.</p> <p>It was discussed how some GP practices continue to provide really good services and KH explained how he was tired of just hearing about all of the negative comments. MW confirmed that she was receiving feedback from residents about receiving really good treatment and agreed that we should be sharing best practice to spread knowledge. It however should not be a postcode lottery.</p> <p>KH also described how GPs have also become accountants, managers and administrators with BB sharing how front-line staff who are on minimum wage are leaving the workforce for better paid jobs. NHS staff continue to face abuse which is increasing.</p> <p>BB gave details on our aging population, availability of advanced treatments and how this impacts local need.</p> <p>MB spoke about the pressures which can be seen right across the system and the pressures to recruit staff. Access to bursaries for people training to become nurses has been a key issue. BB also commented on the backlog of people who are waiting for treatment from secondary care. All members agreed that both health and social care are in crisis.</p> <p>With the changes to the NHS landscape, and CCGs being abolished, it was agreed that contact should be made with the chairs of the primary care networks across Sefton to find out more about future plans and also share what feedback is being</p>	



Agenda Item	Notes	Action
	<p>received. WA felt that primary care networks should support from standardisation. If practices worked in a similar way, this would help with communication and patients would understand better the rules of engagement. <b>Action:</b> BB and DB to draft a letter and share with members.</p> <p>b) <u>Enter and View team</u></p> <p>An online session had been held with enter and view volunteers (3rd November) and there were some key outcomes including agreement that we will hold an online session with current members and those who want to train as a member, to provide a refresh of the role etc. There was also a discussion about the new way of working for the team and how processes will need to change in line with new practices put in place due to the pandemic. AM explained how a number of homes had closed to visitors due to outbreaks. MB shared how some homes require you to have the covid passport and some are testing on arrival.</p> <p>c) <u>Supported Living</u></p> <p>DB updated that the formal response to the letter sent to Sefton adult social care has been delayed and this has impacted on progress. This has been updated on the work plan and Sefton Carers Centre updated.</p> <p>d) <u>Strengthening and supporting Patient Participation groups (PPGs)</u></p> <p>The next meeting of the steering group is being held, 1<sup>st</sup> December and will be attended by PPG members, practice staff, commissioners, Healthwatch staff and members who are involved in their groups/ want to be involved in their groups. 25 members had confirmed their attendance. There will be support packs for practices to help them to set up their group and a pack for patients which includes their role. AM, MB and KH who are</p>	<p><b>BB/DB</b></p>





Agenda Item	Notes	Action
	<p>involved in this work had not received the agenda and meeting pack. <b>Action:</b> WA will follow this up with commissioners.</p> <p>In addition, there is a mapping exercise taking place to find out which practices have groups in place etc. This will support in looking back at the impact of this work.</p> <p>e) <u>Review of domiciliary care</u></p> <p>DB had met with Pippa McHaffie (commissioner) and it was agreed that no variation to the core contract is required for this work to progress. There has been an agreement to start this work in January 2022 with the report drafted and authorised by March. Next steps in this work include drafting and agreeing the letter which will be sent out to the sample group.</p> <p>f) <u>Update on community champion networks and update on the review of the network.</u></p> <p>WA fed back that the review is progressing well and provided an overview. The deadline for champions to share their information is the 16<sup>th</sup> December.</p> <p>WA explained that the team also want to increase membership to both networks. The plan is to have a dedicated page on the new website, which promotes not just the work of the network but the work each community champion undertakes within their communities. The overall aim is to strengthen relationships. AM asked about targeted work with people in employment and if there would be a possibility to work with local job Centre's as this would widen membership from the working population. Wendy shared that there had previously been a targeted piece of work on this but could be something considered again following the review.</p>	<p><b>WA</b></p>
<p>7.</p>	<p><b>Area of Interest Action Plan.</b></p> <p>a) <u>Air Quality</u></p>	

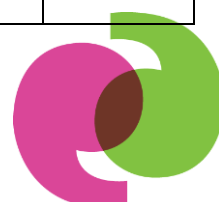




Agenda Item	Notes	Action
	<p>DB shared that she had followed up on outstanding actions with Greg Martin and a response is awaited. DB shared the following experience shared by a new member:</p> <p><i>“Regarding pollution, there is a terrible odour that sits in the air on more days than is tolerable (at least once or twice a week), particularly noticeable early in the morning. It is strong enough that it feels as though you are tasting pollutants. This means that I am unable to open any windows in my home, which is not ideal when cooking, taking a shower, and especially when I have visitors and want to ensure the house is well ventilated to reduce risk of SARS-CoV-2 transmission. I live close to North Park, Bootle.</i></p> <p><i>Related to this, when out and about, the lack of 'freshness' in the air is noticeable. I looked forward to running in my local park (North Park) when moving to the area a year ago, but have been unable to do so due to the levels of pollution. The pollution is particularly noticeable on Stanley Road, intensifying from ‘The Strand’ in the direction of town. It is a putrid smell, causes me to cough sometimes, and feel like my throat is tightening and chest is heavy.”</i></p> <p>KH stated that a major issue is the plan for the new road and Rimrose valley, particularly if it is progressed. MB felt that this issue is important and is an issue being picked up by the Metro Mayor Steve Rotherham, an air quality action plan being put into place. Poor air pollution causes serious health problems and is impacting on our local resident’s health. The chair and members noted the update and discussion and the issue needs to remain on the action plan with a discussion about next steps for the organisation.</p>	



Agenda Item	Notes	Action
	<p>b) <u>Impact of local housing developments on health and care services.</u></p> <p>DB provided a verbal update. As a next step in progressing this area, a short session with members to hear from Martin McDowell from the CCG is being planned so members on the small working group can gain an overview of their position in this area.</p> <p>MB updated on the Overview and Scrutiny Committee (education and safeguarding) meeting he had attended where the impact of housing developments on schools was on the agenda and discussed. It was agreed that more school places would be needed based on the projections provided at the meeting. A ratio per new house had been projected for both primary and secondary education. In looking at primary education places, both the Maghull and Aintree areas by 2025 would be very close to not having any available places. There would however be enough places across Southport.</p> <p>When looking at Crosby and secondary education, there is a huge gap between places and demand with an estimated 250 extra places needed in the future. KH confirmed that in reality it is worse than this, with all school places currently oversubscribed.</p> <p>In terms of town planners. KH felt that more pressure was needed for them to anticipate the impact of plans.</p> <p>Following the discussion, it was agreed that this area of work to remain on the action plan and for the session with the CCG to go ahead as a starting point.</p>	
8.	<p><b>Issue for consideration</b></p> <p><u>Accessibility of Rowlands Pharmacy. Birkdale – (Sefton Access for Everyone)</u></p>	



Agenda Item	Notes	Action
	<p>A paper had been shared with members and DB provided a summary. This pharmacy is based in Birkdale and for many years now, SAFE (one of our Southport and Formby Community Champion network members) have attempted to work with the pharmacy on how they can provide an accessible entrance into the pharmacy and a number of complaints have been made to a number of different organisations.</p> <p>SAFE would like Healthwatch to consider the following points and decide if the issue could be progressed on behalf of local people:</p> <ul style="list-style-type: none"> <li>•Rowlands is part of a major pharmacy chain and there is evidence that other pharmacies have been able to make adjustments.</li> <li>•The privacy and dignity of people with disabilities needs to be strengthened. Using the bell but needing to have a conversation about an illness or care at the chemist at the doorstep is not acceptable</li> <li>•Healthwatch to support SAFE to work with the pharmacy to see if there is a way for a portable ramp to be purchased and used. Portable ramps are lightweight and not costly.</li> <li>•The pharmacy has a bell so the bell could be used to request that a lightweight portable ramp could be put down.</li> <li>•SAFE would be willing to create a sign for the pharmacy to alert people to ring the bell if they require the ramp</li> <li>•Not being able to access the pharmacy does not support the current messages about self-care and accessing pharmacies for support.</li> </ul> <p>BB asked members for comments. AM asked if there was a precedent from other providers based in the same street. It was confirmed that the butchers use a ramp. BB explained that Mersey Rail use them and that maybe the national chain needed</p>	



Agenda Item	Notes	Action
	to be shamed making this change. KH felt that they would be in breach of the discrimination act. Listed buildings can have ramps as long as they can be removed. Members asked if it would be worth contacting the local councillors for the ward. <b>Action:</b> DB to update the chairperson of SAFE and update on the agreed action to see if this would be a suitable next step.	<b>DB</b>
9.	<p><b>Updates from the Board of Directors.</b></p> <p>DB provided an update on the plans for Sefton MBC to procure a hub for advocacy services. The plan is that there will be a central one stop shop to access all advocacy services, including the Healthwatch Independent Complaints advocacy service. A soft market procurement exercise has taken place and an expression of interest has been submitted. JE shared that this procurement also covers the community advocacy that they provide. They have over 20 years' experience of providing local support.</p> <p>DB also noted that a soft market procurement activity had also been opened for the core Healthwatch contract and again Sefton CVS had expressed an interest to continue to provide the service.</p>	
10	<p><b>Any Other Business</b></p> <p>DB updated that the Chairperson recruitment campaign had been launched today.</p>	



## 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
6a	To enquire about long term plan to address access and related issues in primary care. Correspondence will be sent to the 3 chairs of the primary care networks.	Correspondence to be drafted.	BB/ DB
9	To contact the local councillor to update them on the accessibility issue and ask for their support.	<p>To contact the chairperson for SAFE and update them on the discussion and agreed next steps</p> <p>To contact local councillor to update them on the issue and ask them for their support</p>	<p>DB</p> <p>DB</p>

## Attendance Tracker

Name / Representing	<u>Sept</u> <u>2021</u>	<u>Oct</u> <u>2021</u>	<u>Nov</u> <u>2021</u>
Bill Bruce – Chair	✓	x	✓
Locality representative: North Southport	Vacant	Vacant	Vacant
Anne Major. Locality representative: Central Southport	✓	✓	✓
Brian Clark OBE. Locality representative: Ainsdale & Birkdale	x	✓	x
Jan Sterling. Locality representative: Formby	x	✓	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
Locality representative: Netherton	Vacant	Vacant	Vacant
Maurice Byrne: Locality representative: Maghull	✓	✓	✓
Karen Christie - Health and Social Care Forum	x	✓	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
Clare Johnston – Carers Voice	✓	x	x
Ellie Egerton- White - Sefton Young Advisors	x	x	x
Transforming Care Partnership Board Will Mullen and Joanne English	✓	x	✓
Sharon Cotterall – Every Child Matters Forum	x	x	x

