



## Public Minutes

Meeting: Healthwatch (HW) Southend Advisory Board  
 Date: Tuesday 5<sup>th</sup> March 2019  
 Time: Public Meeting 17:00 – 18:00  
 Location: Centre Place Children’s Centre, Prospect Close, Southend-on-Sea, SS1 2JD

In Attendance: Jean Broadbent (Chair), Freddie Dawkins, Chris Gasper, Sally Manzoni, Jan Symmonds, Rosie Gorham (Minutes)

Apologies: Wendy Dodds, Denis Garne, Bill Glanvill, Steve Bellingham, Isaac Kleinshmit

No	Item	Action
1.	<b>Welcome and introductions</b> JB welcomed everyone to the meeting Majzoub B Ali arrived after welcomes.	
2.	<b>Apologies for absence</b> Apologies from Wendy Dodds, Denis Garne, Bill Glanvill, Steve Bellingham, Isaac Kleinshmit	
3.	<b>Minutes of last meeting and matters arising</b> Discussed JB’s meeting with Emily Turkington at HARP – Gary Turner from HARP (Service Operations Manager) now looking into. HW to ensure the discharge policy to be looked at – possibility of referring patient back to GP. JB attended Mental Health Forum Project 49 – HW to put together a survey for those who use their services  Southend Foundation Trust Annual Report & EPUT Annual reports requested for HWS to comment  CG – conversation around transportation for Mid & S Essex STP. Information on transport to be put on the website	<b>JB action this</b>
4.	<b>Locality strategy</b> JB: conversation around this – more news to follow. Need to establish facts and simplify for public. Locality workshop 07/03/19.  Local Authority Citizens’ Panel – engage with 1000-1200 people. This will be disclosed later by CCG through their public engagement and will be reported at next PPGF	<b>JB</b>

<p>5.</p>	<p><b>Booked public engagement events to date in 2019</b></p> <p><b>JB's Engagement report</b></p> <ul style="list-style-type: none"> <li>• STP Development – Plans ongoing, public and residents in Southend still not able to clearly understand the implications. Referred back to SofS. Chris Gasper attends meetings regarding Transport issues and feeds back to HWS Board. Attendance at meetings are shared with HW Thurrock and HW Essex.</li> <li>• Groups – maintaining links and attending meeting with provider and support organisations to establish pathway to refer to us. Difficult to contact Transpire. SHAN, HARP, Mental Health User Forum, MH MDT, A Better Start, Hubs, CAB.</li> <li>• Arrange meetings with SU Football Club to gain views of male residents. Meeting arranged with Chinese Elders end March.</li> <li>• Plans afoot to change format of PPGF &amp; CEAG due to draft Comms and Engagement Strategy from CCG. Details to follow. Attending South East Essex Locality Working Group – currently looking at Marketing and Comms of offer to residents. Requested that plain English be used and availability of various formats. Revised Engagement to be agreed.</li> <li>• Attending Scrutiny Comm regularly &amp; HWB. Raised issues about Autism waiting times at January meeting and requested an up to date pathway from Children &amp; Learning Directorate for HWS to publish. Monitored the satisfactory move of patients from Rochford Hospital to Thurrock and report to HWB.</li> <li>• NHS Long Term Plan - £2500 available to each HW to gather views of NHS LTP. Working in partnership with HW Thurrock (Lead Coordinating HW) and HW Essex. Work to be completed by mid May and guidance/toolkit will be available. Details to be agreed asap. Scoping additional temporary input from SAVS to support with events to be discussed.</li> <li>•</li> </ul> <p>FD: requested times to be added to engagement events  JS: further events suggested such as Village Green and Little Heroes Dads Project</p> <p>Conversation around Community Engagement Advisory Group in Southend. CCG would like to combine PPGF &amp; CEAG – CG thought this would render the meeting difficult to manage in terms of reporting back as gap between meetings would be too long</p> <p>CG – a need for a clear pathway from patients to secondary care in hospital. Will be just one board for all 3 hospitals and board meeting every 2 months but at different hospital each time. Only in Southend twice a year.</p> <p>CG – putting himself forward as chair of SUAG  Discussion around CCG and how it is unclear who direct patients to there.</p>	<p><b>JB add dates to event timetable</b></p>
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	<p><b>Data</b></p> <ul style="list-style-type: none"> <li>• Telephone calls into HW. Looking at ways to increase take up by increasing public facing events – events table attached – will build on booking additional events and populate. New CRM system now in place and training undertaken in order to capture data that is aligned with other HW’s this will improve reporting on outcomes and the ability to capture dashboard outcomes. Will continue to use INFORM data base alongside for the foreseeable.</li> <li>• JB updated on number of number of complaints we have taken for hospital.</li> </ul> <p><b>Trends</b></p> <ul style="list-style-type: none"> <li>• GP appointments and access to them</li> <li>• Not being able to see same GP</li> <li>• EPUT Therapy for You waiting times and offer of group sessions – one-to-one preferred.</li> <li>• Waiting times for Blood Tests</li> <li>• ASD Diagnoses waiting times</li> <li>• Parking charges at SUFT</li> <li>• Waiting time for referral to consultant once diagnoses made</li> <li>• Unable to get Eye Clinic, Physiotherapy and X Ray Dept at SUFT, on phone,</li> <li>• Revised SHARPS collections has changed and unable to be collected form patient homes now – will be collected from Surgeries/Pharmacies – awaiting clarification.</li> </ul> <p><b>Marketing &amp; Comms</b></p> <ul style="list-style-type: none"> <li>• Twitter and FB are being maintained – work in hand to cost and scope website overhaul.</li> <li>• Resources ordered: Banners, Leaflets Posters – Mailshot campaign to all Practices, Pharmacies, Local Provider organisations</li> <li>• Recruiting Volunteers regularly – 5 currently supporting HWS – structure attached.</li> </ul> <p>CG: enquired whether there is a specialist available and what the timescale is. JB answered that this ties in with the digitisation and that assistance is being given internally.</p>	
5.	<p><b>Questions from members of the public</b></p> <p><i>M. Ali:</i>  <i>Under the National Health Service Act <a href="#">2006</a> (as amended by the Health and Social Care Act <a href="#">2012</a>), CCGs and NHS England have duties to involve the public in commissioning.</i>  <i>Would you, please, state any commissioned services past and present where the public was involved in commissioning?</i></p> <p>CG: This is a question for CCG &amp; SBC as it is not HW role to monitor their</p>	

	<p>work. Discussion followed about this.</p> <p><i>Bill Glanville:</i></p> <p><i>1. My question, put on my behalf by Mr Ali in Dec 2018 and shown in the minutes - as to why I was unable to fill a hospital GP prescription at the Hospital pharmacy remains unanswered. An additional point is that out of hours it is not always possible to get to the duty chemist in the locality, especially if one doesn't have transport.</i></p> <p>The hospital pharmacy do not dispense GP issued prescriptions (green) known as FP10; these types of prescription must be dispensed in the community pharmacy service.</p> <p><i>2. The minutes of the December meeting read more like meeting notes, useful as an aide memoire to those who attended, but of little help to those who will read them on the Healthwatch website and be looking for more detail.</i></p> <p>Views were noted and in future actions will be recorded clearer.</p> <p><i>3. When searching for meeting minutes, the Healthwatch website is difficult to navigate. Could something be done with indexing please?</i></p> <p>HWS are taking steps to overhaul the website and make it easier to access and navigate and hope to have it 'live' soon.</p>	
6.	<p><b>Any Other Business</b></p> <p>No other issues</p>	
7.	<p><b>Date of next meeting:</b></p> <p>June 11<sup>th</sup> 2019 5pm – 7pm</p> <p>Informal private board meeting to take place 10<sup>th</sup> April 2019</p>	

**Glossary of Abbreviations:**

EPUT: Essex Partnership University NHS Foundation Trust  
 CCG: Clinical Commissioning Group  
 PPGF: Patient Participation Group Forum  
 STP: Sustainability and Transformation Partnership  
 CAB: Citizens' Advice Bureau  
 MH MDT: Mental Health Multi-Disciplinary Team  
 CEAG: Community Engagement Advisory Group  
 SAVS: Southend Association of Voluntary Services  
 SUAG: Service Users Advisory Group  
 SUHFT: Southend University Hospital NHS Foundation Trust  
 SUH: Southend University Hospital  
 SBC: Southend Borough Council