

Minutes

Meeting: Healthwatch (HW) Southend Advisory Board
 Date: Monday 13th March 2017
 Time: Public Meeting 9.30-10.45
 Location: The Boardroom, Balmoral Community Centre, Salisbury Avenue, W-O-S SS0 7AU

In Attendance: Leanne Crabb (Chair), Chris Gasper, Caroline Southgate, Jan Symmonds, Kim Paterson (Minutes)

Public Meeting

No	Item	Action
1.	Welcome, introductions & apologies LC welcomed Harry, Bill and Mr Ali from the public to the meeting. No apologies had been received.	
2.	Minutes of Last Meeting	
2.1	Engagement with Children & Young People – LC is in contact with the Youth Council and has no dates as yet.	
2.2	Success Regime – LC advised this will be discussed later in the meeting.	
2.3	3) Southend, Essex and Thurrock Mental health and Wellbeing Strategy – LC received no views on the document circulated last meeting. LC has sent some questions regarding how the 3 rd Sector will look.	
2.4	4) Attracting new board members – LC has not heard from AC as to how she got on at the child conferences mentioning we were looking for new board members.	
2.5	It was agreed the minutes of last meeting were accurate.	
3.	2016/2017 priorities	
3.1	Engagement with Children and Young People Healthwatch are working with the Youth Council who are setting up a Scrutiny Committee, the meetings will consist of a Health Committee that the Youth Committee will be able to question. Healthwatch will be present to capture the young people’s concerns. There is now a youth councillor in each Senior Southend School. The Youth Council will help us getting feedback for the Success Regime. Healthwatch has teamed up with Essex University and the Children’s Centres offering fluoride to be painted on children’s teeth in deprived areas. The trials are being held in the children’s centres and LC was present for the first one at Cambridge Road Children’s Centre, it was a very fun session with lots of activities for the children to do and educating the parents, the second session will be when the fluoride is painted on the children’s teeth, it is hoping that if this is successful further funding will be granted to continue. Healthwatch asked parents questions about why not registered at a dentist etc. Bill commented that he remembers some time ago a big thing about too much fluoride in the water – LC advised that the fluoride being painted on helps to stop the deterioration of the baby teeth, diets are a lot more sugary	

<p>3.2</p>	<p>these days. Success Regime It was hoped by now that the consultation would be ready but it looks more like July now. CG advised that there were 5 options and it is now going down to 2. Southend is now potentially down as a yellow A&E – there are a lot of unanswered questions. LC said that once the consultation comes out Healthwatch will get as many paper copies and emailed copies circulated as possible. CG had questioned facilities being moved into GP Clinics ie. Shoebury/St Lukes covering the East what about the rest of Southend – the answer received was only work 9-5 Monday to Friday – every question seems to pose another question. CS – some buildings won't be fit for purpose – if operating the air conditioning needs to be a certain type. Ambulance staff would need to be trained to deal with any medical emergency called to, is there going to be enough transport? CG – if assessment centres are not available in Southend what will happen? CG handed out an NHS paper which advised 95% of patients will be seen at their local site. CG had worked out some calculations and believes 5% equates to 137 journeys per week that would be sent to another hospital this would cause a big transport issue. CS – when the Burns Unit moved from Billericay to Chelmsford there were big difficulties so the NHS should be aware. X30 add to Broomfield as a stop that would help patients going to Chelmsford. Bill – when he had questioned about the transport he was told it was a bus service problem. LC – all comments are being feedback to the Success Regime, LC to ask what effect there will be on the 5% and send the response out to the board. There are meetings being held at Saxon Hall and SAVS tomorrow, LC to attend the SAVS meeting, Comms Team from Success Regime are expected to be there. CG felt that these meetings need to be wider circulated otherwise always the same people attend and if a large group doesn't attend it will be assumed everyone is happy with what is being proposed. LC had asked for the meeting to be held at the Cliffs Pavilion but they advised it could not be moved.</p>	<p>LC</p>
<p>3.3</p>	<p>Access to GP Services LC reported she is getting together some stats for the next PPGF meeting to detail how is giving out more appointments etc, doesn't matter the size of the GP should all get the same service. At present GP surgeries are all open at different times, if a patient struggles to get an appointment they go to A&E. Healthwatch are trying to promote patients sign up for online appointments at their surgery – instant access to appointments, no hanging around on the phone or in the waiting room, frees up the receptionists to deal with phone calls quicker. CS advised that surgeries will not accept an email you have to fax them, not many places have fax machines anymore. Bill – at last PPG meeting the practice manager advised that they receive</p>	

<p>3.4</p> <p>3.5</p>	<p>about 1000 emails per day and have to filter through what is spam and what needs actioning that's why they prefer a letter or a fax.</p> <p>Bills surgery runs on System One and you can book normal appointments on line but if need an emergency appointment need to ring still.</p> <p>LC – CCG are looking a getting all GP's doing the same but it is a long way off.</p> <p>Domiciliary Care</p> <p>LC has met with Karen Peters at the council and talked about the concerns with carers not turning up, carers turning up late – Karen explained the size and scale of the contracts. Communication was discussed and Healthwatch will consider visiting their admin teams.</p> <p>Bill – had a problem this weekend with his carer not turning up until the next day.</p> <p>CS – big recruitment problems in this area, a carer will often have 17 people to get up in the morning and if someone phones in sick another 17 has to be picked up by someone. Staff are treated very badly so they leave.</p> <p>LC will be visiting domiciliary care offices to see what the problems are first hand from them – Karen is arranging this.</p> <p>CS – advised of two big care providers closing down – LC to find out what has been put in place to support this.</p> <p>CG – if employ from abroad have to pay £1,000 first.</p> <p>Patient Participation Groups</p> <p>Since to last PPGF meeting there are another 3 PPG's set up and one of these is Queensway which is one of the larger surgeries, they will be attending out next PPGF meeting.</p> <p>Mr Ali – has tried hard to persuade his new surgery to have a PPG group, he put his name on a list and attended the meeting but only two other patients turned up, GP, Practice manager and Receptionist, he mentioned attending the PPGF meetings and was advised that someone would attend. Mr Ali checked that the surgery receive copies of the minutes and yes they do.</p> <p>LC advised that Sarah the newest member of Healthwatch is visiting all GP's introducing herself and what Healthwatch do – LC to look at a mailout to all GP's to advise what Healthwatch do and how they can help the surgery setting up a PPG etc.</p> <p>Bill advised that his surgery has a larger online virtual PPG, the group that meets is smaller and finds this works.</p> <p>LC agreed that this does work well for some surgeries and recently helped St Lukes set up theirs.</p>	<p>LC</p> <p>LC</p>
<p>4.</p>	<p>Joint Primary Care Commission Committee</p> <p>NHS England used to hold the contracts for GP Surgeries and task any under performing but now Southend CCG have full responsibility. CCG are very aware of the differences at surgeries and hold a meeting every month at Harcourt House which is open to the public, Healthwatch are also on the board but not as a voting member.</p> <p>The meetings give a good overview of local problems and what the CCG are doing to solve these.</p> <p>Next meeting 23rd March 12.30pm – it would be good if more members of the public attended.</p> <p>CG attended in December and found it interesting.</p> <p>CG would be good if they advertised what would be on the agenda to encourage more members of public to participate.</p>	

5.	<p>Attracting new board members/volunteers Volunteers. LC to see if will be allowed to attend the event as well. Bill – would want to know what getting into – is there a job description, what are the responsibilities etc. LC to look out a job description to circulate.</p>	LC
6.	<p>Questions from the public Mr Ali – noticed that advertising on website for Trustees, has compared with how Link was run and the problems rose of attending regular meetings. More people that attend the meetings more interest will be generated. Mr Ali had contacted a few people but they would want to know what they were accountable for, what would be doing – suggest a visible presence at groups etc. Mr Ali feels that the joint Primary care Commissioning Committee is very important and should have been delegated a long time ago. Mr Ali feels that the Family & Friends forms should be completed more at surgeries and Healthwatch should promote these as capturing patients' views. Bill – promote the Friends & Family forms at his surgery but receive very few completed. LC - works well at the hospital – it was agreed this would be discussed at the next PPGF meeting. CS - suggested putting up numbers of how many responses received so they are visible then more people may take part. CG - at their surgery they complete a questionnaire once a year in person and get a much better response and idea of problems or what they're doing well. LC to feed this idea back to PPGF as well. LC advised won't be able to get stop Friends and Family form but can suggest other things. Mr Ali – puzzled about management structure in Southend. LC - advised that Ian Stidston who is CEO of Castlepoint & Rochford will temporarily be CEO for Southend for six months. CG - as a Southender he feels the whole Southend system is being downgraded. Will Ian be attending the meeting next week. Sue hardy has now left the hospital, Clare Panniker – will she go to all governor meetings including Southend? Feel Southend is being sidelined. LC - to find out what the structure/chain of command at the hospital is. CS - advised that the public need to know who is in charge. Harry – 5 year forward view for mental health – national crisis. Harry has spoken to CQC about this but they don't deal with it, he feels the only practical alternative is for us to take forward – Harry handed out a 1 page document and would like everyone to think about and let him have comments. Harry to forward to Leanne by email so she can send out as well. Harry was thanked for this.</p>	<p>LC</p> <p>LC</p> <p>LC</p> <p>ALL</p> <p>Harry</p>

7.	Date of Next meeting Monday 12 th June 2017 9.30 – 12.00 – KP to book room at Balmoral – date to be put on the website when confirmed.	KP/LC
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