

Coventry LINK Steering Group Meeting
At 10.00 am on 29th MARCH 2011
Held At: Coventry Central Methodist Church

FINAL Minutes

Attendees:

David Spurgeon (CHAIR), Tom Stone, Gaile Allen , Alex Turner, George Keay, Christine Upton, Bhanu Dabhi, Tony Walsh (on behalf of Donna Kelsey), Ruth Light (LINK Project Manager), Wendy Donnelly (LINK Project Officer), Barinder Johal (LINK Administrator)

Rob Allison from Voluntary Action Coventry.

1) Apologies

Sheila Marston, Ellen Alcock, Moira Pendlebury, Donna Kelsey

2) Project Manager's update

Ruth gave an update on the work of the staff team and informed the Group that it is time to begin work on the LINK annual report.

Latifah is coming to the end of her temporary contract at the end of March and Wendy is also leaving her role at the same time. Ruth will be taking lead on Wendy's work supporting the renal and mental health pieces of work temporarily as recruitment is currently ongoing for the Project Officer post.

Ruth also gave an update on a number of meetings she had recently attended including the quarterly meeting with a few Steering Group members and Stephen Jones, Chief Executive of NHS Coventry where an outstanding LINK information request was raised. This meeting also covered an update on LINK's work to follow up LINK recommendations regarding hospital discharge and outpatient booking processes and letters. The quarterly contract meeting with Coventry City Council was held with Simon Brake; Bob Marriott and Peter Barnett. The meeting also focused the transition to HealthWatch. An extension to the Host contract from August 2011 – March 2012 was verbally confirmed. It was indicated that local HealthWatch will remain a commissioned service.

A planning meeting also took place with Coventry and Warwickshire Partnership Trust and Warwickshire LINK regarding an event on quality to be held Friday 13 May between 10am and 3pm at the Welcome Centre and the agenda will allow for lots of interaction and thinking about quality of services. It will focus on all of the service areas the Trust covers including community health services. Ruth asked for volunteers from the Steering Group to help assist at the event as the LINK staff

team would be low on manpower due to annual leave, recruitment of new staff and Louise who is due to have an operation a week before the event.

George asked if the car parking facilities at the Welcome Centre could be clearly displayed on the event flyer.

Latifah has been busy doing various outreach work across the city including schools, colleges and more. The Group gave their thanks to Latifah for all of her hard work in her recent post.

Actions
<ul style="list-style-type: none">• Ruth to liaise with CWPT re: car parking arrangements at the Welcome Centre

Bhanu arrived at this point.

3) Draft report of renal patient transport project – paper 2

Wendy introduced the report and informed the Group she had made slight changes to it following a meeting of the Working Group including: adding statistics on Coventry’s position on kidney care; adding comments on patient care; and work on the conclusion.

Ruth said LINK are still awaiting information from NHS Coventry regarding the average cost per patient per year before publishing the report.

The content of the report was agreed, and it was agreed for Ruth and David to oversee the final version once the information from NHS Coventry had been received.

Tom highlighted concern that getting a response to information requests is proving difficult. It was agreed to raise this in the second part of the meeting.

Actions
<ul style="list-style-type: none">• Ruth to insert the information from NHS Coventry into the report and David to finalise it before its published

4) Maternity services

The meeting received the notes of a meeting in January which NHS Coventry had requested to inform LINK about plans for maternity services. The proposals were noted. The meeting queried if the anticipated consultation had begun. It was agreed to ask Esther for clarification in the second part of the meeting. It was agreed to consider maternity service for the next work programme.

George said it was an idea to do this as a joint piece of work with the Warwickshire cluster.

4.1) Local HealthWatch Pathfinders (extra agenda item)

A paper about LINK Pathfinders was tabled. The department of Health is calling for expressions of interest by 12th May for joint work with Local Authorities to look at an aspect for the new role of HealthWatch.

Discussions took place about the pros and cons of this. David said it would be beneficial to get the status as it would mean being better informed. Ruth said the application would need to be submitted by the end of April 2011 as she is on annual leave in early May. Tom supported the application. Concerns were raised about the availability of staff time.

It was agreed the Ruth should take an application forward to the next stage and explore putting in an application with the Local Authority.

Actions
<ul style="list-style-type: none">Ruth to liaise with Local Authority regarding desire to put in an application for Pathfinder status

The Group thanked Wendy for all her hard work and commitment with Coventry LINK

OPEN MEETING

Additional attendees: **Julia Flay** (Patient Involvement Facilitator – UHCW), **Bob Marriott** (Service User Involvement Development Officer – Coventry City Council), **Peter Barnett** (Health Development Service Manager– Coventry City Council) **Esther Peapell** (Head of Patient and Public Involvement – NHS Coventry)

Welcome and introductions were done on behalf of the additional attendees.

5) Minutes of the last meeting, matters arising and actions

George highlighted a slight error with the dates on the action on page 5 relating to UHCW's Quality Account. Should read 2010 not 2001.

Ruth reported that all actions were complete. Ruth had spoken to Warren Manger at Coventry Telegraph regarding car parking at UHCW who informed her was not running any further stories on this issue for the time being.

Natalie Fuller was not available to attend the recent Hospital Services Working Group meeting and will be invited to a future one.

Actions
<ul style="list-style-type: none">Ruth to liaise with Natalie Fuller (PCT) re: attending a HSWG meeting

6) LINK Work Programme – paper 4

Ruth gave an update on the work programme including recent Enter and View visits. It had not been possible to speak to many patients at the Caludon Centre; therefore other avenues were being explored to talk to patients to increase the sample.

Julia Flay said that UHCW was producing a new hospital discharge leaflet, which she had taken to the patient council at UHCW and they had felt it needed improvement. Therefore a focus group of patients was being held on 31 March 2pm – 4pm in the Clinical Sciences building at UHCW. Julia invited LINK to take part.

Ruth asked Julia if the patients Council was involved in the review of outpatient booking letters. Julia said that it wasn't but probably should be. Ruth said the Hospital Working Group was also interested in helping with the letters.

Esther said she had recently viewed a response from UHCW regarding the missing information required in the LINK's renal patient transport report and that it had been forwarded onto LINK via email this morning. Ruth highlighted the need for clearer paths of communication as information requests don't appear to be received by LINK within the required time frame.

Following up from the letter that was sent out to Sue Smith, General Manager, Adult Mental Health Services, has been arranged with Terry Twomey, Operational Manager Adult Acute Inpatient, Day treatment and Crisis Home Treatment Services, to discuss ways forward with Out of Hours Mental Health Services and issues with the new Single Point of Entry. A letter has also been sent by LINK Project Manager to mental health commissioners re: outstanding recommendations in last year's report.

LINK has got nearly 100 responses to its survey about clearer words and terms regarding safeguarding. Esther said this was a good piece of work.

Ruth asked Esther about the consultation on LINK maternity services report. Esther said a public consultation would probably take place after the elections on 6th May.

Tony asked about hospital services and who the new discharge facilitators at UHCW are and what their role description was. Julia said she would inform Ruth who could pass the information onto the Steering Group.

Actions
<ul style="list-style-type: none">• Ruth/Wendy to add the additional information from UHCW to the renal patient transport report• Julia to inform Ruth about the job role/description and names of the new discharge facilitators at UHCW• Ruth to inform the Steering Group re: information on discharge facilitators

7) HealthWatch transition – paper 5

Ruth set out the possible roles/functions a local HealthWatch:

1. Help shape the planning and delivery of local health and social care services (effectively a continuation of LINK's current role)
2. Provide information and advice to help people make choices about the health and care services they receive
3. An advocacy service for people making a complaint using the NHS complaints process to help them through the process.

Rob left the meeting for this part of the discussion.

Ruth asked the Group to consider if it wanted to go down the route of constituting as a separate body/organisation or would prefer to continue having an existing organisation (such as VAC) providing support.

The Group discussed the options.

David said that he was both happy with the work that Voluntary Action Coventry was doing in supporting LINK and didn't want to take on the role of being a Trustee of a separately constituted HealthWatch. Tom and Gaile agreed that they did not want to take on running an organisation.

George asked if the City Council would like to Host HealthWatch as some LINK's have gone down this route. Bob and Peter responded that this was not an option as the Health and Social Care Bill was setting up a commissioning relationship.

Bob stated that discussions were indicating that the ICAS (Independent Complaints Advocacy Service) may be commissioned for larger area than Coventry. The Local Authority is still unsure what resources will be allocated to HealthWatch however the complaints and advocacy service cannot be run by volunteers as insurance would be required.

It was pointed out that there would be have to be a due process to decide any organisation supported to provide HealthWatch functions and that this would not automatically be VAC.

Peter suggested further discussions on the option of separate constitution. Ruth said she could understand the Council's argument for further discussion however pointed out that the Steering Group was the group responsible for governance and ideally from which membership of any new management committee would begin to be drawn and to hold an open discussion with the wider LINK membership.

It was agreed that the provisional view from the Steering Group did not wish to constitute as a separate HealthWatch body.

Rob re-entered the meeting at this point.

Ruth talked about Pathfinders and the joint application with the Local Authority. Peter and Esther suggested taking Pathfinders status. Esther said she was in favour for it as HealthWatch would receive regular and useful information in its early stages as well as develop already well networked relationships.

Ruth asked who at the Local Authority she should liaise with to take this forward. It was suggested she contact Simon Brake

Actions
<ul style="list-style-type: none">• Ruth to contact Simon Brake regarding Pathfinder application

8) Feedback from Meetings & Events

8.1 Scrutiny Board 5

Update by Stephen Jones – Chief Executive NHS Coventry

Stephen gave an update presentation. The Health Bill is progressing through Parliament. He explained that Coventry NHS and Warwickshire NHS have established the Arden Cluster, of which he will be the new Chief Executive. They would still have separate Boards, but there would be a single cluster executive team and more joint working. There are now 6 GP Consortia for Coventry and Warwickshire. Cluster managers have begun to support the Consortia as they learn about current PCT responsibilities, including commissioning. In April 2013 PCTs are abolished and GP Consortia assume full budget responsibility.

Also NHS Coventry is working with the City Council on transition. The Council will take over responsibility for some aspects of Public Health issues.

The GP Consortium

There were presentations by representatives from Godiva and InSpires. They are at an early development stage and struggled to answer some members' questions.

Implementation of Health and Well-Being Board

More details were given about a 'shadow board' which the Council are establishing this year. Also it is intended that there will still be a separate Health Overview and Scrutiny Board.

8.2 PCT/PPI Working Group

Esther said they met on Monday but have now disbanded.

8.3 Godiva Commissioning

George told the Group that both Godiva and InSpires had interviews for Pathfinder status on 28th February and are currently awaiting the outcome. Godiva has formulated commissioning groups and has 27 GPs working on the groups (8 groups in total). George said a focus group is being organised by Faheem Sheikh

about patient public involvement and that LINK could join in. David asked if there could be a formal invite.

8.4 Feedback from other meetings and events

Fiona Goodall – Regional Manager at CQC to be invited to next meeting.

Ruth informed the group that Coventry City Council was consulting on outsourcing its home meals services. This had been passed to the Choice and control working group for examination.

Actions
<ul style="list-style-type: none">• Ruth to invite Fiona Goodall to the next Steering Group meeting on 17th May

9) Any Other Business

No other business

<p>Date and time of next meeting: 10 am 17 May at Methodist Central Hall, Eadon Room</p>
