

## **Healthwatch Portsmouth Advisory Board Meeting 16<sup>th</sup> March 2023**

### **Attended:**

**Healthwatch Portsmouth Advisory Board:** Roger Batterbury Chairperson (RB), Anthony Knight, Vice Chairperson (AK), Jennie Brent (JB), Graham Keeping (GH), Ram Jassi (RJ), Salma Ahmed (SA), Mary Amos (MA).

**Healthwatch Portsmouth:** Siobhain McCurrach (SM), Marianna Gardener (MG)

**Portsmouth City Council:** Amanda McKenzie (AMcK)

**Apologies from:** Chris Noble, Peter Izard, Isobel Ryder

### **Item 1: Welcome, Introduction to the Advisory Board, Declarations of Interest**

Roger Batterbury, Chairperson of Healthwatch Portsmouth welcomed everyone to the meeting. Roger informed attendees that this was a hybrid or blended meeting (face-to-face and virtually using Teams) and that it was being recorded to help keep a record of the meeting to help with the minutes & for Advisory Board members who couldn't attend today. Roger explained that guests and external attendees can only view recordings if it has been explicitly shared with them.

Healthwatch 10 Year anniversary :

Roger explained that, 10 years ago there was an advert in the local newspaper asking people to apply to become a Healthwatch Portsmouth Board Member, so the initial Board was an appointed Board. Roger explained that he applied, was chosen and has been a Board member since 2013. We have had recent applications to join the Advisory Board at Healthwatch Portsmouth and are following our agreed process. We hope to make an announcement at the next Board meeting.

Roger gave wishes of a happy tenth birthday to Healthwatch Portsmouth and mentioned the names of some of the board members from early days with their positions held, stating this topic would resume later.

Roger explained that, as we were holding this Healthwatch Portsmouth Advisory Board Meeting in public, as Chairperson he would allow questions from anyone attending as we go through the meeting, giving preference to the HWP Advisory Board members as a matter of process.

Roger asked the HWP Advisory Board members attending to introduce themselves,

- Anthony Knight – our Vice Chairperson
- Jennie Brent
- Graham Keeping
- Ram Jassi - online

- Salma Ahmed - online
- Mary Amos – online
- Mark Cubbon - online

Roger noted that apologies had been received from: Chris Noble, Peter Izard, Isobel Ryder.

Roger introduced Siobhain McCurrach, the Healthwatch Portsmouth Manager and Marianna Gardener, the HWP Senior Engagement Officer.

RB asked for any 'Declarations of interest' from HWP Advisory Board members present. None stated.

## **Item 2: Minutes of HWP Advisory Board meeting 05.12 .22**

### Matters arising:

SM had chased South Central Ambulance Service for meeting notes. They have not been received.

In the managers' report regarding 'targeted lung health checks' , that Salma had asked a question about 'whether passive smokers could also be included in the scans. Siobhain asked the question and details are in this Advisory Board meeting's Manager's report.

RB asked for draft minutes to be approved. Approval was given by GH, JB.

Salma asked about GP practice warning letters from the last meeting, seeking clarity if letters were sent to multiple patients or to one patient repeatedly as it was not clear from statistics. SM further questioned two surgeries; Trafalgar and Portsdown group where there had been a substantial increase in warning letters. SM read out the response from Portsdown group- which confirmed that they had an increase of letters issued due to abuse experienced by staff from patients. Trafalgar reported they no longer held the information since 2020 regarding the previous period and have adopted a zero-tolerance policy but anecdotally felt that abuse had increased over the years.

Michael Bunton, whose initial question to the HWP Advisory Board had prompted the decision by the HWP Advisory Board to make a Freedom of Information request to that from his research over the last 18 months of research he had found that each patient considered to have caused abuse would receive a warning letter once, rather than the numbers reflecting a small number of repeat offenders receiving multiple warning letters. Only in special circumstances would there be a second letter sent, but only after a meeting had taken place with the patient concerned.

## **Item 3: Address by Mark Cubbon, (MC) Chief Delivery Officer, NHS England**

We asked Mark if he would give his view on how the new Integrated Care Systems (ICS) are developing. Mark Cubbon said it's been 9 months since the systems were put on a statutory footing. He explained the difference between an:

- Integrated Care System.
- Integrated Care Board.
- Integrated Care Partnership.

Discussed the principles of the ICS as follows:

- Transparency about what ICS do.
- What ICS priorities are.
- Engaging with communities to deliver better outcomes.
- Patient voices being at the centre.
- Accessible and understandable by the public.

For every integrated care system to respond to.

MC gave examples of co-producing new services, looking at problems of access with some services and what ICS can do to improve this, a reduction in health inequalities and looking at equitable access, such as via Citizen panels and patient and public reference groups with carers, patients, or other members of the community were being trialed.

Hampshire Isle of Wight ICS is working with Portsmouth Hospitals University Trust, looking at how to get representation within the partnership, on the System Quality Group, Quality and Insight Group, and Complaints and Patient Experience Group.

Example 1: (Surrey Heartlands) Developed an online citizenship panel with a demographically representative Board, looking at how accessible digital services are. Also looking at how mental health services are better accessed and cardiovascular services (preventative measures).

Example 2: (Wigan) Developed a social contract by setting up a community investment fund with volunteers, giving council officers the freedom to work with the community.

Example 3: (Morecambe) Embracing the public health agenda widely, thinking about public health professionals, volunteers and how to get specialist knowledge onto related projects. Developing mental health cafes, peer support for individual patients and members of the community, loneliness in elderly people and child poverty.

RB thanked Mark and asked how the examples are being shared across the ICS. MC explained answered how they have formal networks, and he meets with the Chief Executives of the ICS to talk about key things happening. He stated there are also Clinical Networks and NHS will continue with these networks to continue to encourage good practice.

SA asked , if on a national level, the Integrated Care Systems and Integrated Care Boards are addressing the issue of women's health inequalities, specifically menopause? MC stated he can't do justice to the subject but can say that work is ongoing and a strategy is emerging from Government that is expected to address the issues described. He suggested asking Healthwatch at Portsmouth and Hampshire as it will be part of their strategic projects.

RJ asked what the underpinning governance is in bringing the various stakeholders together and what good practice exists.? MC clarified the partnership doesn't take away the role that Health and Wellbeing Boards have. The Integrated Care Strategy should set out collectively how all partners will deliver outcomes. A member of the Hampshire and Isle of Wight (HIOW) ICB stated that engagement groups are set up throughout Hampshire and Isle of Wight to find out what issues affect each area. This is how engagement leads to the sharing of information through engagement networks to find out what works well. RJ followed up by asking how they communicate what they're doing in a meaningful way. He would look for that in a strategy. MC stated they want to make sure the strategy is understandable and delivered. The HIOW ICB member emphasized the point of accessibility for everyone to be able to read the strategy.

RB said Healthwatch does the same with 'You said, we did' which enables HWP to show our impact.

Amanda Mckenzie (AMcK) introduced herself and specified work around accessibility is great and that more information on the Morecambe example would be good. AMcK ask Mark Cubbon if he was seeing tensions across the country in other ICS and how are they getting on with such? MC clarified he would get that information across to her. MC said there should be an emphasis on Health and Wellbeing Boards at 'Place level' (the local authority area) and making sure that representatives of Place feel included in the ICS.

RB stated remaining questions would be gathered for Mark to respond to later.

Michael Bunton asked if the two Portsmouth GP Practices with disproportionately high numbers of warning letters issued to patients should be a matter of local interest to Integrated Care Systems? AK asked if it's possible for NHS secondments to be offered to HWP to support us gather the patient's voice?

No more questions in the room.

#### **Item 4: Advisory Board member updates**

MA: No meetings attended yet for medical school for Portsmouth.

RB: Since the last HWP Board meeting these are the meetings he has represented HWP at:

- Portsmouth and SE Hants Local Delivery System Quality Committee
- HIOW ICS Quality Insight and Improvement Group
- Primary Care Operational Group for Portsmouth
- Digital inclusion meetings for the Integrated Care System
- University of Portsmouth (UoP) Service User and Carer Group
- Signed up for University of Portsmouth (UoP) nursing student interviews. Done a few already although they are now coming to an end.
- Agreed to do sessions drawing on my experience as a patient for University of Portsmouth (UoP) Operating department practice team
- Portsmouth Hospitals University Trust Mental Health Board (PHUT MHB)

- Portsmouth Safeguarding Adults Board Engagement Sub Group
- Health and Wellbeing Board
- ICB Portsmouth Board
- Combatting Drugs Partnership meetings
- Regular meetings with Siobhain and team
- Penny Maudent MP about closure of North Harbour GP surgery
- Project Fusion meetings with NHS Solent and Southern Health Foundation Trust
- his GP Surgery Partnership Patient Participation Group (as Vice Chair )
- St Mary's Urgent Treatment Centre PPG ( as Chair)
- RB said he was also speaking at a Radiology study day conference

Healthwatch Portsmouth is tirelessly speaking up on the NHS dentistry needs of the people.

AK had represented HWP at three separate strategic level meetings:

- 1) Public Interest engagement with the University of Portsmouth (UoP),
- 2) Portsmouth Mental Health Alliance and
- 3) Hampshire and Isle of Wight Military Mental Health Alliance (HIOW MMHA)

Regarding 1) This looks at feeding back information academically to be incorporated into their courses. Early stages, run by Sue Knight and will see how that continues to develop.

Regarding 2) Presentation on the new hub facility which is being stood up. Monday to Friday daytime service, a non-clinical, non-crisis, advice-type hub for people to access virtually by telephone or video. Hoping if face-to-face support is needed, this will come through Positive Minds. Yet to see operating procedures. Healthwatch provided an information stall at the meeting to hear about the new mental health hub. HWP information stall was popular and it allowed us to get information about what we do out to community organisations.

Regarding 3) No meetings due to contract changes. NHS Berkshire is to take over HIOW MMHA from 1<sup>st</sup> April, with the service to be called 'Op Courage'. This meant a suspension of what had been happening with the Alliance, to be re-launched in the summer once the handover is complete. AK has asked for a "lesson learnt" process to be provided by NHS Solent but no details have been provided yet about how, when, or where. AK made it known we would like to co-author the report if funding can be found. AK has been invited to the next Op Courage meeting.

### **Item 5: Operational update on Healthwatch Service**

Healthwatch Portsmouth Manager provided the report on HWP activities (Jan-March) including links to all documents mentioned. The report was published after the meeting.

[Report from Healthwatch Portsmouth Manager](#)

## Topics

- New website "same address, different look" but we are no longer funded to provide the HWP Service Directory. There is instead a link provided on our website (in the 'Advice and information' tab) to HIVE Portsmouth's directory. All the listings which were on our Service Directory have been put onto HIVE.
- CQC is changing what they are doing from 1<sup>st</sup> April and how they are assessing local authorities under The Care Act 2014.
- From April, there will be an additional 100,000 units of dental activity starting to be provided across Portsmouth.
- HWP spoke with dental commissioners at a HW England hosted looking at the new contract, looking at four key areas for improvement. 1) Urgent dental care, 2) urgent care needs, 3) pressure on the workforce and 4) Issue of prevention. Healthwatch Portsmouth applied to be a Patient Public Voice Partner on the temporary working group to update the NHS Dental Contract. SM has just heard she is going to be interviewed for the role with NHS England.
- HWP's evidence submitted to the Parliamentary Select Committee was published and therefore included in the Government's assessment of what needs to change.
- A University of Portsmouth researcher will be conducting surveys in Portsmouth for the HWP Health Inequalities project from March to December. The questions asked: do they think they've got unmet needs and what do they think would be the solutions. Recommendations for improvement to be made will be based on residents' feedback.
- A reference to the Accessible Information Standard was missed out from the latest NHS England (NHSE) template for providing information. HWP have been told that this was an omission by NHSE and will be added,
- A new Engagement Officer will be starting with HWP next month.
- Since the beginning of the year HWP's volunteers have spoken to over 147 local people about their experience of health and social care at HWP info stalls. HWP Vols were invited to join the Lord and Lady Mayoress outside Portsmouth Guildhall on Saturday 18<sup>th</sup> March at a volunteer thank you event.
- HIVE co-working space available for public to look around.
- Action Hampshire asked for a state of voluntary sector survey to be completed by local Healthwatch's. This has been done through HIVE.
- Healthwatch are promoting awareness of what the Integrated Care System is doing. SM has asked the providers of care to demonstrate learning and how they will improve services.
- Encouraging NHS trusts involved with Project Fusion to display best practice with their engagement with the community around mental health services change and wider voices. Pressing the Solent and Southern Health trusts particularly to tell us how they are going to be asking for people's feedback on two elements of the recommendation. Specifically, how they will gather feedback, on the clinical strategy and the in-bed patient facilities that are being reviewed.
- HWP has pushed for improved access by phone and eConsult to primary care in line with key changes in the GP contracts.



- HWP has asked for additional support for access to those GP surgeries taking on patients transferred from the closing North Harbour Medical Group surgery.
- Proposal for new GP surgery in Bransbury Park
- Public health working with Primary Care Networks, social prescribers and the health and wellbeing service.
- Regarding Salma's previous question about menopausal issues SM reported there's a meeting 20<sup>th</sup> March to discuss a hormone health hub in Portsmouth.
- A Pharmaceutical Needs Assessment has been triggered 1 year early in Portsmouth due to 2 closures of community pharmacies during the winter.
- SM followed up on SA question in the previous Advisory Board meeting about Targeted Lung Health Checks and was told by ICB Portsmouth team there's a national criteria set for practices to contact smokers aged 55-74 or people who have ever smoked. There will be a set of questions, including whether people have been exposed to smoking.
- Digital exclusion is an issue that HWP keep highlighting.
- HWP is receiving feedback from relatives of residents in care and nursing homes as part of a feedback gathering initiative co-produced with PCC.

SA asked in ref to the Health Inequality research questions to be asked of Portsmouth residents - too broad? If residents identify unmet needs, how will that be fed through to the relevant agencies? How will it get to the wider organisations, for example, education through to primary and secondary schools? How will concerns be signposted to relevant agencies? SM said HWP will take these issues forward from the research project.

A member of the public asked if the Disability Advisory Group had been set up and how to join the group. SM clarified this was in process and will send the details.

#### **Item 6: Any Other Business (AOB)**

A member of the public stated 1) I haven't seen any evidence of what the covenant means to veterans. 2) What is people's experience of using the NHS app?

RB said we will take these questions away. AK said in response to Stan that under the Armed Forces covenant, there are a couple of initiatives, those hospitals which sign up to become known as Veteran Aware and they have a little tick on their logo. If you are an in-patient at QA, which is a University Hospital Trust, there are two people employed there under the Armed Forces covenant. Your GP service should also be known as "Veteran Friendly".

#### **Item 7: Questions from the public**

No additional questions were raised.

#### **Item 8: Close of HWP Advisory Board Meeting**

Roger gave a big thank you to the Omega Centre for hosting us today. Roger thanked Graham for booking the venue, thanked everyone who attended, the HWP Advisory Board and our volunteers; "where would we be without our HWP volunteers? And please remember our HWP Advisory Board members are volunteers too".

Roger reminded everyone to please use our new HWP website for up-to-date health & social care information and join our social media platforms on Facebook, Twitter and Instagram.

Email: [info@healthwatchportsmouth.co.uk](mailto:info@healthwatchportsmouth.co.uk)

Facebook: [facebook.com/HealthwatchPortsmouth](https://facebook.com/HealthwatchPortsmouth)

Web: [www.healthwatchportsmouth.co.uk](http://www.healthwatchportsmouth.co.uk)

Twitter: [@HealthwatchPO](https://twitter.com/HealthwatchPO)

Instagram: [HealthwatchPo](https://www.instagram.com/HealthwatchPo)

Ends.