

Paper 2

**Healthwatch Rutland Virtual Board Meeting in Public**

**14 September 2021, 4-5pm  
Zoom**

**Present:** Janet Underwood (chair), Jacqui Darlington

**In attendance:** Amy Crawford (minutes), Tracey Allan-Jones

**Members of the public:** Ann Jenkins, Philip Marsden, Andrew Nebel, Steve Tylecote, Jean Denyer

**Apologies:** Caroline Spark, Kay Jaques, Andy Williams, Sarah Furness.

Item No.	Item	Action
1.	<b>Welcome and apologies</b>	
2.	<b>Declarations of Interest</b>  None declared.	
3.	<b>Minutes of previous meeting in June 2021</b>  Draft minutes of the last meeting are published on the HWR website. They were not signed-off as a true and accurate record as the meeting was not quorate.	
4.	<b>Matters Arising</b>  4.1 Action rolled over from March/June meeting - Jean Denyer had expressed an interest in receiving a copy of the Inequalities Framework, once the task and finish group had completed it. It is still not in the public domain and will be shared once it is.  4.2 TA-J had produced the <i>'What matters to you?'</i> report in mid-July to commissioners as planned, and published it in mid-August to the public and wider stakeholders, and it is on the Healthwatch Rutland website.  4.3 Questions are invited before the meeting so that an accurate response can be compiled. At the last meeting, a question was received from the public too late for a response; paper 7 was the response to that question.	JU
5.	<b>Updates</b>  <b>5.1 Integrated Care System (ICS) Development</b> JU said that as we were nearing the end of quarter two the next step would be to appoint a new Chief Executive. Quarter three is the appointment of the key board level roles and in quarter four a shadow	

<p>ICS will be up and running and the legal transfer of estates and finances will take place. Digital systems will be in place and ready to go live on April 1, 2022.</p> <p>Question from JD: What are the definitions of the quarters?          JU responded: She assumed that, counting backwards from the start date of 1/4/2021, quarter 2 July-September, quarter 3 October-December, quarter 4 January-March.</p> <p>Question from Andrew Nebel: What patient representation will be factored into the boards as it is standard that all foundation trusts have non-executive directors drawn from the lay community in addition to Healthwatch?          JU responded that Healthwatch has been attending the ICS partnership group where we represent the patient’s voice. Rutland is also represented by the RCC Chief Executive on the ICS Board and an officer and councillor on the partnership group.</p> <p>TA-J added there is also the Public Patient Involvement Panel and a Citizens Panel that are being recruited into. Healthwatch England are also pushing nationally for patient representation. TAJ would provide links to Andrew Nebel.</p> <p><b>5.2 Lakeside Healthcare Stamford Care Quality Commission inspection</b>          JU stated that it is HWR understanding that approximately 2,000 Rutland residents are registered with Lakeside. The recent CQC inspection had resulted in Lakeside Stamford rated as ‘inadequate’. They need to improve on a number of areas: they must provide safe care; they must improve governance; and they must support staff in their training and development. There will be a repeat inspection after 6 months.</p> <p>Many former Lakeside patients have transferred to other practices, so HWR were watching for signs of extra pressure being put on the Rutland Practices. TA-J added that HWR had recently received less negative feedback regarding local General Practice, including Lakeside and Oakham Medical practice.</p> <p>AN stated that he has met with the Chair of the Lakeside Patient Participant Group (PPG) and believes there has been some improvement. AN stated that he has moved to Empingham Surgery and is co-chairing a newly launched Empingham PPG to regalanise the patient base.</p> <p><b>5.3 Step up to Great Mental Health Consultation</b>          Leicester Partnership Trust had re-organised some mental health crisis services from early on in the COVID-19 pandemic. Some of these changes were positive and it is proposed that they be continued subject to the formal public consultation. The consultation proposals also included plans to bring mental health support out into local</p>	<p>TAJ</p>
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	<p>communities, making it easier and quicker to access support where people live. JU stated that since receiving the ‘requires improvement’ rating 2-3 years ago, LPT have worked very hard to improve; Step up to Great is part of the improvement planning.</p> <p>HWR had invited commissioners and staff from LPT to our June board meeting to encourage people to take part in the consultation. Further to this we had engaged with carers about their mental health and use of LPT services and sent a Board response to the consultation (see paper 2).</p> <p><b>5.4 University Hospitals of Leicester NHS Trust (UHL) acute and maternity hospitals reconfiguration</b> JU stated the decision-making business case was approved with very little public oversight and that the £450 million budget still stands. In response to the pandemic, UHL needs to create more individual rooms. There is no intention to reduce beds so more space will be needed. As a reflection of the climate crisis the hospital trust will also need to aim for net zero carbon footprint in the builds.</p> <p><b>5.5 Engaging Effectively during COVID-19</b> TA-J said the whole point of HWR is for us to engage with people to hear their experiences, and that COVID-19 had created limitations and challenges because face-to-face contact had mostly not been possible. We had found other ways to engage using online and telephone alternatives. Since restrictions had eased, people seem reluctant to meet in person but now did not want to meet digitally either. Despite the lifting of restrictions, we have a duty of care to staff, volunteers and members of the public and continue to take a risk-based approach to face-to-face meetings.</p> <p><b>5.6 ‘Let’s Talk...’ Project Update</b> AC updated the meeting that the project is looking at the changes to health and social care brought about by the pandemic and how these changes have affected patients. The report for the first topic (Accessing GP Practice Appointments) was nearly complete, and the second topic (Hospital Visiting) was currently being written up.</p>	
6.	<p><b>Healthwatch Rutland Manager Update</b></p> <p>See paper 6. Most things had already been covered in the Annual Meeting.</p> <p>6.1 TA-J expressed concern that there was as yet no local COVID-19 vaccination centre offer for phase 3 of the vaccination programme. Rutland people would have to go out of county for this. The CCG was hoping to have a local vaccination offer by October. This could possibly involve pharmacies giving vaccinations. The concern is that vaccination uptake by younger people will be diminished as a result. Viv Robbins, Public Health Consultant for Rutland had agreed in the preceding Annual Meeting to push for this provision. JU stated that</p>	

	<p>vaccines for school children would start the following week.</p> <p>6. Ambulance performance data indicated that response times were getting longer. Demand on East Midlands Ambulance Service is at an all-time high, with extra 10-20% demand across the East Midlands region. Ambulances face long waits for Emergency Departments to accept patients (especially at Peterborough at the moment) which exacerbates the problem. Patient choice of hospital can be reduced during busy times as the paramedics make decisions based on clinical safety as to which hospital the patient should be conveyed.</p>	
7.	<p><b>Policies for Approval</b></p> <p>Postponed until the next meeting.</p>	
8.	<p><b>Questions and comments from the Public</b></p> <p>8.1 Response to a question submitted in the June board meeting- see paper 9.</p> <p>8.2 Question from Philip Marsden- Corby has a 24-hour Walk-in Centre. In Rutland we do not have a walk-in centre. We are missing a central hub. It has taken me 2.5 months to arrange an ultrasound scan.</p> <p>TA-J asked if Corby still offers walk-in in the context of the pandemic or whether you have to ring 111 beforehand, and would check this out.</p> <p>Andrew Nebel stated that the minor injuries at Stamford Hospital is opening again.</p> <p>8.3 Jean Denyer asked is there any information or work being done for people waiting for operations?</p> <p>TA-J replied that HWR are getting involved with a Healthwatch England (HWE) project on waiting times which would be reported on the HWE website.</p> <p>8.4 No additional questions were submitted before the meeting.</p>	TA-J
9	<p><b>Any Other Business</b></p> <p>East Midlands Ambulance Service had been invited along to the next meeting and please send in questions beforehand.</p>	
	<p><b>Date of next meeting:</b></p> <p>Tuesday December 7<sup>th</sup> 6:30-8:30pm</p>	

Signed as being a true record of the meeting: Dr Janet Underwood, Chair Healthwatch Rutland

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