

BOARD MEETING IN PUBLIC
Monday 19th January 2015 - 3.30pm-5.00pm:
Highbridge House, 16-18 Duke Street, RG1 4RU

AGENDA

Time	Agenda Item	Page	Lead
15:30	Welcome and Introductions	-	Chair
	Declaration of Interest	-	Chair
15:35	Pre-submitted questions from the Public		
	ACTIVITIES		
15:50	Minutes of previous meeting	Page 3	Chair
	ACTION/DISCUSSION		
16:00	The Care Act - Discussion Including a presentation from Melissa Wise, Care Act Lead, Reading Borough Council http://www.reading.gov.uk/council/Consultations/openconsultations/care-act-reading/	Verbal	RN
16:30	1. Contacts and Complaints Report	Page 7	MKS/ MB
16:35	2. Communications and Engagement Report	Page 9	MKS/ RN
16:40	3. Board Member Updates	Verbal	All
16:45	Questions from the Public		
17:00	Meeting close Date of next meeting: Monday 13 th April 2015	-	-

Glossary of Terms

ADHD	-	Attention Deficit Hyperactivity Disorder
BHFT	-	Berkshire Healthcare Foundation Trust
BME	-	Black and Ethnic Minorities
BSL	-	British Sign Language
BWCC	-	Berkshire West Federation Commissioning Committee
CAB	-	Citizens Advice Bureau
CAMHS	-	Child and Adolescent Mental Health Services
CCG	-	Clinical Commissioning Group
CIC	-	Community Interest Company
CQC	-	Care Quality Commission
CSU	-	Commissioning Support Unit
CVS	-	Council for Voluntary Services
DASL PI	-	Domiciliary Care Accreditation Select List Performance Indicators
DoH/DH	-	Department of Health
HMG	-	Health Management Group
LA	-	Local Authority
LES	-	Locally Enhanced Service
NAG	-	Neighborhood Action group
NICE	-	National Institute for Health and Clinical Excellence
NHSCB	-	National Health Service Commissioning Board
NWRPV	-	North and West Reading Patient Voice
O/P	-	Outpatient
PALS	-	Patient Advice and Liaison Services
PDSN	-	Physical Disability and Sensory Needs
PPE CCG	-	Patient and Public Engagement Clinical Commissioning Group
PPG	-	Patient Participation Group
RAB	-	Reading Association for the Blind
RBC	-	Reading Borough Council
RBH/RBFT	-	Royal Berkshire Hospital/Royal Berkshire Foundation Trust
ROPP	-	Reading Older People's Partnership
RVA	-	Reading Voluntary Action
SEAP	-	Support Empower Advocate Promote
SENCO	-	Special Educational Needs Coordinator
SRPV	-	South Reading Patient Voice
ToR	-	Terms of Reference

Healthwatch Reading Board Meeting in Public Minutes: Monday 6th October 2014

Present:

Tony Hall (TH) - Chairman

Board: Linda Dobraszczyk (LD), David Shepherd (DS), Helena Turner (HT), Sheila Booth (SB), and Shaheen Kausar (SK).

Staff: Catherine Greaves (CG), Rebecca Norris (RN) and Niall Norbury (NN),

1. Questions pre-submitted to Healthwatch Reading open board meeting for 6 October 2014

Question 1:

What are the advantages of running surveys, which duplicate data already gathered by the GP Patient Survey and published in July 2014? Results are available for local surgeries and local CCGs. The surveys are commissioned by NHS England and managed by Ipsos MORI.

Answer: During the spring and summer of 2014, Healthwatch Reading was approached by people at stalls we ran at community events and festivals, who wanted to give feedback about difficulty in making GP appointments. We thought it would be useful to launch a local survey to see how widespread this problem was. A marketing opportunity (space in a window of the old Jackson's department store in the town centre) came up at very short notice and so we decided to put together and launch the survey, based on initial concerns raised by the public, via this space. Due to time constraints, we had not at that time researched all the national and local data already collected on GP access.

We used the free online service of SurveyMonkey - which is used regularly by NHS, council and other public organisations - to put the questionnaire online. We asked 7 specific questions on access, one question about what practice people belonged to, one question about demographics and a final question asking for a name should they wish to be included in the prize draw we are running for those who complete the survey.

Having now compared our survey to the NHSE-commissioned one, we see that the wording of 6 of our 7 questions is the same or similar to those found in the national one (which asks 62 questions in total).

The main advantages to Healthwatch Reading of running surveys that may contain similar questions to other local or national surveys, are:

- People get to give information to an organisation that is independent of the NHS. We have found that our independence can prompt people to disclose extra information or concerns that they would like us to take up on their behalf, that they might not disclose through a national survey or one that is 'owned' by the NHS
- We may be able to gather and disseminate local public information more quickly and up to date - national surveys may publish many months after first collecting
- It helps us to promote our organisation to the general public
- It is a good discussion prompt at engagement events (E.g. when we spoke to a Battle Library coffee morning about the survey, people not only filled in the survey, they then

went on to have a wide-ranging debate about NHS funding and priorities, which gave us more views)

- It helps us to gain an understanding of what type of people give feedback and where we might need to target future efforts to reach other groups in the community
- It helps us to gain understanding of the best way to collect patient opinion. (E.g. We can see on the online tool on what dates people answered the survey, and how this might be linked to different marketing activity by our organisation).

In terms of our own survey, we are in the process of deciding whether to make results public (given the small numbers who have replied so far), but we are happy to send GP practices any anonymous results collected for their practice, if they think it would be useful, to add or compare to the existing evidence they have, in order to improve patient experience.

We are also considering whether we should devote resources to disseminating the Reading-specific survey results on GP access from the NHSE-commissioned survey, in a patient-friendly way to help the public compare the experiences across Reading practices. On the national website for that survey, people have to search for results one practice at a time, or search a lengthy Excel spreadsheet. If volunteers from the public want to help us to do this, we would be happy to talk to them about this.

Similarly, there is also a lot of data from Reading's patient participation groups' own annual surveys that could be brought together.

Question 2

It is the responsibility of survey managers to establish that the sample collected is a representative sample. How is this being achieved?

Answer: Healthwatch Reading does not have the resources to employ survey managers, nor do we claim to be a polling organisation like Ipsos Mori. Our team is made up of a full time manager and three part-time development officers. Staff use their own professional experience, guidance from our board and trustees, guidance from our umbrella organisation Healthwatch England, and online tools, to decide how best to collect and present patient experience.

Healthwatch Reading believes that every experience about health and social care, given to us by Reading residents, counts, adding to an ever-increasing body of evidence held by our organisation.

We have achieved success in securing changes and improvements to services by using both large surveys and a smaller number of in-depth case studies.

For example:

- our survey of 170 secondary school pupils' experiences of specialist school nurses is being used by Public Health to inform its review of the school nursing service specification, and by the NHS as it reviews Child and Adolescent Mental Health Services in Berkshire
- our focus group of 13 young carers has prompted Reading Borough Council to launch a new e-learning 'young carer aware' tool for teachers, and health and social care professionals

- our in-depth interviews of more than 60 home care service users is being used by Reading Borough Council commissioners to inform their next procurement round of home care providers
- our in-depth interviews of seven people who experienced delayed hospital discharges is going to be used to inform a change in the hospital-social services protocol on discharging people, as well as many other changes, as set out in a new action plan published on Friday 3 October
- feedback from 40 Polish people led to the NHS launching a Polish version of a phone app that informs people how to find and use local services.

When we do present any surveys we have conducted, in our reports, we explain the methodology and any limitations. We also point out the value of the rich detail that can be obtained in small numbers of in-depth interviews with people.

When we speak to the public we regularly ask, as required under our contract with commissioners, particular demographic information so we can check whether people with certain characteristics e.g. a disability, experience care differently. This also helps us to highlight gaps in our engagement activity.

Reading is a very diverse population and reaching as many different people as we can is an ongoing challenge, which we willingly accept and endeavour to meet, within the restraints of our current resources.

2. GP capacity in Reading discussion

HWR development officer RN gave the meeting an update on the situation at Circuit Lane in Southcote, where five GPs had tendered their resignation due to difficulties recruiting new doctors, funding a premises extension and impending retirements. At public meetings held about these patients had expressed anger at the way they had found out about this (some through local media first) and also anxiety about the future and continuity of care, and also anxiety about a distant private provider taking over the surgery.

Healthwatch Reading had been supporting elderly housebound patients by giving them regular updates and feeding their views back to NHS England Thames Valley, as decisions were made about the surgery's future.

Healthwatch Reading had also accepted an invitation from NHSE to take part in the evaluation of bidders under the procurement process to appoint a new temporary provider for 12 months. The practice's patient participation group would also take part.

RN reported that the Circuit Lane scenario was not unique to Reading - there were widespread GP recruitment problems across the UK, highlighted by the Royal College of GPs, and also the health secretary, who had announced on 2/10/14, that he was launching an independent review by Health Education England to calculate where the shortages are, area-by-area.

Meeting chair Tony Hall added that the national GP demographic was changing - more female doctors worked in general practice and they often wanted to work part-time as salaried doctors and not invest into the traditional GP partnership model. He added that GPs in such partnerships were in effect 'private providers', acting as business people contracting directly

with the NHS. HWR board member Rev John Rogers said the public were quite rightly demanding answers to the situation at Circuit Lane.

One member of the public said she thought GPs were facing increasing burdens by seeing more people affected either by social care budget cuts, and the introduction of the Care Act from next April. Frances Brown, chair of the Priory Lane surgery patient participation group, said his surgery had been through a retendering exercise and “the roof didn’t fall in” and they came out of it with a new private provider running the surgery that offered appointments 7 days a week, 8am-8pm. Nicky Wadely, contact manager at NHS England, told the meeting that 18 organisations had submitted expressions of interest in running Circuit Lane but she could not give more details. The NHSE did “not want the practice to close”.

3. Workplan Updates and Project Proposals

As reported

4. Contacts and Complaints Report

As reported

5. Communications and Engagement Report

As reported

6. Board Member Updates

As reported

1. Contacts and Complaints Report

Contacts by Category

Category	Apr-Jun 2014	Jul-Sep 2014	Oct-Dec 2014	Jan-Mar 2015
Acute Services	23	19	15	
BHFT Community	7	2	0	
Care Home	1	1	0	
Carers	3	0	0	
CCG	7	1	3	
Continuing Healthcare	1	1	1	
Dental Services	4	2	3	
Patient Voice	1	0	0	
GP Services	68	15	9	
Healthcare	-	-	-	-
Health Inequalities	1	0	0	
Homecare	1	1	0	
Learning Disabilities	0	0	0	
Maternity	3	0	1	
Mental Health	3	6	10	
NHS England	1	0	0	
Ophthalmology	1	1	0	
Other/Misc	10	5	9	
Outpatients	0	0	0	
Pharmacy Services	2	0	0	
Private Providers	0	0	0	
Public Health	0	3	2	
SCAS	-	2	0	
SEAP	-	-	-	-
Signposts	1	1	0	
Social Care	5	5	4	
Transport	3	1	0	
Walk in Centre	0	0	0	
Westcall	1	0	0	
111	1	0	0	
TOTAL	148	66	57	

Complaints Advocacy

Healthwatch Reading is supporting 13 new clients through the formal complaints process, these were directed at the following services:

Category	Apr-Jun	Jul-Sept	Oct-Jan
BHFT Community Services	1	0	0
GP Services	1	4	2
Mental Health	1	4	3
NHS England	1	0	0
RBH	7	2	6
Westcall	1	0	0
Dental			2
Other	1	2	0
Total	13	12	13

2. Communications and Engagement Report



For January 15 board meeting
Rebecca Norris (lead staff member for communications)

Media coverage 1 October 2014 - 7 January 2015

Summary: A steady, regular presence in local press that helps generate direct public feedback and raises HWR's profile. GP and hospital capacity are dominating news items.

DATE (most recent first)	MEDIA	HEADLINE	HWR analysis
07/1/15	getreading.co.uk (Reading Post website)	<i>Reading A&E: Nearly one in 10 patients waiting too long</i>	Article describes 10% rise in patients over Xmas/New Year compared to 13/14. Includes HWR chief exec (Mandeep Kaur Sira) comment on A&E waits being part of wider system pressures.
12/12/14	getreading.co.uk	<i>Care will continue at Circuit Lane Surgery in Southcote</i>	Report on public meeting held to introduce BHFT as new provider of surgery. Quotes NHSE local director Matthew Tait as making clear that HWR and PPG had had a role in selecting BHFT.
11/12/15	<i>Reading Chronical</i>	<i>Plea for views on clinic, pg 12</i>	Small article inviting people to give views on walk-in centre

5/12/14	<i>getreading</i> free paper	<i>Mums-to-be bed dilemma</i> , front page story	Story states ongoing midwife shortages in RBFT could affect ability of hospital to meet new NICE guidance on home birth and mid-wife led units, deemed as being safer. HWR chief exec comment included, noting concern and announcing our maternity project, and inviting parents to contact us.
28/12/14	<i>getreading</i> free paper	<i>Concern for GP clinics</i> , lead story pg 7	Reports on Care Quality Commission putting two Reading GP practices in category at high risk of needing to be inspected. HWR chief exec quoted explaining that the rating wasn't a judgement on current performance, just that they might be inspected more quickly than others. But also asks patients with concerns about any GP care to contact HWR, ph number listed.
27/11/14	<i>Reading Chronicle</i>	<i>Hospital chiefs facing more budget trouble</i> , lead story pg 3	Report revealing latest Monitor investigation of RBFT over waiting time data and finances. HWR chief exec quoted saying it was providing Monitor with any relevant information and also making point that patients who are not seen within 18 weeks of GP referral have a legal right to be offered an alternative hospital. HWR ph number listed.

17/11/14	getreading.co.uk website	<i>Concern over shortage of doctors and nurses in South Reading</i>	Reports figures from former South Reading CCG chair that 24% of practices had vacancies. HWR chief exec quoted stating that GP recruitment problems are national, not just Reading problem and that HWR has raised with NHSE. HWR ph number listed to report any impact of staff shortages.
13/11/14	<i>Reading Chronicle</i>	<i>Surgery saved as trust steps in, lead story, pg 10</i>	Decision to appoint BHFT as Circuit Lane provider hailed as 'victory' for patients. HWR chief exec quoted saying patients had played a major part in deciding fate of surgery.
12/11/14	BBC Radio Berkshire (Andrew Peach show)	Reporting BHFT taking over Circuit Lane	RN interviewed - pointed out patient involvement
9/10/14	<i>Reading Chronicle</i>	<i>Patients kept in hospital too long, lead story page 11</i>	Coverage of Healthwatch Reading's report on delayed discharges. Quotes HWR board member David Shepherd as thanking people who shared their personal experiences of care. Story's claim that 'hundreds of patients' had been affected was later corrected online when HWR contacted newspaper to draw attention to actual numbers interviewed.
9/10/14	<i>Reading Chronicle</i>	Interest in GP surgery, pg 9	From HWR's Oct board meeting re Circuit Lane

Other communications developments

Reading Post has closed (last issue was Dec 17 2014), under a 'digital only' strategy. The Post's health correspondent Natasha Adkins, with whom HWR has an established working relationship, is staying on as a live reporter for the getreading.co.uk website.

RN attended a Healthwatch England (HWE) communications meeting for all local HW comms leads in London on 12 December 2014. This included a workshop from a social media expert. RN asked HWE comms team if they could provide more infographics and images that can be used on local HW websites and tweets. HWE will also distribute a list of commonly used hashtags for tweets. A HWE parliamentary affairs lead gave a briefing about upcoming general election.

Niall Norbury, the admin and social media assistant HWR shared with RVA, has left to a new role in another charity. His role is being subsumed into existing team. He has left us a very good presence on Twitter on which to build.

Work is ongoing to refresh HWR website content.

Engagement plans: Jan and February 2015

- Visiting walk-in centre : Jan 11, 16, 24
- Supporting a Care Act consultation talk with people with learning disabilities at Talkback session: Jan 13
- Enter and View on outpatient eye clinic at Royal Berkshire Hospital: late Jan
- Observing care of people with learning disabilities who are inpatients at RBH - using a team of specially trained volunteers who have learning needs
- Talking to parents attending health clinic at Battle Library 5 Feb
- Supporting a Care Act consultation talk to the Older People's Working Group 6 February
- Visiting Circuit Lane surgery to talk to patients about how whether continuity of care is being maintained under transition to new management (BHFT) from 1 Feb - dates tbc throughout February

Also proposed:

- Shadowing or supporting Citizen Advice Bureau sessions
- Shadowing or supporting local councillor surgeries
- Going into Reading College and Reading University to promote HWR to students
- Care home Enter and View exercises (RN giving talk on Enter and View powers to nursing and care home providers at RBC conference mid-January)

Engagement Report

Method	Jan-Mar 2014	Apr-Jun 2014	Jul-Sep 2014	Oct-Dec 2014	Jan-Mar 2015
Reference Group Membership	662	642	649	636	
Followers on Twitter	1655	1862	1886	2042	
Likes on Facebook Page	20	33	34	38	
Other	-	-	-	-	
Total	2337	2537	2569	2716	

Engagement Activities and Events Undertaken

- Numbers attending
- Outcomes

Healthwatch Reading held 7 Engagement Events and took part in 9 Engagement Activities.

The Engagement Events that Healthwatch Reading organised are the following and involved approximately 157 people:

- Focus group Tilehurst Globe community group
- Carers forum
- Stand in Broad Street
- Drop-in engagement at the Reading Walk-in Centre x 3
- Bereavement Advisory Forum

Healthwatch Reading also took part in 9 local events and engagement activities that were used as a platform to promote the work of Healthwatch Reading. This involved engaging with approximately 305 people and included the following events:

- RBH Patient Partnership Standing Conference
- Narrow the Gap - RBC
- Older peoples working group
- Carers Rights Day
- RBC - Access to disabilities working group
- RBC - Home Care Commissioners working group
- GP Question Time
- Mental Health Integration event
- Maternity Services Forum

Networks and Meetings engaged with

- Networks
- Partnership Meetings

Healthwatch Reading continue to be involved with a number of key meetings and engage with networks that will further support our work in producing outcomes of our local communities' concerns. The staff team and board members have engaged with over 20 different networks and meetings including engagement with the following groups:

- North and West Reading CCG Patient Voice
- South Reading Patient Voice
- Health and Wellbeing Board
- North and West Reading CCG Patient and Public Engagement Meetings
- BHFT 6 Healthwatches Meeting
- PPG Meetings
- Community group Meetings
- Adult Social Care Meeting
- Carers Steering Group
- Physical Disability and Sensory Needs Network
- Domiciliary care Forum
- Mental Health Partnership Board
- Learning Disabilities Partnership Board
- Reading Older Peoples Partnership Board
- Reading Families Forum
- Being Healthy as you can be group
- Ex-Gurkha Association
- Reading Community Learning Centre
- Thames Valley Quality Surveillance Group
- Urgent Care Board

We have also built links with new networks and these have included setting up the Thames Valley Healthwatches meeting and the Berkshire Healthwatches meeting, involvement in the Suicide Intervention Prevention Network across the Thames Valley and the CMMV (Children's, Maternity, Mental Health and Voluntary Sector) Commissioning Board.