

PUBLIC MEETING
Healthwatch Leicester & Leicestershire Advisory Board (HAB) Meeting
held on Tuesday 30 July 2019 6.00 – 8.30 p.m.
The Atkins Building, Lower Bond Street, Hinckley, LE10 1QU

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

Apologies: No apologies received

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1.	<u>Welcome and Introductions</u>	
	The Chair welcomed members to the meeting. Two members of the public were present.	
	<p><u>PRESENTATION</u></p> <p>Mark Wightman (MW), Director of Strategy and Communications at UHL attended to give HAB an update on the future plans for Leicester Hospitals which were outlined in detail. The 3 Year Quality Strategy and Priorities 2019-22 document which is being distributed to all stakeholders was tabled for the information of HAB.</p> <p>Members were advised that the total cost of all the proposed changes will be in the sum of £400M and the Trust want to take the plans out to formal consultation to obtain the views of the public. However, this cannot be undertaken at present until the Treasury has confirmed the funding. Sue Venables advised that conversations are taking place until such time as formal consultation commences. The Trust has been attending various groups to discuss the proposals and the wider context.</p> <p>Questions were raised as follows:</p> <ol style="list-style-type: none"> 1. How can the Trust ensure delivery of a leading class service when there has been no dialogue between LPT and UHL? MW was unable to clarify this issue but agreed to take it back to colleagues and provide a response thereafter. MW did advise that getting the clinics and services in the right place is the start of the process and that transformation of services follows. 2. Are the Local Authorities on Board with the changes? MW confirmed that the officers are on board with the proposals. 	MW(UHL)

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	<p>3. Clarification was sought on the timeframe for the work to be completed. MW advised this is 7-10 years from obtaining the funding.</p> <p>Mark Wightman and Sue Venables were thanked for their attendance and informative presentation. HK attends UHL Board meetings so will be able to raise issues in that arena.</p>	
2.	<u>Declarations of Interests</u>	
	No declarations of interest to be noted.	
3.	<u>Minutes of the Meeting held on 28 May 2019</u>	
	The minutes of the meeting held on 28 May 2019 were agreed as an accurate record.	
	<u>Actions from the Meeting held on 28 May 2019</u>	
	<p>The action sheet has been updated and is attached to these minutes. Specific points of discussion are as noted below:</p> <ul style="list-style-type: none"> • Colin Norman has been removed from all distribution list. Action closed. • Twitter accounts to be set up for members. Action outstanding. • Meeting to be arranged with Vi Dempster new HWBB Chair. Action outstanding. • Awards discussions to take place. Action Outstanding. 	
4.	<u>Work Programme Project Updates</u>	
	<p>MS provided an update as follows:</p> <p><u>Medicines Management</u> This project is to look at the patient experience between acute medicines – vs- community medicines. There had been a delay in commencement of the work due to data protection issues which have now been fully resolved. The survey is now live and it will be shared as widely as possible. The survey will be open for 6 weeks, and one week prior to closure HW will look at the response rate to measure the feedback being obtained. The standard procedure is to have on-line and paper-based version surveys and the Community Outreach Leads utilise as many ways as possible to engage with the community.</p> <p><u>Personal Budgets</u> The project is to commence in the near future and will be undertaken by semi-structured interviews. The team is currently recruiting members of the public to engage with on this project.</p> <p><u>Social Prescribing</u> The project is to understand public awareness of what social prescribing is. It was</p>	

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	noted that Primary Care Networks are already recruiting social prescribers.	
	<p>An update was given on the three special projects being undertaken:</p> <ul style="list-style-type: none"> • Experience of parents/carers of children with special needs around accessing dentistry services. • Health and social care experience of looked after children. • CAMHS. <p>It was noted that Dr Victoria Stapleton (VS), Head of Research is facing difficulties in engaging with LPT to get a full explanation of the changes to the CAMHS services over the last few years.</p> <p>MS to send connecting email between MF and VS to facilitate discussions between the two parties.</p>	MS
	<p>MS advised that it is the intention to commence conversations with the commissioners about the special projects for 2019/20, the proposals for which are:</p> <ul style="list-style-type: none"> • Public awareness and experience of raising a safeguarding alert. • Invisible disabilities patient experience. • Asylum seekers access to health and social care. • Digital access obstacles to accessing NHS digital services. • Veterans access to mental health. • Working with NHS Midlands & Lancs CSU on a pilot of measuring patient satisfaction with integrated services. • Managing multiple conditions patient experience. <p>The above list is not definitive and HAB members were asked to submit any other areas for special project work.</p> <p>Following discussion on the list outlined above to members, digital technology was one of the preferred options and this will be discussed with the commissioners.</p>	HAB MS
5.	<u>Intelligence/Feedback Update – Public Issues</u>	
	<p>The intelligence received by Healthwatch Leicester/shire over the last few months has been as follows:</p> <ul style="list-style-type: none"> • Experience of GP services – patient care being received. • Experience of patients in mental health services at the Bradgate Unit around nutrition. • Discharge work feedback – report to HAB in the near future. • Long term plan – the report is in draft form and there is a lot of insight to share with HAB. 	
6.	<u>Chairs Actions - Public</u>	

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	<p>The new Adult Safeguarding Board Chair is keen to meet with HK and this meeting is to be arranged.</p> <p>No actions to report.</p>	HK
7.	<u>Health and Wellbeing Board Update</u>	
	<p>HK gave the following update:</p> <ul style="list-style-type: none"> • The City HWBB has a new Chair and a meeting is to be arranged. • HWBB strategy and action plan discussed. • Air quality plan for the City reviewed. • Ongoing discussions about PCNs and implications for City residents. HK raised concerns about distance to travel and was assured that it would be the clinician that would move not the patient. This led to lengthy discussion at HAB and raised issues about practices in special measures and rural practices with no transportation links which may impact on patient care. MS advised that care to patients should not change but if this was not the case HW would raise this through the various channels available. • MF requested that the old age transformation process be raised at HWBB and OSC. There are a lot of decisions to be made and MF has tried to ensure patients are included in this, but this is not happening. It was agreed this would be discussed outside of the Board meeting in the first instance and then raised with the CCG. A concise explanation of concerns needs to be formulated to send to HWBB chairs. <p>MS attended County HWBB and the following issues were noted:</p> <ul style="list-style-type: none"> • Air pollution • Primary Care Networks • MS presented the Annual Report, received congratulations on this. It should be noted that the Annual Report is not a compendium of last year's work, it highlights examples of work undertaken by HW. 	<p>HK</p> <p>MS/MF/HK</p>
8.	<u>Overview and Scrutiny Update</u>	
	<p>MS attended the last City Adult Social Care Scrutiny meeting where extra housing was the main focus of discussion. MS raised the question about engaging with members of the public as without this community friction can be intensified. This needs to be borne in mind when attending the LD Partnership meetings.</p> <p>MS linked into the Adult Safeguarding Board and advised members of the liberty protection safeguarding coming into effect from October 2020. This replaces DOLS and will make a difference for people with late stage dementia and complex learning disabilities. It will make it easier to keep people confined against their will should it be deemed necessary. It may also mean that advocacy may not be in place for people who need it.</p> <p>MS advised HAB that he is a member of the Kings College research panel looking into Healthwatch, the method being used is ethnography. Learning will be gained from a number of different sites looking at how they work, obstacles and successes.</p>	

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	<p>13 other HW will sit on the review panel which has been commissioned by NIHR.</p> <p>HK attended OSC at which discussion took place on the CCG wanting to cease the walk-in element of appointments at Merlin Vaz centres. OSC have asked HW and the CCG to work together, potentially with Keith Vaz MP if he is involved. A meeting is being arranged and a report back will be given to the next OSC meeting.</p>	HK/MS
9.	<u>Enter and View Programme Reports</u>	
	<p><u>Aaron Court</u> The report was tabled for members. The Enter and View visit was undertaken in February 2019, and members were asked to note that the delay in finalising the report has been due to the provider challenging HW findings and recommendations.</p> <p><u>Rushey Mead</u> Tabled for members. Again, the visit was undertaken in February and delays occurred due to provider challenges. A number of issues were raised at the visit resulting in serious concerns which have been raised through the contract quality links in the Local Authority, who then conducted their own inspection.</p> <p>Reports were presented to HAB for information. The circulation list on the report was noted and members were advised that an informal distribution list sits alongside this.</p> <p>No queries were raised.</p>	
10.	<u>Healthwatch Reports Published</u>	
	<p><u>Annual Report</u> Submitted within timescale, thanks extended to all who contributed to the work.</p>	
11.	<u>Health and Social Care Issues from the Public</u>	
	<p>The Vice-Chair of the Local Dental Committee commented the meeting was of interest, and with regard to digital media questioned whether HW had considered blind people. The voice service computers are not the best for people with dementia or hard of hearing. People on universal credit should not be forgotten as a lot of people on low incomes are unable to access IT.</p> <p>As Vice Chair of the LDC a request was made about whether HW can assist with the number of children admitted for general anaesthetic for tooth extraction in Leicester. It was agreed that MS would make contact outside of the meeting to look at this further.</p>	MS
12.	<u>Any Other Business</u>	
	<p>No items of any other business were raised.</p>	

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13.	<p data-bbox="236 241 667 275"><u>Date and Time of Next Meeting</u></p> <p data-bbox="236 320 1331 387">The next Public Board Meeting will take place on 24 September 2109, 6.00 p.m. the venue is to be confirmed but the indicative location is Melton.</p> <p data-bbox="236 432 1134 465">The focus of the next meeting will be old age transformation process.</p> <p data-bbox="236 510 1326 577">The next development session for HAB members will be held on 27 August 2019 at the HW Leicester/shire offices.</p>	