

Healthwatch Rutland (HWR) Board Meeting in Public

3 July 2023, online

Present: Janet Underwood (JU), Jacqui Darlington (JD), Caroline Spark (CS), Kay Jaques (KJ)

In attendance: Tracey Allan-Jones (TA-J)

Members of the public: Jacqueline Towl, Andrew Nebel, Una Ozga

Guest Speakers: Sandra Taylor, Benefits and Change Manager; Laura Godschalk, Programme Manager; Toby Page, Solution Architect, all from NHS Leicestershire Health Informatics Service

		Action
1	Welcome and Apologies No apologies received	
2	Declarations of Interest None	
3	The Leicester, Leicestershire and Rutland (LLR) Care Record Guest Speakers: Sandra Taylor, Laura Godtschalk and Toby Page gave a presentation (see appendix A) Questions/comments from attendees: <i>JD- Can you explain more about the scope and secondly, you've been down the Shared Care Record path before, what is different now?</i> A: Previously we didn't have enough digital maturity in many organisations, with too many still using paper and no electronic patient records. The systems that were there just didn't talk to each other. Scope-wise, for this new initiative, we had UHL, LPT, the GPs, and the 3 local authorities in the first phase. The scope then widened to include hospice care such as LOROS. We are looking at community pharmacy and care home connections now. There are some national mandates to consider too, such as dentistry, optometry and ambulance services. We are in a much better place now than the early attempts at sharing records. <i>KJ- Will patients and carers be able to access the Care Record?</i> A: At the moment it is for staff, but the team are working with NHS app team to pull everything in so that people will be able to see all their appointments across the board. Hopefully the scope will then widen. You can already give access for a carer as a 'proxy contact' in the NHS app. <i>TA-J- What about other big providers outside the trusts such as DHU who provide NHS111 service and some urgent care and also big not-</i>	

	<p><i>for-profit organisations such as Age UK which delivers dementia support in LLR?</i></p> <p>A: We are working to bring DHU on board and we need to know about others such as Age UK so that we can work with them going forward.</p> <p><i>TA-J- Will Rutland patients' data at GP practices outside LLR borders be included?</i></p> <p>A: No – GP records from practices outside the LLR footprint won't be included at the moment, but if the patient has been seen by an LLR trust like UHL that will be included. Later, linking into other ICS systems will be worked on.</p> <p><i>JU– This seems ambitious and complex – do you have an end date when everything will be up and running?</i></p> <p>A: It will need continuous ongoing development. All organisations should be onboard within 2 years but then we need to develop it into having more specific datasets on maternity and end of life etc.</p> <p><i>JU- Have you allowed for contract changes e.g., urgent care?</i></p> <p>A: we have a process that allows us to onboard new providers quite quickly. We work to have universal standards in commissioning that allow easier connectivity between systems.</p> <p><i>Andrew Nebel - I applaud the ambition of this innovation and the fact that there will be some public access and glad to hear about use of the NHS app. On interoperability, it's key for people where I live in Ryhall. People go to GPs in Stamford and hospital in Stamford and Peterborough. So, we need those organisations to be included.</i></p> <p>A: we are very conscious of the cross-border issues, and we bang the drum at national level. We will keep pushing that.</p> <p><i>JU - The Care Record is only as good as the data put into the systems and people need to know it's right.</i></p> <p>A: The care record is pulling info from somewhere else; we are not creating extra information So it's up to the organisations to make sure their data is correct. If we see that there are data quality problems we feed it back to the organisations to try and improve.</p> <p>Qs from the chat:</p> <p><i>Q- Have you had much opposition from people to having their data shared?</i></p> <p>A: Only one person has objected. We try to stress that the communication between the organisations will still happen, but it will be slower, and that may be detrimental to their care.</p> <p><i>Q- What are you doing to promote this?</i></p> <p>A: We go to Patient Participation Groups, have done social media and online information is available.</p> <p><i>Q- Are you going out to voluntary groups e.g., people with disabilities and especially young people, to do face-to-face sessions because not everyone will understand your online comms?</i></p>	
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	<p>A: We'd like to do more face-to-face work and would welcome if you can please let us know who we can contact.</p> <p>The Chair thanked the speakers for their attendance and the team confirmed they would be happy to attend a future meeting to update the board on progress.</p>	
4	<p>Living with Dementia</p> <p>JU presented the recent HWR report Living with Dementia in Rutland (see appendix 2)</p> <p><i>Discussion</i></p> <p>JD asked if GPs can do diagnosis? TA-J responded that GPs have a basic Cognitive test for diagnosis but often then need to refer on into the Memory Clinic for further scans and definitive diagnosis.</p> <p>KJ commented that the GP test is not sophisticated enough and it can fool people who get a negative GP test into thinking they are OK. A later visit to the memory clinic that results in a positive diagnosis is then a shock and upsetting for patients and families.</p> <p>JD observed that all health terminology now seems to include the word 'care' – e.g., care navigator, care co-ordinator – and this is very confusing for people. JU responded that NHS terminology is very specific to the NHS and people not connected to the NHS don't understand it. JU agreed to raise the need for clarity of language in relation to care and carers with the ICB.</p> <p>In the context of helping people to get to Memory Clinics in Leicester, CS noted that there is an electric free bus service called HOP in Leicester which runs Mon- Sat, 8 to 6pm every 10 minutes. It takes in the LRI and bus/train stations. This would be useful for HWR to publicise. Action TAJ</p>	<p>JU</p> <p>TA-J</p>
5	<p>Minutes of Board Meeting March 2023</p> <p>The minutes were accepted as a true and accurate record.</p>	
6	<p>Minutes Matters Arising</p> <p>All actions completed and closed.</p>	
7	<p>Updates</p> <p>Carers update - JD</p> <p>As Carers Mental Health and Wellbeing worker at the Carers Centre JD is running 2 Projects in Rutland:</p> <ul style="list-style-type: none"> a) Together we Care is for all carers in Rutland. Guest speakers are invited to talk about what carers want. b) Caring for Carers individual and group support for carers' mental health. <p>East Midlands Elective Care Centre JU – the centre is now open and has one theatre operational to help reduce waiting lists. A 2nd theatre</p>	

	<p>will open next year. This is a positive thing for Rutland as the facility is closer to Rutland than other Leicester hospitals.</p> <p>ICB update JU – Health Equity committee has done a deep dive on uptake of childhood immunisations There is a much lower uptake in Leicester which appears to be correlated with deprivation and ethnicity.</p> <p>Andy Williams, CEO, is retiring in November.</p> <p>Engagement TAJ - outreach and engagement activity is on a backburner due to the HW Officer vacancy, although TA-J and JD attended the Carers event in June. With just a modest turnout from carers, the event was useful also for partner networking.</p> <p>Enter and View TA-J – Corby report has been written up by HW North and West Northamptonshire but has not been published yet as the provider has been slow responding. The next planned E&V is Oakham Medical Practice; HWR is collaborating with PPG and planning visits for September. There may also be an opportunity to do some joint mental health inpatient visits with other midlands HW later in the year.</p>	
8	<p>Healthwatch Rutland Manager Update (paper 2)</p> <p>HWR has been unsuccessful recruiting to vacant officer position. If we continue to be unsuccessful, we look to have a secondment for 2 days per week from HW North and West Northamptonshire in the Autumn.</p> <p>A new feedback & signposting system, called IMP, is in place and TAJ will come back to the next meeting to talk about what extra reporting we can do.</p> <p>The website upgrade is scheduled for early August and will entail a period of about a week when content will be frozen and no new information can be added.</p> <p>Dentistry – ICB took on delegated responsibility from April 1 2023, along with Pharmacy and Optometry. There's not much change for Rutland involved in the short term apart from patient complaints which will go to ICB direct instead of NHSE. TA-J advised that we are still waiting for NHS dental procurement plans to be signed off so that a new provider can be commissioned in Rutland to replace the capacity lost last year. JU added that she has asked to be invited to Rutland Scrutiny Committee when dentistry is discussed later in the year.</p> <p>Virtual Wards (VW)– 8 are now up and running and going well. The LLR team won an HSJ award recently. TA-J is now pulling back from development group meetings now that VW are moving into 'business as usual' operation.</p> <p>Ambulance performance – both category 1 and category 2 response times for Rutland have improved but still not meeting their targets. Handovers at Leicester Royal and Peterborough City have significantly improved – see appendix 3 to minutes.</p>	TA-J

9	<p>The HWR Work Plan was agreed- proposed by JD and seconded by JU.</p> <p>Quality accounts from EMAS, LPT & NWAFT – noted.</p>	
10	<p>Questions from the public</p> <p>Andrew Nebel – understands that Minor Injuries at Stamford Hospital is underused and perception that NWAFT may think it is not needed. If the public is not using it, it could be due to not being aware of its existence. So, NWAFT should do more publicity. Can HWR work with NWAFT to understand what is provided and how it's used?</p> <p>TA-J responded by pointing to the recent E&V report on the MIU that gives some background on the service offer. Service overview, demand and capacity information had that day been requested of the working group that is looking at same day access facilities in Rutland. TA-J to keep the board updated and share any available data.</p>	TA-J
11	<p>Any Other Business</p> <p>None</p>	
12	<p>Date of next meeting</p> <p>Next meeting: Annual Meeting followed by Board in Public 3 October 2023</p>	