

MINUTES

North East Essex Health Forum Committee (HFC)

Wednesday 4th October 2017

1.30 pm to 3.30 pm

Ash Meeting Room, Aspen House, Stephenson Road, Colchester CO4 9QR

Present:

Ray Hardisty (Chair)	RH	Chair, Colchester Representative (Elected)
Celia Crossley	CC	Finance & Performance Representative
Myrna Liles	ML	Tendring (exc. Harwich) Representative (Elected), Transformation & Delivery Committee (TDC) Representative, North East Essex Clinical Commissioning Group (NEE CCG) Board Representative (Deputy)
Su Rhys Jones	SRJ	Colchester Representative (Elected) & Quality Committee Representative
Ann Watson	AW	Harwich Representative (Elected), North East Essex Clinical Commissioning Group (NEE CCG) Board Representative
Robin Rennie	RR	Strengthening Communities Network Rep
Maura Broad	MB	Colchester Representative (Elected), Finance & Performance Representative (Deputy), Outreach Representative
Kim Simmons	KS	Community 360 Representative

In Attendance:

Angie Roberts	AR	Corporate Business Manager, NHS NEE CCG (Minutes)
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Item		Action
973.0	<p>Welcome & Apologies: The Chair welcomed everyone to the meeting and noted that it was quorate.</p> <p>Apologies were received from: Yaa Dankwa Ampadu-Sackey (Outreach Rep. & Primary Care Operational Group Rep.), Jo Roosenbeek (Maternity Voices Joint Representative), Emma Sarson (Tendring (exc. Harwich) Rep. (Elected) & Maternity Voices Joint Rep.), Mark Tatham, Marjorie Appleyard, Robert Harrington, Bonnie Jarmain and Patricia Paxon.</p>	
974.0	<p>Declarations of Interest: All Declarations were noted as correct and no further declarations of interest received.</p>	
975.0	<p>Minutes of Meeting held on Wednesday 6th September 2017: The minutes were agreed as a true and accurate record of the meeting.</p>	
976.0	<p>Matters Arising: There were no matters raised.</p>	
977.0 977.1	<p>Actions from Previous Meetings: (923.0 & 911.1) RH advised this matter is still ongoing.</p> <p>All other actions were noted as complete.</p>	
978.0 978.1	<p>Issues Raised by Patients, Public, Carers & PPGs: Non-Clinical Ambulance Call Outs The Chair referred to the circulated report. Further information regarding this matter had been requested but not received. The First Responder who had been involved in the matter has now become involved in trying to change the current system in order to ensure more information is available in future.</p>	
978.2	<p>Community Pharmacies - Update: The Chair took the circulated report as read as JBM was not in attendance at the meeting. AW informed the Committee that, in Manningtree, the PPG were also meeting with local Pharmacies due to previous problems which needed to be resolved.</p>	

<p>978.3</p> <p>978.4</p>	<p>Translation Services & Accessibility: The Chair drew attention to the report. He asked that members check the wording on the website to ensure that it now covered all of the issues raised. The Chair added that this information would also be shared with Community Leaders.</p> <p>GP Support of PPGs: The Chair drew attention to the report which was taken as read. The Chair informed the Committee that, in short, the funding arrangements have not changed.</p> <p>AW reported that she was still not having any success with Lawford Surgery.</p>	
<p>979.0</p>	<p>Word on the Street: The Chair drew attention to an update relating to a previous item regarding Discharge From Hospital and reported that this matter has been forwarded to all of the relevant agencies to raise their awareness.</p> <p>AW felt that the whole discharge process was not working as well as it should. The Chair assured the Committee members that a further report regarding the Discharge Process would be made available to the November meeting.</p> <p>It was noted that a number of issues regarding discharging patients might be resolved if the Discharge Co-Ordinators spoke to the relatives who are named as care providers to ensure that they are fully aware, and able to provide the care required.</p>	
<p>980.0</p> <p>980.1</p> <p>980.2</p> <p>980.3</p>	<p>PPG Matters: October 2017 PPG Liaison Agendas: The Chair drew attention to the circulated agendas and remarked that these were full agendas with a good content.</p> <p>Self- Care Week 2017: The Chair reported that MB, John Hunt and he had attended a meeting with the NEECCG to look at the best way to co-ordinate the Self-Care week with other health and social care bodies. ACE, CHUFT and the voluntary service organisations had all agreed to issue one common message and a sub-committee has been set up to work with the NEECCG Communication Team to take this forward. The Chair noted that this is the second year the HFC has been involved with this and have attended events in places such as supermarkets. The Chair added that this is an important factor in the links to the Urgent Care Strategy.</p> <p>Meeting with the Practice Managers & Active PPGs: The Chair reported that due to a problem with the Practice Managers this meeting had still to take place. He said it was hoped that this could be rescheduled to take place either this month or next.</p>	
<p>981.0</p> <p>981.1</p> <p>981.2</p>	<p>Update from Community 360 & CVST: Community 360: The Chair drew attention to the tabled report and then asked who co-ordinated recruitment for the League of Friends within the Hospital. KS confirmed that Community 360 undertake this recruitment for them. She added that currently, Community 360 are working with NEE CCG Human Resources to see how these jobs might also be advertised on the NHS Jobs website. AW asked if Community 360 had adequate staffing to cope with this additional work. KS assured the HFC members that two further staff are being recruited to work on projects, along with other processes that are already in place in the organisation to provide step up cover when required.</p> <p>CVST: The Chair referred to the report previously circulated which was taken as read.</p>	
<p>982.0</p> <p>982.1</p>	<p>Local Health Matters Meetings: September 2017 Meetings: The Chair drew attention to the Clacton minutes and assured the members the Colchester minutes would be circulated when PM returns from annual leave. SRJ said that she had found the Colchester meeting very interesting particularly the Operation Pendant item. KS added that, currently, the information around Operation Pendant is being filtered through volunteers in order to spread the word, as it was felt the excellent price for the key safe and 6 month's free service were of huge benefit to people at risk of falling. CC agreed this was a good initiative and there had been problems in getting interest so this was an excellent way of improving the take up.</p>	

<p>982.2</p> <p>982.3</p>	<p>SRJ confirmed that she was also seeing if the Multiple Sclerosis Society would assist with funding for the key safe and she had escalated the £71 cost for this to the Multiple Sclerosis Society Colchester Group and was awaiting a decision.</p> <p>AW asked if all areas charge for helplines. The Chair replied that it was different for individual councils but, if a person was in receipt of benefits, the service may be supplied free of charge.</p> <p>CC felt that there was the potential for a lack of joined up working if this could result in less Ambulance call-outs so there must be a potential for money saving. CC asked if there was the possibility of a business case to show the savings. CC agreed to contact Kimberley Pash at Colchester Borough Council to find out the costings and impact of Operation Pendant.</p> <p>October 2017 Meetings: The Chair drew attention to the agendas and stated that speakers were still awaiting confirmation but this would again be resolved when PM returns to work.</p> <p>Attendance: <u>Video Recording of LHMs</u> – The Chair referred to this report that was circulated in advance. ML confirmed that a similar problem in recording meetings had been experienced in Frinton & Walton Town Council but this has now been resolved. All agreed that if a resolution to this could be sought they did not feel this should replace the minutes for these meetings. The Chair agreed to review this matter in 12 months' time. PM to add to agenda for next October.</p>	<p>CC</p> <p>PM</p>
<p>983.0</p> <p>983.1</p>	<p>Outreach and Engagement: Out and About: The Chair referred to the report that was circulated on advance. He explained that the Colchester Crucial Crew meeting was cancelled due to the Fire Brigade funding being removed, but it was thought that the Safeguarding Panel may look to fund this going forward.</p>	
<p>984.0</p> <p>984.1</p> <p>984.2</p>	<p>Health Forum Specific Issues: Action Plan: The Chair had no report to give on this occasion.</p> <p>Patient Representatives: The Chair referred to his circulated report which showed updated Committee Representatives and deputies. However, deputies were still required for Quality Committee, Finance & Performance Committee and System Resilience Operations Group.</p> <p>SRJ asked if it was possible for PM to check with HFC members who have agreed to deputise to share their mobile or home contact numbers so that they can be contacted in an emergency. All HFC members present agreed to share their numbers. PM to action this prior to next meeting.</p>	<p>PM</p>
<p>985.0</p>	<p>Healthwatch: The Chair's report was noted.</p>	
<p>986.0</p> <p>986.1</p> <p>986.2</p> <p>986.3</p> <p>986.4</p> <p>986.5</p>	<p>NEE CCG Committees with Health Forum Representatives: Ambulance Service: There was no report.</p> <p>NEE CCG Board: The report to September Board was circulated and noted.</p> <p>Maternity Voices: There was no report.</p> <p>End of Life: There was no report.</p> <p>Finance & Performance (F&P): CC apologised for not circulating her report in advance and would ensure this was done following this meeting. CC outlined the main points in her report regarding Finance, QIPP, Performance and Contracts etc. She highlighted that targets in A & E and RTT are still not being achieved and in some cases targets have deteriorated further. The ongoing concerns in respect to 62 day Cancer waits were also noted.</p>	<p>PM</p>

	<p>CC highlighted that, in respect of contracts, there were amber reports in respect of the following:</p> <p>Ambulance – response figures are deteriorating due to the cessation of the Essex County Council Falls Service.</p> <p>Mid Essex contracts – being addressed.</p> <p>GP Out of Hours – has seen a large demand for repeat prescriptions.</p> <p>ACE – closer working is taking place with the NEECCG as there could be potential implications to the Care Closer to Home Contract. ACE Chief Executive is to be invited to report to a future Finance and Performance Committee.</p> <p>Marie Stopes International – performance had suffered due to a delay in contract sign off.</p> <p>Concordia – this is a new contract which is just starting to bed in. There has been some impact noted on cancer issues from Mid Essex Hospital which are being addressed.</p> <p>Mental Health – it was noted that expenditure has increased in relation to Psychological Liaison. CC added that, in future, the report is to be produced to allow better explanation around the key issues.</p> <p>CC updated the members on other areas i.e. Demand Management, Operation Pendant, Medicines Management, Urgent and Planned Care, STP Capital Bids etc.</p> <p>The Chair thanked CC for her report and said that it was important for these to be circulated in advance to allow members time to read before the meeting.</p> <p>CC also gave an update on the previous DNA issue that she had raised at the Finance and Performance Committee. A response had been received from CHUFT PALs team asking if the HFC members could obtain and provide specific examples of where confusing appointment letters had been received and resulted in missed appointments. The members said that this would be a problem as the letters are given to Reception staff when attending appointments so copies would not be available to share with PALs. They felt that this information should be fed back by AR and the hospital to come back with a further response on how they intend to address this matter.</p>	AR
986.6	<p>Quality: SRJ to circulate her report to HFC following the meeting.</p>	
986.7	<p>Transformation & Delivery Committee (TDC): ML apologised that she had been unwell for the September meeting and the October one had taken place on 3rd October. She will submit a full report to November meeting based on the minutes from September and October meetings.</p>	
986.8	<p>System Resilience Operational Group (SROG): There was no report</p>	
986.9	<p>General Practice Commissioning Committee (GPPC): There was no report.</p>	
988.10	<p>Strengthening Communities Network: There was no report.</p>	
986.11	<p>Patient Advice & Liaison Service (PALS): There was no report.</p>	
986.12	<p>Sustainability & Transformation Programme: There was no report</p>	
987.0	<p>NEE CCG & CHUFT Press Releases: The following press releases were noted:-</p> <ul style="list-style-type: none"> • NEE CCG September 2017 Board Meeting • Clinicians urge local people to get their flu vaccination. 	

988.0	<p>Reports from Outside Organisations: There was no report</p>	
989.0	<p>Any Other Business: The Chair referred to the tabled paper received from YDAS regarding the patient route between the Walk in Centre and A & E at Colchester General Hospital. The Chair noted that 4 points had now been agreed and these were:</p> <ul style="list-style-type: none"> (i) The safest route to access both departments is via the route through the Villas. (ii) CHUFT will immediately provide clear signage and road markings to show access when driving or walking. (iii) Where necessary they would ensure that kerbs are lowered and pedestrian crossings clearly marked to make patient access safe and straightforward. (iv) A map will be produced and left at both reception desks to show the access routes between departments. (v) This matter will continue to be monitored and YDAS will update at future meetings. <p>The Chair felt this was a good example of patient representative working.</p>	
990.0	<p>Date of Next Meeting: Wednesday 1st November 2017 1.30 pm to 3.30 pm Sams Hall, CVST, Rosemary Road, Clacton on Sea CO15 1NZ</p>	

Meeting Closed at 15.00