

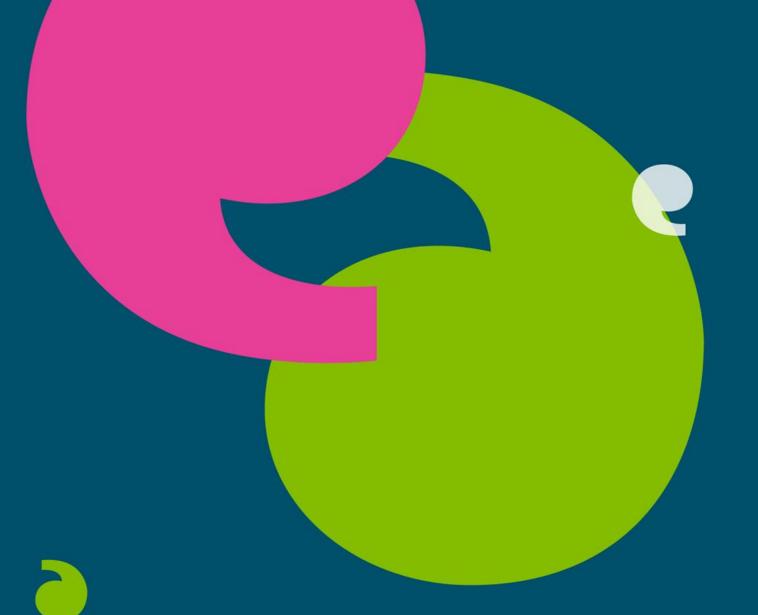
healthwatch

1.1 Welcome and apologies
Jane Mordue



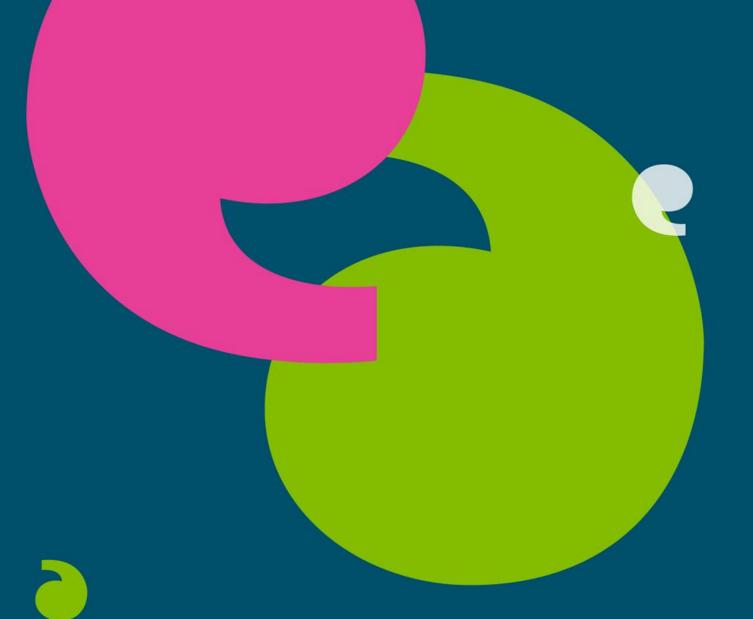


1.2 Minutes, action log and matters arising Jane Mordue



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1.3 Declarations of Interest Jane Mordue



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1.4 Interim Chair's Report Jane Mordue





1.5 Acting National Director's Report Susan Robinson





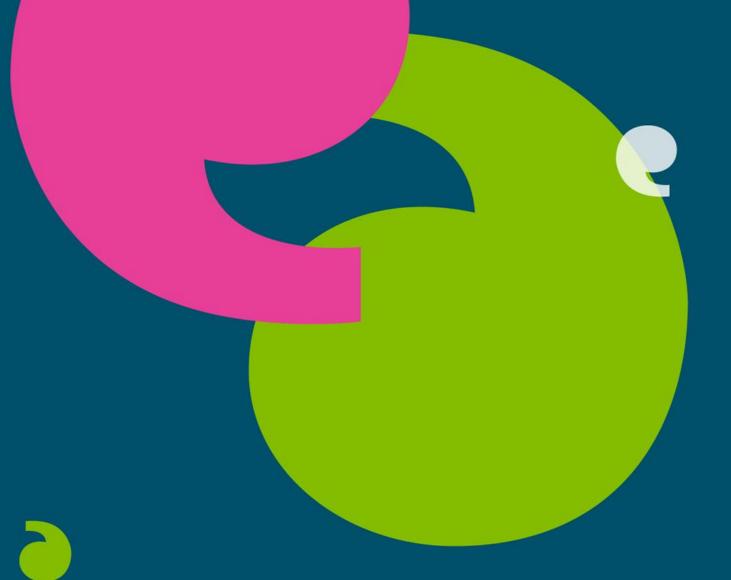
1.6 Report on Delivery (Quarter 3 - 2015/16) Leadership Team





1.7 Operating effectively as a statutory body Leadership Team





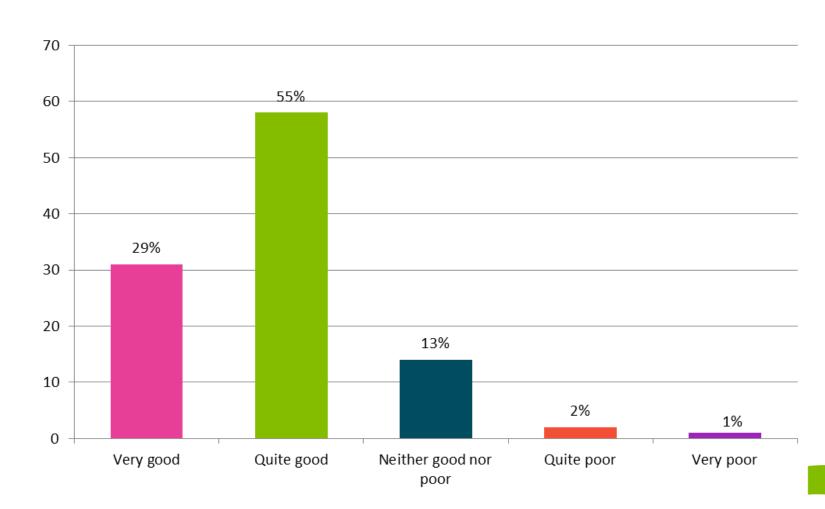
2.1 Intelligence Return: What local Healthwatch told us Gerard Crofton-Martin

Response rate

- 112 responses received to this intelligence return
- 107 respondents completing the return
- This gives a completion rate of 73%
- (17 responses) 14% reduction compared with last year when 124 local Healthwatch completed the same survey (in 2014)

The relationship with Healthwatch England

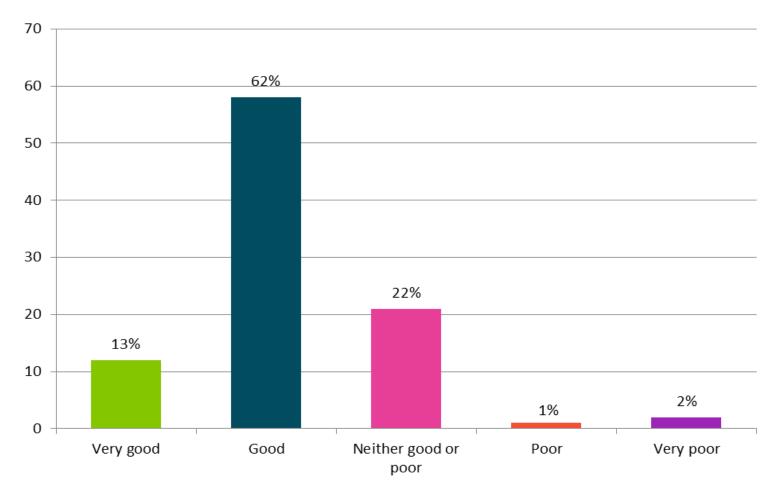
Local Healthwatch relationship with Healthwatch England



Number of local Healthwatch

The difference Healthwatch England is making for people using health and care services

The difference Healthwatch England is making for people using health and care services



Number of local Healthwatch

Areas where local Healthwatch have a high awareness of the support we offer

	% of all respondents who are aware of/or used the Total number of	
Area of support	resource	respondents
Annual report template and guidance	97.2%	106
Regional network meetings	96.2%	104
Your understanding of how to get involved with the Quality		
Statement work	96.1%	102
Your awareness of the Quality Statements work	93.1%	102
Your engagement during the Quality Statements work	92.8%	97
The support available for using the Quality Statements	92.0%	100
Usefulness of responses from development team	91.5%	106
Individual visits from regional development officer	82.9%	105
Support on CQC inspections and relationship building	81.9%	105
Keeping your independence as a local Healthwatch	81.0%	105
How you felt the annual conference 2015 went	78.3%	106
Awareness of CRM	76.9%	104
Care Act briefing: Information and advice	76.0%	104
Conflicts of Interest guidance	73.6%	106
Engagement on CRM	72.8%	103

Areas where local Healthwatch have a lower awareness of the support we offer

	% of all respondents who are aware of/or used the Total number of	
Area of support	resource	respondents
LHW investigates primary care report	57.5%	106
Care Act briefing: Co-operation and Integration	55.9%	102
The template letter to be sent to CCGs (July 2015)	55.8%	104
The 'top 5 things to ask your CCG' checklist (July 2015)	54.8%	104
Usefulness of the training for CRM	54.8%	104
List of current Legislation (July 2015)	39.8%	103
The Consumer Dental Journey briefing	36.9%	103
Annual report guidance webinar	35.0%	103
Lead officers online discussions	32.0%	103
Keeping your independence as a local Healthwatch webinar	19.2%	104
Service change guidance and support webinar	15.5%	103
Intelligence team support webinar	15.5%	103
Commissioning cycle webinar	14.4%	104
Special Inquiry report webinar	13.7%	102
Elected Representative webinar	12.6%	103

Areas of support which were found most useful

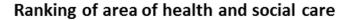
Area of support	% of people who used or were aware of the resource who found it useful	Total number of respondents	Number of respondents who are aware of/or used the resource
Individual visits from regional development officer	88.5%	105	87
List of current Legislation (July 2015)	87.8%	103	41
Care Act briefing: Information and advice	87.3%	104	79
Regional network meetings	87.0%	104	100
Annual report template and guidance	86.4%	106	103
Primary care co-commissioning briefing	85.3%	104	68
Usefulness of responses from development team	84.5%	106	97
Care Act briefing: Co-operation and Integration	84.2%	102	57
How you felt the annual conference 2015 went	77.1%	106	83
The Consumer Dental Journey briefing	76.3%	103	38
Our children and young people's mental health and			
wellbeing briefing (July 2015)	74.6%	103	63
LHW investigates report	72.1%	106	61
Special Inquiry report webinar	71.4%	102	14
Your awareness of the Quality Statements work	70.5%	102	95
Awareness of CRM	70.0%	104	80 14

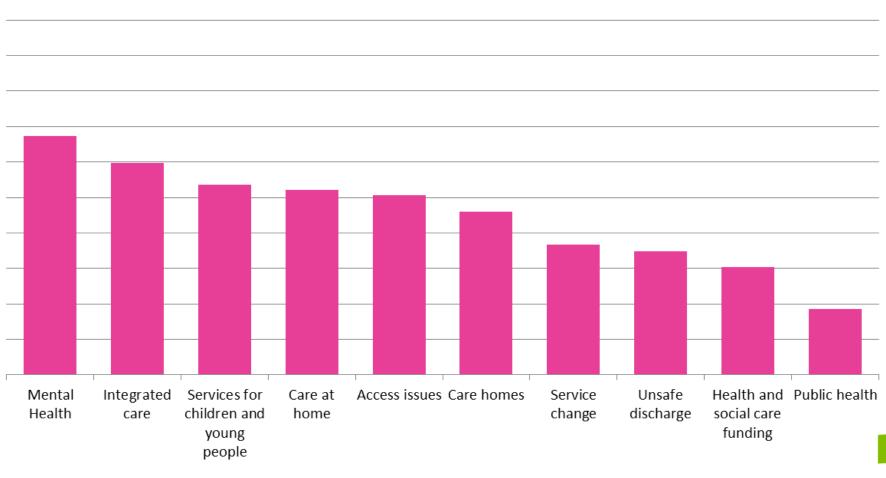
Areas of support which were found least useful

Area of support	% of people who used or were aware of the resource who found it useful	Total number of respondents	Number of respondents who are aware of/or used the resource
Support on CQC inspections and relationship			
building	59.3%	105	86
Service change guidance and support			
webinar	56.3%	103	16
Intelligence team support webinar	56.3%	103	16
Your engagement during the Quality			
Statements work	51.1%	97	90
The template letter to be sent to CCGs (July			
2015)	48.3%	104	58
Engagement on CRM	48.0%	103	75
Commissioning cycle webinar	46.7%	104	15
Elected Representative webinar	46.2%	103	13
Usefulness of the training for CRM	45.6%	104	57
The support available for using the Quality			
Statements	44.6%	100	92

Areas of future support

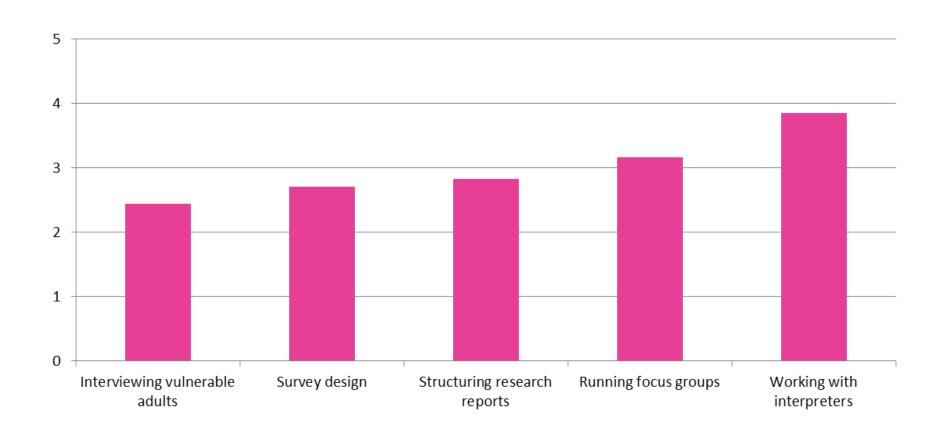
Areas of health and social care where local Healthwatch want information and support





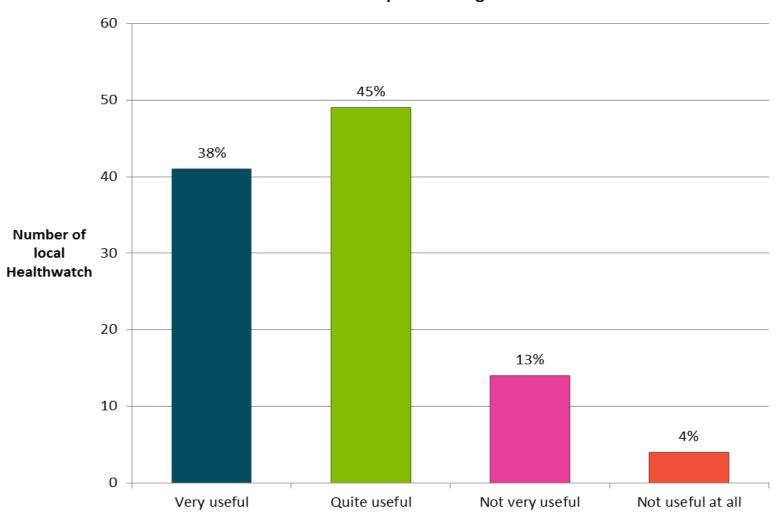
Research support

Usefulness of support areas



Data Protection

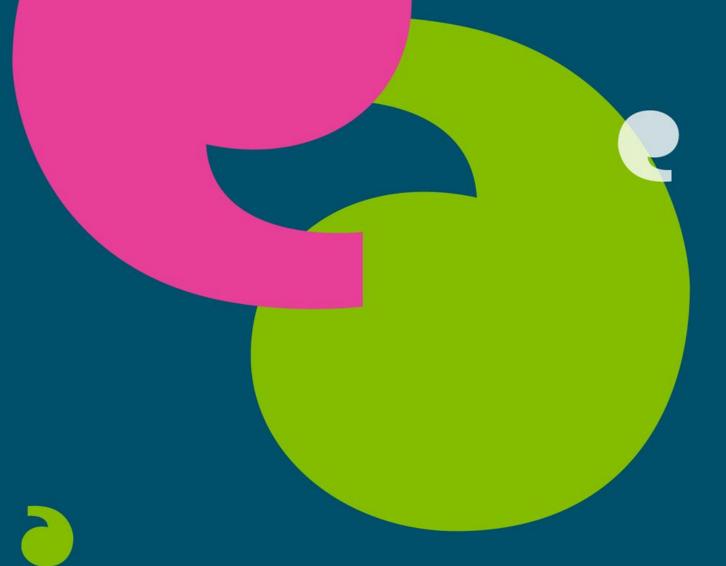




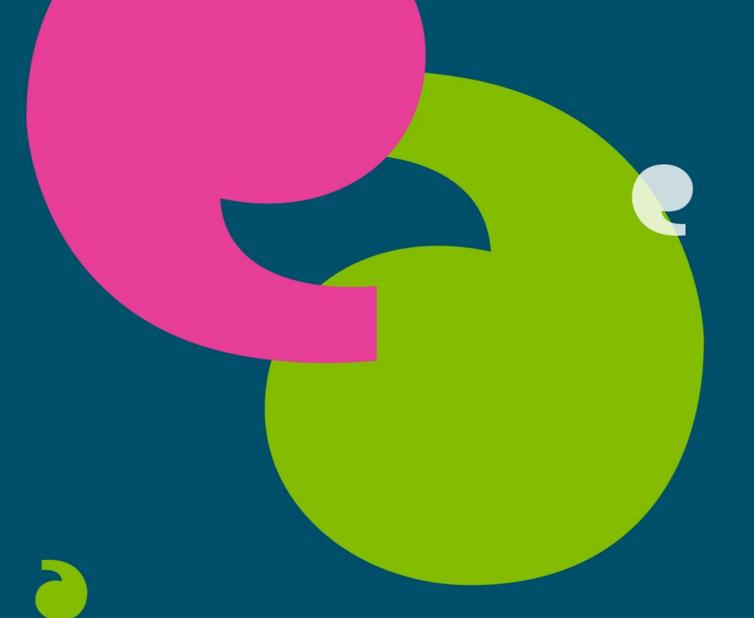
Media support guide

- 76 respondents (80%) felt a media support guide from Healthwatch England would be useful
- 7 respondents (7%) did not think it would not be useful.





2.2 Draft high-level business plan 2016/17 Susan Robinson



healthwatch

3.0 Public Participation
Anna Bradley



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4.1 Intelligence Framework
Gerard Crofton-Martin

Our key intelligence sources

Source	Q1 feedback	Q2 feedback	Q3 feedback
Local Healthwatch reports (including enter and view)	71 reports	73 reports	97 reports
Escalated issues from local Healthwatch	8 cases	11 cases	9 cases
Enquiries received by Healthwatch England for signposting, or where people shared views or complaints about health and social care	157	414	311
Emergent data from the CRM system	1400 issues	1900 issues	1142 issues (from 13 local Healthwatch)

Key issues from local Healthwatch

From across local Healthwatch Intelligence, some key areas emerge:

- Primary care, particularly access to GPs;
- Mental health;
- Provision of information
- Hospital discharge
- Urgent care

Access to GPs

- Difficulties faced accessing appointments and maintaining confidentiality while making appointments
- Issues within waiting rooms in particular around the provision of hearing loops and sufficient privacy in making appointments
- Lack of awareness around online booking facilities
- Escalations included a local 40% reduction in GP dispensing lists, and the propriety of incentive payments
- 18% of negative issues recorded in the CRM this quarter related to GPs, in particular difficulties faced with getting appointments and people feeling they were not listened to by their doctor

Mental Health

- Young people's access to mental health services, which found issues around: stress and anxiety experienced by young people, stigma and the role of the family in providing support in improving mental health
- The experiences of Vietnamese and Chinese individuals using mental health services - identifying difficulties with access due to language barriers and digital exclusion
- The lack of awareness of community mental health support available locally
- 8% of negative issues recorded in the CRM system this quarter were on mental health services, noting issues around a lack of mental health support available locally

Provision of information

- Identifying local provision of information and any information gaps, as part of formulating an information strategy
- Specific research into local attitudes to sharing information resonating with work from Healthwatch England on care.data

Hospital discharge

- People being discharged before they felt ready, confusion over medical terms, and the lack of continuity with medical resources
- Not having enough time to discuss their discharge and difficulties in receiving medication when back in the community

Urgent care

- Individuals still use their GP for urgent care needs which is preferred to alternative forms of support, although there was a lack of awareness of alternative forms of support
- A need for better training and expertise in urgent care services, as well as supporting data to increase provision of urgent care services where they are needed the most

Our developing approach to using local Healthwatch intelligence

- Proactive weekly review of local Healthwatch reports
- Information from the CRM system
- Escalated issues from local Healthwatch
- Information from local Healthwatch Annual Reports
- Local Healthwatch priorities 2015-16
- Enquiries received by Healthwatch England
- National datasets and reports

Draft framework to analyse local Healthwatch reports

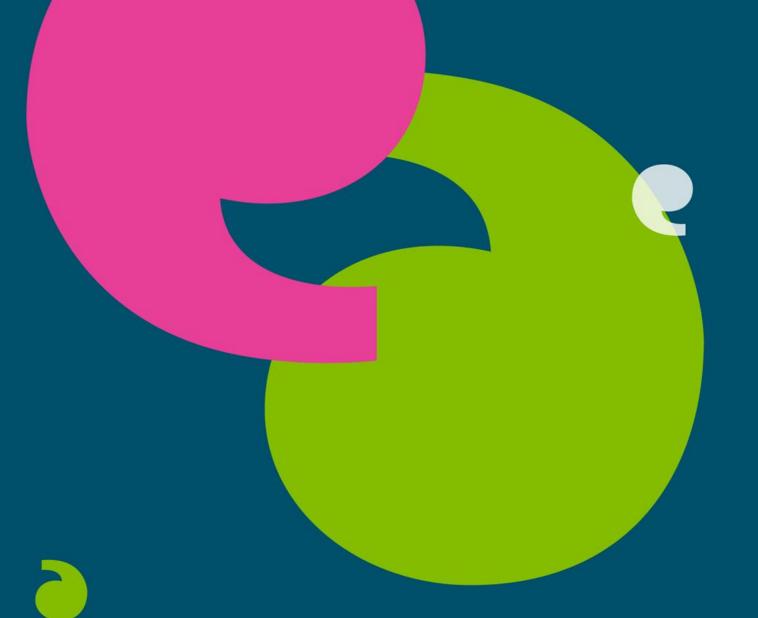
- To support the monitoring of reports produced by the network, and to share these back with the network and wider stakeholders in a systematic way
- To summarise and report the content of each report
- To inform the research support strategy for the network

Draft framework categories to analyse local Healthwatch reports

- Date of publication
- Data collection period
- Local Healthwatch
- Service/care area
- Groups
- Consumer principles
- Key findings
- Recommendations
- Key partners
- Guidance/support/training needs
- Version of the report
- Follow up report
- Good practice

Next steps

- The Committee are asked to <u>Discuss</u> and <u>Agree</u> the framework to be applied to local Healthwatch reports
- Healthwatch England will work to understand how other stakeholders, including local Healthwatch, want information from us
- Healthwatch England will review our data capture as well as our analysis, reporting and use of information
- Following the completion of this work, the Committee will be asked to agree an approach to gathering and processing information about health and care issues provided by local Healthwatch



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4.2 Healthwatch 2016
Andy Payne

Development of the 2016 event

Following the success of previous conferences and feedback received from conference evaluations - The **purpose** of the 2016 event is to focus on the development, strengthening and capacity building of the network to have maximum influence on behalf of the public.

Conference objectives

- For the conference to be more focused on and led by local Healthwatch in accordance with their priorities, rather than ours
- For the conference to be delivered in a more co-produced format, with more input from the network

This year, the conference will therefore;

- Build confidence across the network by providing local Healthwatch with the opportunity, tools and support to lead sessions focusing on best practice evidenced in their priorities over the past year
- Offer greater opportunities to network, share and learn from each other, through an agenda focusing on delivering sessions led by local Healthwatch
- Provide keynote sessions that will focus on increasing leadership and influencing skills to help build a stronger network

Ensuring local Healthwatch get the most out of the conference

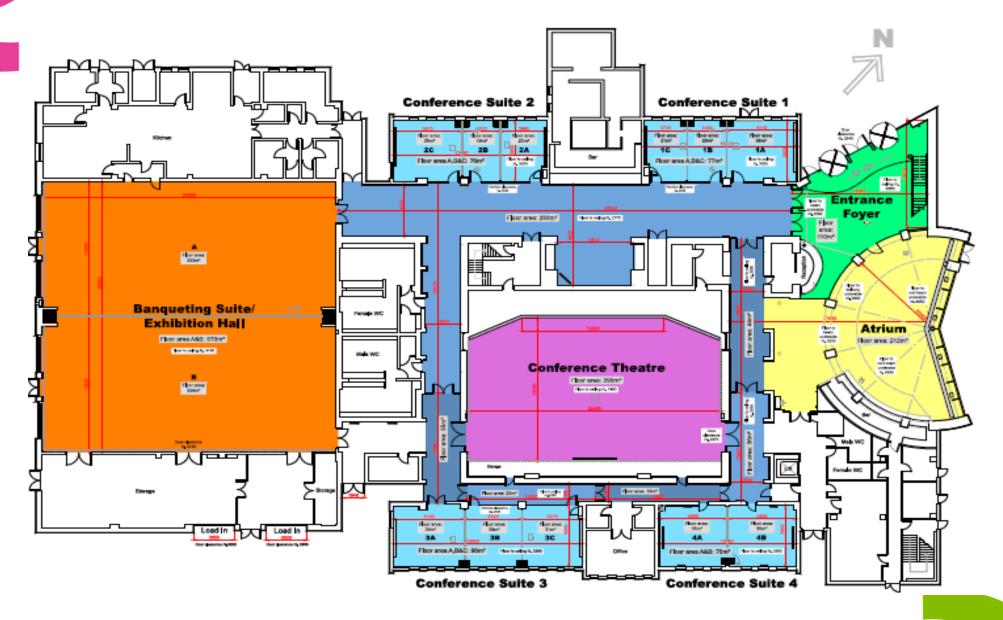
- The agenda has been planned to ensure **maximum** use of space at East Midlands Conference Centre in Nottingham.
- Up to 3 people from each local Healthwatch can attend per day and there are no restrictions on who attends (last year day 1 was for Chairs and Lead officers only)
- Conference sessions will run concurrently, the increase in the number of places available per local Healthwatch will allow attendees to be able to cover the range of sessions on offer
- The maximum number able to attend per day is 500
- There is plenty of space for break-out conversations and small groups to form
- All session materials will be available online pre and post conference
- To ensure spend is focussed on delivery of the conference, we are working towards a paper free conference

Delivery of Healthwatch 2016

The sessions for Healthwatch 2016 will be delivered in the following zones and formats;

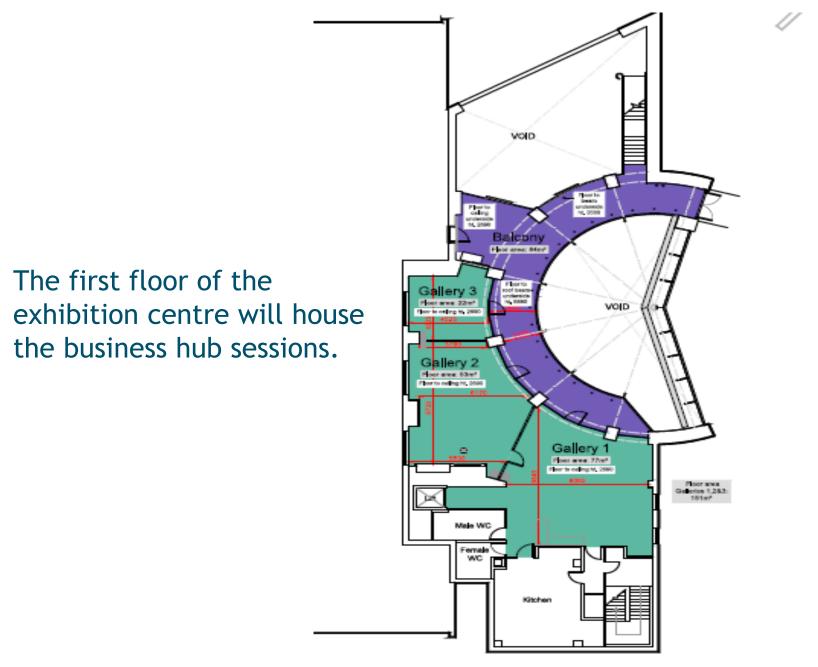
- Local Healthwatch led sessions building on the wealth of knowledge within the network, and offering the opportunity for peer to peer learning as well as showcasing local Healthwatch work
- Plenary sessions with key note speakers an opportunity to learn about developments on key national issues, in areas identified through feedback from the network
- Seminar sessions with subject experts an opportunity for broader discussion around issues that affect the network, in areas identified through feedback from the network
- Business Hub building the strengthen of the network through sessions which focus on sustainability and capacity building

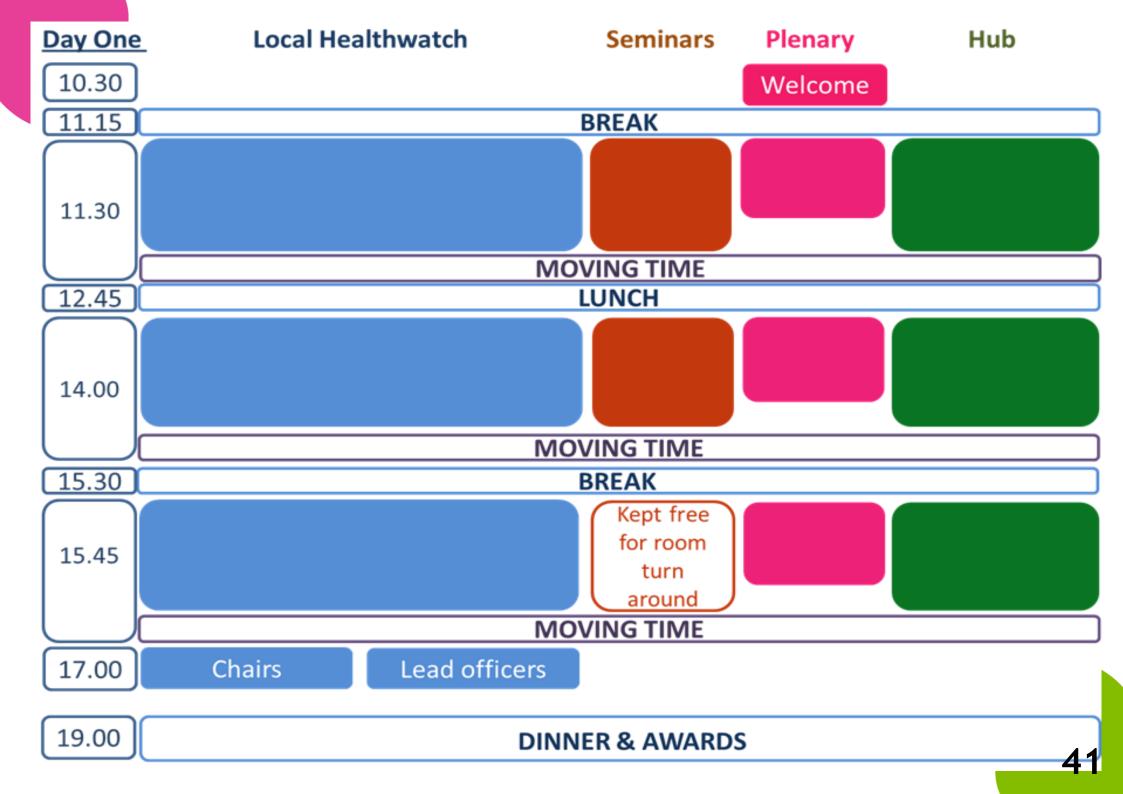
Venue -main area



Conference venue layout - all space is for the exclusive use by Healthwatch and is located on the ground floor. It is accessible to all and is adjacent to hotel accommodation.

Venue - business Hub





Local Healthwatch led sessions

Up to 34, one hour sessions across the 2 days led by local Healthwatch.

What will local Healthwatch get out of the sessions?

- An opportunity for peer to peer learning to grow their skill base, development of the overall network, and showcasing of local Healthwatch work
- Sessions will be pre bookable

What support will be provided by Healthwatch England?

- Full AV support on the day to deliver the session and we will provide pre-session support.
- Support to develop sessions, including session templates with guidance on standardised titles, session descriptions, session aims, learning objectives and timings.
- Support from Healthwatch England conference planning team to ensure local Healthwatch sessions are the best they can be
- Healthwatch England will ensure session materials are made available in accessible formats required.
- Set up time built into the agenda

Plenary sessions

Held in the theatre, for up to 400 people

- 6 X 40 minute sessions run over the two days.
- Key note speakers

What will local Healthwatch get out of the session

- Audience likely to be Chairs and Operational Leads
- An opportunity for education on areas that the network have identified as of national importance where a strategic direction is needed

Current titles for plenary sessions

- Healthwatch & CQC the value we bring together
- Service Change where are we now?
- Safeguarding Adults national picture post Care Act 2014
- Local sustainability and transformation plans
- Demonstrating Impact
- Improving outcomes for Children and Young People

Seminar sessions

Held in cabaret style room, for up to 100 people with 4, one hour sessions, across the two days

- Interactive sessions with table discussion
- Facilitated by external subject experts, with opportunity for the Committee and Healthwatch England staff to input and be part of sessions on the day
- Sessions will be pre bookable

What will local Healthwatch get out of the session:

- An opportunity to explore areas indicated by local Healthwatch as issues that affect the network
- Notes taken from the sessions will be written up so that learning can be shared by the network.

Current titles for the seminars

- Improving experience of social care services
- What to do when there is a crisis locally?
- Engaging with key stakeholders who to speak to when
- A fresh view on governance issues

Business Hub

Up to 10, one hour sessions across 2 days, delivered by subject experts including local Healthwatch

- We know that sustainability is a huge concern for local Healthwatch
- As well as the planned sessions, there is space available for local Healthwatch to continue their conversations

What will local Healthwatch get from these sessions?

- Practical skills and knowledge to take back on area that identified through the data return and development team intelligence
- There are also 3 further rooms, which are for Healthwatch England drop in sessions i.e. CRM, Communications, Research and Intelligence

Current subject areas for the business hub

- Supporting volunteers
- Building the relationship with local Healthwatch commissioners.
- Sharing resources
- Generating income
- Leadership and representing local Healthwatch

Network Awards of Achievement

The conference 'Network Awards of Achievement', will recognise the individuals and teams across the network who have demonstrated excellence. Following feedback received from the network, the awards process and ceremony this year has been developed to ensure an inclusive approach.

Categories

Following feedback provided by the advisory group, network meetings and the 2015 conference evaluations, the categories for 2016 are:

- The value we bring through collaboration with each other
- The value we bring to commissioning of....(named specialism)
- The value we bring to Health & Social Care services improvement
- The value we bring through working with the CQC
- The value we bring through volunteering
- The value we bring to our community
- The Network's Choice Award

Network Awards of Achievement

What we have changed for 2016:

- Streamlined the categories to reflect and focus on the priorities of the network.
- The aim is to encourage each local Healthwatch, regardless of their size, to apply for a category. The application process will be supported by the development team.
- Ensure fairness each local Healthwatch will only be able to enter a maximum of two categories.
- The awards ceremony itself will focus on the work of the network with a modest form of delivery on stage.
- We have an external judging panel of selected stakeholders from each specialism, which will provide an opportunity to engage them in local Healthwatch work relevant to their area

Next steps

Allowing for time to support the network to develop and deliver sessions and to ensure the conference activity delivery stays on schedule, these are the key dates:

Next Steps	
Activity	Due date
Agenda finalised	29.02.16
Agenda session booking testing	29.02.16
Registration Site Opens	14.03.16
Bursary Applications Open	14.03.16
Awards Applications Open	14.03.16
Award Applications Closing Date	15.04.16
Bursary Applications Close	15.04.16
Awards shortlisting & judging to be	
completed	20.05.16
EVENT	08.06.16





5.0 Any other business and close of session Jane Mordue





6.1 Audit and Risk Sub Committee Chair's Report

Michael Hughes







6.3 Committee Members updateCommittee Members