

**Minutes of the Board of Healthwatch Leicestershire**  
**Thursday 22<sup>nd</sup> January 2015**

**Present:**

Chair: Rick Moore (RM), Vice Chair - Gillian Adams (GA), Sue Staples (SS), Fiona Barber (FB), Anne Collier (AC), Alastair Wood (AW), Chris Faircliffe (CF), Mina Rodgers (MR). Narendra Waghela (NW), Vandna Gohil (VG).

**In attendance:**

- Staff Members: Ivan Liburd (IL), Cherelle Farrell (CF), Gemma Hammond (GH), Geraldine McLaughlin (GMcL)
- HWL Members: Ian Staples (IS)

**Apologies:**

- John Baker (JB), HW Member, Ashby & District Hospital Rep.

Item	Discussion	Action/Outcomes
2015.01.01	<b>Welcome &amp; Introductions</b> <ol style="list-style-type: none"> <li>1. The Chair welcomed the Board.</li> <li>2. The Chair informed the meeting that Ian Clarke has resigned from the Board, however he will continue to be the LLR rep on the Learning Lessons Clinical Task Group.</li> <li>3. The Chair gave a warm welcome to Ian Staples (IS) HW member who was in attendance.</li> </ol>	<b>Ian Clarke's new position was noted and the Board appreciated his continued involvement.</b>
2015.01.02	<b>Declarations of Interest in respect of the Agenda</b> The Board was asked to declare any conflicts of interest.	<b>There were no declarations of interest.</b>
2015.01.03	<b>Minutes of the meeting held on 15 October 2014 - Paper 1</b> The minutes were agreed as a true and accurate record.	<b>The minutes of 15 October 2014 were agreed as a true record.</b>
2015.01.04	<b>Actions Update 15 October 2015 - Paper 2</b> The meeting noted Paper 2 and that all actions from the previous meeting were completed, or on the Agenda for the meeting or deferred for Board discussion.	<b>The meeting noted that Item 2014.10/06 with reference to 'patient story' on future Board</b>

		<b>agenda.</b>
2015.01.05	<b>Chair's Report - Paper 3</b> <ol style="list-style-type: none"> <li>1. RM presented a verbal report, outlining the activities that he had been involved in. These include: HWBB, Health &amp; Social Care, Winter Wellbeing Fairs, Blaby 'Lightbulb project' steering group, QSG meetings, one-to-ones with key stakeholders.</li> <li>2. The Chair highlighted media requests and the importance of promoting Healthwatch Leicestershire's role as a watchdog and consumer champion, promoting a balanced view for the residents of the county, representing circa 650,000 residents.</li> </ol>	<p>The Chair's Report to the Board was noted and he was commended for raising the profile of HWL in the media.</p>
2015.01.06	<b>Vice Chair Update - Meetings with Stakeholders</b> <b>Quarterly Meetings with John Adler, CEO</b> <ol style="list-style-type: none"> <li>1. GA gave a verbal update, highlighting the quarterly meetings with John Adler, CEO and headlines from UHL Board.</li> <li>2. The November meeting was well-attended. There were 9 HW representatives and significant questions from outreach activities, the majority being from Leicestershire.</li> <li>3. The Hot Topic was on the Mortality Review, the next hot topic being the new ED floor, starting on 11 February 2015.</li> <li>4. SS asked how this would affect the planned closures of 3 wards. This will provide an opportunity for HW to hear about any progress and developments regarding this.</li> </ol>	<p>The Board commended GA on her new arrangements for the meetings as it focuses on the key issues as well as searching matters.</p> <p>4. SS was asked to provide a note to include the ward closure as a question for the February Quarterly meeting with UHL</p>

2015.01.07	<p><b>Quarterly Meetings with Dr Peter Miller, CEO and headlines from LPT Board</b></p> <ol style="list-style-type: none"> <li>1. SS reported that the meeting was not well attended. More work is needed to improve attendance. Meetings have been arranged with the LPT Comm's team to help raise awareness about LPT services to help gather questions.</li> <li>2. Members of the public not aware of Healthwatch or LPT services. SS working with CF to help raise awareness.</li> <li>3. The 'hot topic' approach from UHL quarterly meetings has been adopted with Transformation and District Nurse services noted.</li> <li>4. No further information on the Bradgate Unit, working on the CAMHS temporary move to Coalville with the Crisis House opening on 25<sup>th</sup> January ( step down service).</li> </ol>	<p><b>The report from SS was noted by the Board.</b></p>
2015.01.08	<p><b>West Leicestershire CCG</b></p> <ol style="list-style-type: none"> <li>1. FB reported on her first meeting of the West Leicestershire Board on 13 January 2015, having circulated her feedback report.</li> <li>2. The main interests for Healthwatch were: Co- Commissioning, and Primary Care Medical Plan.</li> <li>3. The patient and co-design element had not been high on the list but this will be monitored.</li> <li>4. The Hinckley co-design initiative having no GPs attending.</li> <li>5. GPs have identified a need for a Frail Elderly Unit, similar to that in Loughborough, in Hinckley, with a large public car park and good public access.</li> <li>6. Governance structures need to be altered to allow co-commissioning governance.</li> <li>7. There was a presentation by EMAs, attended by many GPs Continuing Healthcare Review: NHS funding for patients to receive full 'nursing</li> </ol>	<p><b>FB's report to the Board was noted.</b></p> <p><b>2. Monitor implementation of Primary Medical Care Plan.</b></p> <p><b>5. Ensure continuing engagement and consultation for plans at Hinckley.</b></p>

	type' care.	
2015.01.09	<b>East Leicestershire &amp; Rutland CCG</b> <ol style="list-style-type: none"> <li>1. SS gave a verbal report on the East Leicestershire and Rutland CCG Board and commented that it was positive having FB working closely together as this gives an awareness of different approaches.</li> <li>2. ELR CCG is 'patient centred' with a lot of dialogue on quality, using statistical information.</li> <li>3. The meeting noted that ELR CCG hold the contract for EMAS and Arriva patients use the 'choose and book' system and can choose to travel to a hospital of their choice.</li> <li>4. The meeting noted that Dave Briggs leaving w/c 26<sup>th</sup> January and that recruitment is taking place for the post.</li> <li>5. Urgent Care Board improving.</li> <li>6. VG, SS and GH from Healthwatch have met with the consultants that are planning the engagement on the Primary Care strategy.</li> </ol>	<b>1. SS &amp; FB to meet to look at approaches and crossover issues.</b>  <b>SS report to the Board was noted.</b>
2015.01.10	<b>County Council JSNA/JHWS Steering Group</b> <ol style="list-style-type: none"> <li>1. CF reported that Janine Dellar's paper had been sent for the workshop following the meeting for Board members and that this provides the contextual and background information.</li> <li>2. JSNA gives an independent view and paints a good picture of the needs of people across the area. He added that the projections are good and it runs in parallel with Pharmaceutical Needs Assessment.</li> <li>3. Healthwatch is seen as a credible resource and are invited in to challenge and ensure things are being done correctly.</li> </ol>	<b>CF's report to the Board was noted.</b>

2015.01.11	<p><b>Task Groups and Representation: Ambulance and Arriva Services ( ATS) .</b></p> <p><b>EMAS</b></p> <ol style="list-style-type: none"> <li>1. IS reported that following an internal restructure at EMAS a new General Manager, Tim Slater has been appointed for Leicester, Leicestershire &amp; Rutland.</li> <li>2. HWL have not met with EMAS since October 2014. The January meeting was rescheduled and is now taking place on the 26th February 2015. This will be our first meeting with Tim Slater. All planned dates going forward for 2015 remain unchanged</li> <li>3. One of the main areas of concern for HWL remains the handover process at LRI between EMAS and UHL. We have been informed by EMAS that despite them completing their post-handover responsibilities in approximately 9 minutes rather than the allotted 15 minutes, LRI are taking approximately 21 / 22 minutes rather than their 15 minutes to complete the pre-handover process. The result is ambulances waiting outside A&amp;E for longer than scheduled. HWL, as part of its 30 hours in LRI exercise will be observing the handover process to establish what the process actually is and to verify what EMAS are saying.</li> <li>4. EMAS are now providing us with Performance figures and we have some concern that there has been a downward trend over the last couple of months with some targets not being met by up to 7%. This will be discussed in more detail with Tim Slater at the February Quarterly meeting and we have requested to see the qualitative report that goes to the EMAS Trust Board explaining why targets have not been met.</li> </ol>	<p>The report was noted and the Board thanked IS for all his work.</p>
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	<p><b>Arriva</b></p> <ol style="list-style-type: none"> <li>5. IS reported that HWL held their first Quarterly Meeting with ATSL in December 2014. In addition to IS members of the HWL Board and HWL staff team attended a meeting with Louise Bettany, Operational Manager fro Leicestershire &amp; Nottinghamshire and Phil Hennessey, Communicatins &amp; Engagement Officer for the East Midlands</li> <li>6. ATSL gave a presentation giving an overview of their operation, the contract requirements they are working to, the obstacles they are facing and the solutions they are putting in place to overcome them</li> <li>7. It appears that two of the biggest obstacles they are facing are             <ol style="list-style-type: none"> <li>a) the number of patients needing stretcher facilities. This is far higher than was originally contracted for. On an typical day they will deal with 77 discharges, the majority of which are booked on the day and require a stretcher.</li> <li>b) the number of out of county journeys that are required. Again this has proven to be much higher than contracted for. On the day HWL visited they had 45 Out of County journeys booked. Each journey, some as far away as Sheffield can take several hours. With only 68 vehicles on their fleet they are having to use other services, where appropriate, to assist them</li> </ol> </li> <li>8. Following this successful first meeting we have now established a programme of quarterly meetings to build our relationship and continue to monitor the ATSL performance.</li> </ol>	
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2015.01.12	<p><b>Ashby Hospital Implementation Board</b></p> <ol style="list-style-type: none"> <li>1. SS reported on behalf of John Baker who is the HWL representative on the group.</li> <li>2. RM,JB, SS and VG met with Ashby Civic Society on 5th December 2014 where it was agreed that HWL can offer support to broker meetings that looked at the future provision of services.</li> <li>3. HWL will also explore ways in which local experience could be captured to build up a more informed picture of service user experience and insights. These insights can then be used to inform WLCCG and LPT in the next stage of any public consultation and service provision/design. <ul style="list-style-type: none"> <li>• HWL will promote the consultation events in the new year via its membership and networks.</li> <li>• HWL to capture evidence and insights on local experience</li> <li>• HWL Participating Observer on WLCCG to flag up the importance of community consultation.</li> <li>• JB to monitor what the NHS says will be delivered and that this is delivered well.</li> <li>• Sue Staples will continue to ask questions in her role on the LPT Board and for business to be reported in the public part of the meeting.</li> </ul> </li> <li>4. VG highlighted that what we have done is work with Ashby Civic Society as a 'watchdog', to capture the views of people. We are putting any comments on our website and will work impartially to assist in any way.</li> </ol>	<p>The report was noted and the Board appreciated the work JB was doing working closely with SS.</p>
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2015.01.13	<p><b>NHS Complaints Working Group (Leicester &amp; Leicestershire) - Paper 3</b></p> <ol style="list-style-type: none"> <li>1. The report outlined the change to the remit of the NHS Complaints Work Group to incorporate Social Care Complaints, development of the specific work plan for the Work Group, Continuation of joint work, previously agreed.</li> <li>2. FB reported that this group had reinstated and referred to the Ombudsman report on Complaints backed by the HWE.</li> <li>3. The next meeting is on 5<sup>th</sup> February 2015, the current Chair, Helen Child, is due to step down and a new Chair will need to be appointed.</li> </ol>	<p><b>The Board noted the importance of maintaining momentum and asked FB and SS to look at how HWL can provide leadership.</b></p>
2015.01.14	<p><b>Healthwatch Winter Tour Feedback Summary - Paper 4</b></p> <ol style="list-style-type: none"> <li>1. IL presented the report, for information and discussion, providing a summary update on the feedback from the winter tour engagement carried out by HWL Development Team.</li> <li>2. HWL had seen many different groups across the County during September 2014 - February 2015, including colleges, user groups and black minority ethnic groups, vulnerable adults and those that are rurally isolated.</li> <li>3. To date the tour has engaged with over 160 people.</li> <li>4. A full report will be completed at the end of the tour in February.</li> </ol>	<p><b>The Board noted the interim update report and congratulated the Team for all their hard work.</b></p> <p><b>4. The final report will be presented at the next Board meeting.</b></p>
2015.01.15	<p><b>Healthwatch Leicestershire Information &amp; Advice Service - Paper 5</b></p> <ol style="list-style-type: none"> <li>1. CF presented the report, for information and discussion, providing an update on the Healthwatch Leicestershire</li> </ol>	<p><b>The Board noted the report.</b></p>



	<p>Information and Advice Service that supports the priority work streams 'Listening to the local population' and 'Advice &amp; Information'. This paper includes a summary of themes and issues collated from calls, emails and engagement through county drop-ins.</p> <ol style="list-style-type: none"> <li>2. CF highlighted that during 1<sup>st</sup> October and 31<sup>st</sup> December 2014, the Information and Advice Service had operated between 2-4 p.m., Monday - Friday, via telephone, with voicemail services available 24/7, with 87 calls being registered.</li> <li>3. The majority of enquiries during the quarter (Oct-Dec 2014) were Health Care issues and concerns and 'Signposting - Dentist' at 40% and 37%. Social Care issues and concerns still remains to be the lowest, only receiving 6 issues and concerns.</li> <li>4. The main two Leicestershire districts to contact the Service are currently Charnwood and Oadby&amp; Wigston, there being a significant increase in Charnwood residents utilizing the service with dental issues.</li> </ol>	
2015.01.16	<p><b>Membership Update - Paper 6</b></p> <ol style="list-style-type: none"> <li>1. GH reported that, in this quarter, the staff team have continued to recruit new members as part of the Winter roadshow and at the Winter wellbeing fairs. All Board members have received membership packs so they can recruit individuals at meetings and events.</li> <li>2. Following the complete data cleanse exercise in November-December 2014, all duplicate entries have been removed from the database, unsubscribed individuals from receiving the newsletter on request and removed any emails not working from the mailchimp database.</li> </ol>	<p>The Board noted : Implementation of the Membership drive by April 2015 (lead GH); to continue to recruit members at events and meetings (ALL).</p>

	<ol style="list-style-type: none"> <li>3. Cleansing the data resulted in membership numbers decreasing overall by 6, however, 164 new members have been recruited since the introduction of the new membership forms.</li> <li>4. A new reporting tool has been added to the current database and this has helped distinguish members by type, district, contact district.</li> </ol>	
2015.01.17	<p><b>Evidence, Insight and Research: Enter and View &amp; Safeguarding Update</b></p> <ol style="list-style-type: none"> <li>1. The Enter &amp; View and Safeguarding (E&amp;VnS) Working Group have received 10 applications following the Enter &amp; View Authorised Representatives recruitment campaign. The applications have been reviewed following the internal process and eight of the applicants have been invited to attend a 'Preparation for Enter &amp; View' session on 28 January.</li> <li>2. The team have completed the third Enter &amp; View visit that took place on 5 January 2015.</li> <li>3. Planning and arranging an Enter &amp; View visit is a very lengthy process and the team have been liaising with the providers involved to help them to understand Enter &amp; View and Healthwatch Leicestershire's statutory duties to undertake a visit.</li> <li>4. The team will be developing an Enter &amp; View handbook for providers so that they have more information prior to any potential visit.</li> </ol>	<b>The report to the Board was noted.</b>
2015.01.18	<p><b>One week at UHL update</b></p> <ol style="list-style-type: none"> <li>1. IL presented an update on the visit to UHL where the HW Leicestershire is leading the initiative to spend 30 hours involving staff, Board and volunteers visiting the following departments <ul style="list-style-type: none"> <li>• Ears, Nose and Throat (ENT)</li> </ul> </li> </ol>	<b>The update was noted and a plan for presenting the report and headlines to UHL Quarterly meeting was agreed.</b>

	<p>Department</p> <ul style="list-style-type: none"> <li>• Ophthalmology Clinic</li> <li>• Ophthalmology Casualty</li> <li>• Discharge Lounge</li> <li>• Accident &amp; Emergency</li> </ul> <p>2. The Board agreed that initiative was exactly the type of activity that Healthwatch should be engaged with in its role to understand what matters to people most and to influence providers.</p>	
2015.01.19	<p><b>CQC Inspection of LPT in March 2015</b></p> <ol style="list-style-type: none"> <li>1. SS reported on the forthcoming CQC inspection of Leicestershire Partnership between 9-13 March 2015.</li> <li>2. In order to seek and gather people's experience of care and treatment provided by the Trust, and to ensure the voices of people who use LPT provision are heard and taken into account the following activities are being undertaken: <ul style="list-style-type: none"> <li><b>a. Callouts to HW members</b> <ul style="list-style-type: none"> <li>• General callouts to City &amp; County members via E-news</li> <li>• Targeted callouts aligned to LPT divisions</li> </ul> </li> <li><b>b. Marketing Campaign</b> (Posters to be sent to community hubs, libraries, Children's Centre, VAL Health &amp; Social Care and CYP Forums, VSC stakeholders, PPGs groups and forums)</li> <li><b>c. Drop-In Clinics County:</b> <ul style="list-style-type: none"> <li>• Loughborough Hospital</li> <li>• Market Harborough, St Luke Hospital</li> </ul> </li> <li><b>d. Targeted Tweets</b></li> <li><b>e. Listening Events</b> in partnership with CQC</li> </ul> </li> </ol>	<p>The meeting noted that a joint City and County submission would be prepared for CQC and sent by correspondence to Board members for comment.</p>

2015.01.20	<p><b>Draft Quarter 3 (October - December 2014)</b></p> <ol style="list-style-type: none"> <li>1. VG presented a Report, outlining the progress in Quarter 3 with the following highlights:</li> <li>2. HWL has exceeded the target by 26% of attendees through the engagement programme HWL has been in contact with 4434 people overall to date.</li> <li>3. Noted the collaboration with WLCCG on the special cards published with 5 key questions for patients to ask.</li> <li>4. The MAGIC cards are available in all 50 GP practices and distributed by HWL.</li> <li>5. HWL has increased its membership by 61% in Q3 following a simplified process, data cleanse exercise and engagement activities. The membership stands at 2342.</li> <li>6. Engaged with 30 stakeholders for the Winter Wellbeing fairs and 53 people had mini healthchecks at the events.</li> <li>7. Strong presence and input to HWBB with HWL routinely asked to present evidence, insights and patient feedback.</li> <li>8. Publication of the Health and Social Care Sign posting Directory. The directory is branded Healthwatch Leicestershire and we have provided the content for the first four pages. <ul style="list-style-type: none"> <li>- We also contacted Better Care Together and the local CCGs to provide information about them.</li> <li>- Healthwatch Leicestershire also worked with VAL to identify and contact suitable third sector organisations to see if they would like to promote their services in the back pages of the directory.</li> </ul> </li> </ol>	<p>The report was approved with minor amendments before submission to the Commissioners.</p> <p>The Chair and Vice Chair commended for their work in building the relationship with County Council HWBB.</p>
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	<ul style="list-style-type: none"> <li>- The editorial in the directory has been written by Healthcare Publications and comes from the NHS website, and is the latest NHS news and information. All advertisers in the directory are CQC checked.</li> <li>- Twelve thousand copies of each directory will be printed and dispatched to GP surgeries, pharmacies, hospitals, domiciliary care providers, residential/nursing homes, various local authority departments, Meals on Wheels and health related care providers for them to distribute to their patients/customers.</li> <li>- Healthwatch Leicestershire has approx. 300 copies of each Directory and will distribute them to stakeholders in various meetings and to the public at engagement events.</li> <li>- A second edition of both directories will be produced and ready to dispatch in 6 months time (July/August).</li> <li>- The production and print of the Directories has been free of charge to Healthwatch Leicestershire. Health Publications Ltd make their money by selling the advertising space.</li> </ul>	
2015.01.21	<p><b>EMAS presentation on 'Better Patient Care' and draft five year plans.</b></p> <p>The Chair welcomed Paul St Clair, Assistant Director of Operations, EMAS and Debbie Tweddle, Locality Manager, Leicester, Leicestershire &amp; Rutland.</p> <p>Due to commitments, the Chair and Vice Chair left the meeting and handed over the Q&amp;A session to the Director.</p> <p>The following is a summary of the issues highlighted:</p> <ul style="list-style-type: none"> <li>• The link between 999 calls and GP</li> </ul>	<p><b>The meeting thanked the presenters and agreed to convene another session for a follow up.</b></p>

	<p>practices</p> <ul style="list-style-type: none"> <li>• The Board noted that Leicestershire is piloting an new approach to ‘falls’ with 224 para medics trained in advanced falls handling which includes assessment skills, physio/occupational therapist assessment and referrals to social care.</li> <li>• The Board noted that 47% of calls are non -conveyance.</li> </ul>	
	Meeting closed at 1.15 p.m.	

**Date of Next meeting is 23<sup>rd</sup> April 2015.**