

**Healthwatch Leicester & Leicestershire Advisory Board (HAB) Meeting
held on Monday 3 December 2018
Ramada Hotel, Loughborough LE11 2QL**

Present:	Harsha Kotecha (HK)	HW Leicester & Leicestershire Chair
	Micheal Smith (MS)	HW Leicester & Leicestershire Manager
	Colin Norman (CN)	HW Leicester & Leicestershire Member
	Shireen Bharuchi (SB)	HW Leicester & Leicestershire Member
	Aileen Farrer (AF)	ECS Corporate Services Manager (Minutes)
Apologies:	Rita Patel (RP)	HW Leicester & Leicestershire Member
	Mark Farmer (MF)	HW Leicester & Leicestershire Member

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1.	<u>Welcome and Introductions</u>	
	The Chair welcomed HAB to the meeting.	
	<u>Presentation</u>	
	The presentation on the Leicestershire County Council Health and Wellbeing Strategy was postponed due to unforeseen circumstances.	
2.	<u>Minutes of the Meeting held on 30 October 2018</u>	
	The minutes of the meeting held on 30 October 2018 were agreed as an accurate record.	
	<u>Matters Arising not on the Agenda</u>	
	A query was raised regarding whether the CCG had raised issues about enter and view visits to GP Practices.	
	It was confirmed that the E&V team had been planning to undertake visits to the healthcare hubs in October 2018, but this was found to be in duplication with Leicestershire CCG and will therefore be rearranged.	
	HW has recently approached the CCG about visiting Thurmaston Health Centre where there had been a lot of reported problems in the practice and contract delivery. The E&V group are aware of all the issues within the practice.	
	The CCG want to work together wherever possible and advise HW of issues to be aware of.	

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3.	<u>Actions from the Meeting held on 30 October 2018</u>	
	The action sheet has been updated and is attached to these minutes.	
4.	<u>Finance & Staffing Update</u>	
	<p>HAB were advised that appointments have been made to the two full-time Community Outreach Lead Posts and both successful candidates will be commencing on 2 January 2019.</p> <p>Finances are unlikely to be over budget.</p>	
5.	<u>Healthwatch Leicester & Leicestershire Work Programme</u>	
	<p>MS outlined the details contained in the gant chart, prepared as requested at the last meeting.</p> <p>Members were advised that the information regarding winter pressures is about gathering the views of the public, hints, tips and the way communication can be improved. Workshops are being held on 11 and 13 December and the public are being asked to register their attendance.</p> <p>The full details about winter pressures to be resent to members</p>	MS
	Deb Faulks, Senior Researcher continues to work on the Hospital Discharge project.	
	<p>Work priorities are an on-going process and as work is concluded further priorities will need to be agreed, these will be based on intelligence received.</p> <p>Work on the 2019/20 priorities will commence towards the end of January 2019.</p>	
6.	<u>Performance Issues</u>	
	Work on a previous priority around GP surveys has concluded and the report is now in the public domain. This has been shared with stakeholders, CCGs and the Health and Wellbeing Board. HK/MS presented the findings at the HWBB and these were well received and HW was commended on the contents of the report. West Leicestershire CCG want to do more work with Healthwatch on the findings.	
	The Enter and View Report from the visit to the Springfield Road surgery is included in the agenda pack and the report will be published after the HAB Meeting.	
	<p>As discussed previously a lot of planning was carried out on the E&V visits that did not take place due to duplication.</p> <p>There are also issues with the availability of Authorised Representatives to undertake visits and HAB were asked to note that HW is therefore falling behind with the number of E&V visits. MS is managing the situation and will be taking remedial actions to pull</p>	

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	the numbers back into line to the level expected by the commissioners and ECS.	
6.1	<u>Messages for Health and Wellbeing Board (City) 22 November 2018</u>	
	<p>The meeting capture form was included in the agenda papers. A big issue for Leicester City is diabetes and the local authority are to do more with the BME communities and younger people.</p> <p>GP practices will be signing up for the direct enhanced services contract offering diabetes support from April 2019. It is thought that the larger GP practices will be first to sign up. HK to get clarity about whether this is new money or reallocated funding.</p> <p>The service will identify patients sooner, provide more support for identified patients and will be looking to have services closer to home.</p> <p>Discussion took place about the social value charter and it was noted this was also discussed at OSC.</p> <p>With regard to the autism self-assessment framework it was noted that this is an organisational checklist and internal process about how autism friendly an organisation is. Whilst currently autism is not a priority for HW, there are good links within the City and County and these will be maintained.</p>	HK
6.2	<u>Issues for Overview & Scrutiny Committee</u>	
	<p>At the last County OSC, Mike Sandys presented the public health report, a copy of this to be obtained and sent to HAB.</p> <p>Discussions are taking place about changing terminology from frail elderly to frail and multi morbidity as this is less limiting to the older generation who are living longer and healthier.</p> <p>The report covers social prescribing and having better systems into non-clinical support, although this does not take account the diminishing voluntary sector capacity due to budget cuts.</p> <p>City OSC held discussions around hospitals and elective surgery which fits into the work HW is undertaking around real-life experience of cancelled operations.</p>	MS
6.3	<u>Feedback from Meetings</u>	
	Noted and opened for questions as below.	
	<p><u>LCCCG 13/11/18 Attended by Colin Norman</u></p> <p>The 62-day cancer wait is not being achieved and this fits in with intelligence received and links into cancelled operations. There appears to be a lack of correlation between the statistics and patient experience. HW to challenge as necessary as this is a topic that is discussed at other meetings.</p>	

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	<p>Ambulance performance and financial problems are also areas of concern and again it would be prudent for HW to have a look at the service particularly over the winter period. It was agreed that a light touch project could be undertaken on an intermittent basis to find out how many ambulances are waiting at the Hospital.</p> <p>Discussion followed on issues with 111 triaging and calling for ambulances when they are not always required. HK is hoping to meet with Mike Ryans and will discuss a better use of the system prior to patients being taken to A&E and the 111-service delivery taking patient choice into account.</p>	HK
7.	<u>Commissions/Consultancy Projects</u>	
	<p>MS advised that HW England have managed to secure funding from NHSE for engagement and outreach around the STP. HWLL have registered for this and further information is awaited. The work will take place between January – March 2019. When more details are known they will be shared with HAB.</p> <p>Discussions have been held with other organisations about the provision of engagement and outreach and again the outcome is awaited. HAB will be kept informed.</p>	MS
8.	<u>Local Issues</u>	
8.1	<p><u>Enter and View</u></p> <p>The context to the Springfield Road Surgery visit was outlined, and it was noted that issues and problems had been raised through various channels.</p> <p>The general sense from the visit was that there were no problems evident as per the intelligence received by Healthwatch. The recommendations contained in the report are around small improvements.</p> <p>HAB considered this to be a good report which will now be published.</p> <p>The longer-term aim is to get to a two-page succinct report wherever possible or to provide an executive summary for the lengthier reports.</p>	
9.	<u>Any Other Business</u>	
9.1	<p><u>HAB Terms of Reference</u></p> <p>HK advised that the HAB Terms of Reference had been agreed by all Boards. However, quoracy is an issue for LL HAB given the size of membership. Following discussion, it was agreed that quoracy would be 2 members plus chair and officer support.</p> <p>These TOR will be revisited when there are more HAB members.</p>	

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	It was also noted that the LL HAB will meet 6 times per annum in public. From April 2019 there will be separate public and business meetings, and these will be scheduled for the last Tuesday of the month 6.00 – 8.00 p.m.	
10.	<u>Date and Time of Next Meeting</u>	
	The next meeting will be held on 29 January 2019, 6.00 – 8.00 p.m. venue to be confirmed.	