

Healthwatch Portsmouth Advisory Board Meeting 29 Sept 2021 - via Teams

Attended:

Healthwatch Portsmouth Advisory Board: Roger Batterbury Chair (RB), Mary Amos (MA), Jan Dixon (JD), Peter Izard (PI) Graham Keeping (GK) Jennie Brent (JB), Ram Jassi (RJ), Salma Ahmed (SA), Peter Izard (PI), Chris Noble (CN) Operations Director, The Advocacy People
Board Advisors: PCC Commissioner Amanda McKenzie (AMc)
Healthwatch Portsmouth: Siobhain McCurrach (SM) Healthwatch Portsmouth Manager
HWP Advisory Board Minute Taker: Avril Adams-Baxter (AAB) Healthwatch Portsmouth Volunteer

Guests Speakers: Sarah O'Neil, Family Liaison Officer, Solent NHS Trust. Sue Metcalfe, Head of Quality -Ward Accreditation and Patient Experience for PHUT. Michelle Lobo, Family Liaison Service Manager, PHUT. Leon Herbert, Head of Diversity and Inclusion, Solent NHS Trust.

Item 1: Welcome, apologies and declarations of interest. Apologies: Apologies were received from Anthony Knight Vice-Chair and Isobel Ryder

Declarations of interest: There were no declarations of interest.

Welcome from HWP Chairperson: RB welcomed everyone to the September 2021 HWP Public Board Meeting which due to the current Covid-19 restrictions was being held on Teams. He reminded attendees of protocols.

The Healthwatch Portsmouth Manager has worked with the Operations Director of the Advocacy People to draft an updated Governance Handbook. The Healthwatch Portsmouth Board members have reviewed the Governance Handbook and approved the document at a separate meeting of the HWP Board on 21st September 2021 at which the existing HWP Board members were asked to stand down and were reappointed as HWP Advisory Board Members by the Operations Director of The Advocacy People. This has brought the HWP governance document up-to-date and with some minor changes one being the HWP Board is now the HWP Advisory Board and there are no HWP Advisor roles which were instigated at the beginning of HWP in 2013, we have grown since then and now have HWP Elected Board members and Co-opted Board members.

It has been yet another busy period for HWP with mostly virtual meetings both familiar and new, last week we took part in a stakeholder interview panel for two Director posts with the Hampshire & IOW Integrated Care System representing all 4 Healthwatch in the region. Other regular meetings took place such as the Health & Wellbeing Board, the Local Outbreak Engagement Board, with the HWP Chairperson attending in person the Portsmouth Bangladeshi Business Association AGM representing HWP. HWP has worked with the Portsmouth Down Syndrome Association (PDSA) and Solent NHS Trust over access for children with Down Syndrome to Solent's Speech and Language Therapy service. (PDSA presented to the Board in early 2020 and raised an issue with us in their presentation about access for families to services). HWP Chairperson attended a HWP volunteers training session in person in preparation for a forthcoming Enter and View visit.

Worth mentioning that from April 2022 there will be the Hampshire & IOW Integrated Care Systems (ICS) - which we will hear lots more about over the next few months and years and ongoing, with terminology such as "Place based systems" - especially in Portsmouth.

Our "postbag" a collective description of emails, social media posts and conversations, has been primarily about access to dentistry, and access to primary care. The HWP Manager's report will highlight these and other matters and many of the meetings HWP have attended.

Our local newspaper The News continue to ask for HWP comments on matters pertaining to health & social care - always a good experience.

Since our last meeting due to work constraints Jane Bailey a Board member for many years has resigned. The HWP Board would like to thank Jane for her service over the years as a dedicated HWP Board member. The HWP Chairperson asked the HWP Advisory Board members to introduce themselves to the meeting.

Since the last HWP Board meeting this is a list of other meetings the HWP Chairperson has attended, representing HWP -

- Supported the University of Portsmouth (UoP) Nursing and Allied Health Professionals Faculty with Fitness to Practice Panels utilising the Code of Student Behaviour
- Meetings with Portsmouth Hospitals University Trust (PHUT)
- Attended some in person and others virtual for Portsmouth City Council Adult Social Care a stakeholder interview process
- Attended various UoP Nursing, Social Care & Allied Health Professionals SU & Carer Groups
- Regular Healthwatch regional meetings with Chairs & Managers in the Hampshire & IOW Integrated Care System (ICS)
- Attended the regular Portsmouth & South East Hampshire Integrated Care Partnership (PSEH ICP) Quality Committee as the patient representative
- Attended a virtual Healthwatch England (HWE) meeting about dentistry where England's Chief Dental Officer was present & I made her very clear what chaos it is in Portsmouth with dental appointments and that it is virtually impossible to get a dentist or dental treatment.
- As an aside although Hanway Rd Dental Practice is open we believe it is full now of NHS patients, and unfortunately the Cosham Dentists is yet to open
- Recently I attended the PHUT Mental Health Board chaired by the Chief Medical Officer it was the first meeting
- Attended a Quality Accounts Roundtable event with HWE & NHSE/I
- Some regular emails to Alison Cross at NHSE about the commissioning of dental services and our local issues
- Attended regularly the PCCG Primary Care Commissioning Committee
- Had regular fortnightly meetings with Siobhain
- Plus everything else that is part of being HWP Chairperson so emails most days, reading and phone calls

Item 2: Minutes of last Healthwatch Portsmouth Board meeting 23.6.2021 and matters arising:

The minutes of the Healthwatch Portsmouth Board Meeting of 23 September 2021 were accepted as a true record of the HWP Board meeting in June. The minutes were proposed by GK and seconded by JD.

Item 3: Solent NHS Trust's Family Liaison Service - Sarah O'Neil, Family Liaison Officer, Solent NHS Trust

Sarah outlined her role and stressed that it was ad hoc and not straightforward. This is a new role in the NHS and is designed to support families in times of crisis:

- Providing independent support, "hand holding", assistance at inquests and investigations, dealing with complaints and issues, usually following sudden deaths. Using the 'Learning from Deaths' principles generated by Solent NHS Trust.
- It is family led.
- Support and guidance, letter writing and mediation.
- Listening and ensuring all services work together, including police, GPs and coroners
- Promoting open conversations and ensure that all those concerned are involved
- Attending inquests, often cases of murder and manslaughter, taking over when the police family liaison service drops out (but not whilst they are involved) and incidents occurring on board ships when information gathering is required
- Attending funerals when requested to do so
- Involved when people are dying to provide support and information

Jackie Monroe Chief Nurse stressed that this was a very important role and that her team were also involved in some of this work and seek advice from Sarah who always steps up and remains independent. Gina Winter-Bates, Associate Director of Quality and Governance (attending from Solent NHS Trust) explained that Sarah is in her team but is independent. Sarah is informed by Gina if there is a family needing help, not just for those families whose relative has just died, and is introduced to families

Questions:

RJ - I'm touched by your compassionate work, how does she introduce herself to families as an independent supporter but who is employed by the Trust?

Sarah - explained that she has handled cases in another trust and starts off by offering to have a cuppa with the family. Sarah always remains impartial, stresses that she is completely independent and is there to support them. She is a good listener, has an open and honest approach and that she is not emotionally involved and can therefore be non-judgemental, shockproof. FLOs follow a formal process, identifying an audit trail as if the family had made an 'Access to Records' request. It's a trusting relationship.

GK - Said that Sarah was involved when his brother was diagnosed with dementia, but there seems to be little support for other sufferers who do not have family to support them. It's improving, but a similar person in post for people with dementia would be good, is she involved in this?

Sarah - Not involved in such cases, she steps in when there has been a sudden death. This is a new role, started small but is now picking up speed in the rest of the UK.

SMc -said that during lockdown HWP had received an increased number of calls from people asking for help, it was obvious that family support services require more staff. SA How many families are currently being supported?

Sarah - caseload has been impacted due to the fact that the Coroner's Court has been closed during lockdown, meaning that some people have been waiting up to 2 years after the death of their family members. Sarah is always there to provide support until cases come to a natural conclusion. Therefore, by being involved in more cases than usual this is adding to her workload. Current capacity is okay, but 30-40 active cases currently and a number of dormant cases as well. It's unpredictable. She doesn't expect to get affected by cases but sometimes she is.

JD - declared an interest as she has worked with Sarah in the past, RB thanked her.

Item 4: Portsmouth Hospitals University Trust's Family Liaison Service - Michelle Lobo and Sue Metcalfe

PHUT presentation to Healthwatch Portsmouth 29.09.21

Questions:

RJ - thanked Michelle and Sue for a fantastic presentation; we are living in extraordinary times. RJ asked about how they balance providing a 'social care service' using acute hospital care funding? Sue - The service has been running for 18 months through the pandemic and PHUT has realised that supporting people's social and emotional wellbeing equates to physical care. Feedback from the patients is that it's the little things that matter. PHUT Leadership Team hasn't queried the basic premise of the service and has asked Michelle to provide a presentation calling for an extension of compassionate care to be provided to other areas of the Trust in order to broaden resources. The slides that we saw were shown to the senior management team who were "stunned".

RJ said he'd be interested to see how the services with the healthcare system transition from providing acute health care to social care needs and how this plays out with corporate boundaries of care.

Jackie Munro of Solent NHS Trust said that if Solent can shape the integrated care system then the crossover should be appropriate for health care services to learn how to provide the necessary support. Links to home and/or family are essential for patients in their recovery.

Item 5: Solent NHS Trust: Diversity and Inclusion - Leon Herbert, Head of Diversity and Inclusion

HWP have asked for a copy of the presentation slides presented at the Board meeting but these have not been received. HWP have received though the Solent Trust Equalities Monitoring animation, produced with local service user led developer Drop The Mask Productions.

Solent NHS Trust Equalities Monitoring Animation 23JUL21 Final

In addition, Leon has sent to HWP a presentation 'Addressing COVID-19 Vaccination Hesitancy within Hampshire's Black British, African and Caribbean Communities' PDF evaluation report which Leon referred to in his presentation.

Addressing Vaccine Hesitancy Report Solent NHS Trust

Leon spoke about Solent NHS Trust's Diversity, Inclusion and Community Engagement work, a document which has been produced summarising the Trust's approach was referred to 'Alongside Communities' which HWP have been involved in the development of.

Solent NHS Trust Alongside Communities

The essence of Solent's approach is that an individual will have individual needs so may need help to be able to equally access health services.

Earlier in the year Solent had become very aware of COVID vaccine hesitancy in Black and Minority Ethnic communities across Hampshire and the Isle of Wight. In response, Solent worked with colleagues to find out why and produced a report (Vaccine Hesitancy report above) . Solent NHS Trust organised online sessions hosted on Zoom and located in places of worship. Leon said it was good to see the engagement, passion and drive from the communities, but this was coupled with a lack of trust of NHS services. The session organisers said that no question raised by participants would be considered to be 'out of bounds'. Getting into community spaces was very important to Solent and they were able, through the sessions, to help people understand the reasons for taking the COVID-19 vaccination. As a wonderful outcome from the engagement activity, Solent have recruited volunteers from the communities they met with.

Ouestions:

RJ - stated he was wary of such work as the same things had been raised in the past, things put in place and still not seeing a change.

Leon - acknowledged this and is wary of the same issues, but there are a number of things in place which he will be happy to share with RJ. One example given was that Solent has met with 'Chat over Chai', a women's led group to inform attendees and increase their knowledge about diabetes

AMc - stated, from a PCC 'public health' stand point she hoped things would improve.

MA - research tells us that compassionate and holistic approaches to inequalities have been researched but then forgotten about, but the disproportionate impact of COVID on minority ethnic communities has heightened this. MA asked if we can 'keep the learning going'.

SA - Agree with Mary and that change is very slow. It is going to be a difficult winter with the added pressure of COVID for the health services and social care on top of the usual winter pressures sapping the energy of staff and patients. The work done to improve Diversity and Inclusion mustn't be lost.

Item 6: Operational update on Healthwatch Service

SMc presented her report (link attached), HWP Manager report to Sept Board mtg

items covered:-

Coronavirus pandemic, restricted access to specimen collection tubes, cancellation of GP an dental appointments, oral health needs, long covid, health inequalities, review of GP surgery websites, HIOW Integrated Care System, Health and Social Care White Paper (pdf link in report), Health and Disability Green Paper (pdf link in report), HIOW public engagement plans, Healthwatch England updates, Community Based Services, mental health, learning disabilities (pdf links to Learning Disability Partnership board activities in report), carers, breast screening, CQC updates, secondary care service, PHUT activities, Solent NHS Trust activities and Portsmouth City Council activities.

Item 7: Advisory Board member updates

Graham Keeping informed colleagues that he is now part of a Healthwatch England "Board member action learning sets". This opportunity was offered to all HWP Advisory Board members by the HWP Chairperson. As part of the Healthwatch England three-year equality, diversity, and inclusion (EDI) strategy, HWE offered a number of board members the opportunity to participate in action learning sets. This was open to all local Healthwatch board members, these aim to support peers to share and explore strategic and operational challenges in implementing and developing equality, diversity, and inclusion approaches in their organisations.

The board action learning sets will provide participants with dedicated, regular space for thinking, connecting and problem solving to help them address challenges and maximise how the local Healthwatch board approaches and develops its strategic thinking and planning on EDI, and how the HWP Advisory Board can most effectively support and direct operational EDI delivery.

What is involved?

Each set brings together a group of up to seven board members from different Healthwatch organisations with an action learning facilitator. The group then "contract" to meet (digitally) for a three-hour session, six times over a six-month period. Set members are expected to attend all six sessions.

An action learning set follows a facilitated structure with one member of the set presenting a real EDI challenge for their board/organisation, for example - how to diversify your board to better reflect the communities your Healthwatch serves, how your board can use the Quality Framework to support EDI progress, how your board can embed EDI at strategic level to support the sustainability of your Healthwatch. Through listening, sharing, and the asking of open questions by other set members, the process will support participants to reflect and develop new solutions or ways forward.

No other HWP Advisory Board member updates were received.

Item 8: Any Other Business

No items for Any Other Business had been received by the HWP Chairperson. None were raised at the meeting.

Item 9: Questions from the Public

No questions had been received by the HWP Chairperson in advance of the meeting. As questions had been raised throughout the meeting by attendees there were no further questions anyone wished to raise.

Item 10: Close of Board Meeting

HWP Chairperson Roger Batterbury thanked everyone for their attendance, especially the guest speakers, audience members, the HWP Advisory Board and volunteers.

Roger noted that the Solent NHS Trust have their AGM on 30th September at 1pm, Southern Health Foundation NHS Trust have their AGM on 30th September at 6pm and Portsmouth Hospitals University NHS Trust have their AGM on Tuesday 5th October at 6pm, all details on their respective websites and all meetings are virtual.

He stressed the usefulness of Healthwatch Portsmouth's website for health & social care information and urged all to visit our social media platforms HWP is on Facebook, Twitter and Instagram Next meeting of Healthwatch Portsmouth Advisory Board in public: 8th December 2021 3pm - 5pm

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