

Project Management Board Meeting

11th February 2014, 2.30pm

Held at The Space, Market Street

Attended by;

Mary Durman (MD) - Wokingham and Bracknell District Mencap

Sally Grant (SG) - SEAP

Chris Taylor (CT) - HWBF Coordinator

Mark Sanders (MS) - The Ark Trust

Andrea McCombie-Parker (AMcP) - The Ark Trust

Madeline Diver (MSD) - Co-opted Representative for Urgent Care

Karen Maskell (KM) - Bracknell and Ascot Clinical Commissioning Group

Jeremy Harding (JH) - Triple A

Mark Hooper (MH) - Deaf Positives

Emma Taylor (ET) - Deaf Positives (digitally)

Mary Oorloff (MO) - Rethink Mental Illness

Alison Summersbey (AS) - Rethink Mental Illness

Alison Dowd (AD) - Just Advocacy

Clare Turner (CTu) - Kids

Rosie Franklin (RF) - Berkshire Autistic Society

		Action
1.	<p>Apologies</p> <p>Apologies received from; Alex Pierce (AP) - EbE²</p>	-
2.	<p>Previous Minutes</p> <p>The previous minutes were not available at the time of the meeting due to CT's holiday. These will be provided asap via email for members review and acceptance.</p>	CT



3.	<p>Introductions</p> <p>Rethink were welcomed to the Healthwatch Project Management Board, the group introduced themselves and the organisations they represented.</p>	
4.	<p>Presentation</p> <p>CT advised he had continued to work on the presentation and that it would be shared with the group for final comment along with these minutes.</p>	CT
5.	<p>Moving forward</p> <p>MS gave the group an overview of a number of actions that had been carried since January’s meeting to assist the development of Healthwatch Bracknell Forest following an internal and external review by Bracknell Forest Council.</p> <p>Specifically, all meetings were being looked at as to who the relevant person to attend would be. The strategic meetings will be covered by MS or AMcP, with Chris attending networking and local meetings.</p> <p>All board members are expected to declare Healthwatch as an organisation they represent at meetings they attend and present the presentation etc.</p> <p>Meeting are being held with the CCG to discuss what Healthwatch can and cannot do.</p> <p>A service standard has been introduced to answer telephone and email enquiries. This is published on the website to avoid doubt by elected members, public etc.</p> <p>Work being done with SCAS to look at complaints in Bracknell and why there is a marked difference between upheld complaints in Bracknell and other areas.</p> <p>CT suggested that in the future a report be produced for the Project Management Board ahead of the meeting, allowing the time allocated to the Project Management meeting to be utilised more efficiently. These reports could also form a basis and provide evidence for council monitoring as well as public newsletters. All members agreed and this is to begin for the March meeting. MSD asked if this will include what had been told to Healthwatch during the month. It was agreed that it would.</p>	



<p>7.</p>	<p>Meeting - Project Work</p> <p>A meeting with One Medicare is being arranged to discuss the new Urgent Primary Care Centre at Brants Bridge.</p> <p>The Board was asked to work on some questions that we might ask;</p> <ul style="list-style-type: none"> • Opening Date - Reasons for delay if any • Planned opening times • One Medicare’s company status, are they a Commercial Company?, do they re-invest their profits? • When does Minor Injuries at Heatherwood close? • Services that will be available? • Information on the Patient Education Centre - what will be included? How do local health organisations get there information included? • Urgent Care - could sound like crisis for people with Mental Health issues - Has this been considered, how will it be clear what services are available. • Informing community groups - how do they contact you? • Access to the available services, what is the process? • Jobs - where do people go to see any available jobs you might have? <p>Urgent Primary Care</p> <p>MSD report attached. MSD advised that she attended monthly meetings and that there was lots of information to read and digest. This information was requested to keep HW in the loop. MSD advised that the current focus was on Wexham Park and entry into A&E. It was acknowledged that the Trust had progressed work in this area. MSD advised that she had visited the One Medicare centre in Sheffield and that the Patient Information Centre there was in need of improvement. CT advised that MSD should contact MS in the first instance regarding the HWBF EOL Care contact. MS to review HWBF participation in the HW WAM 111 survey.</p> <p>NHS England</p> <p>Information standard for accessible information. All members were asked to follow the link and complete as attached.</p>	<p>ALL</p>
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<p>8.</p>	<p>Any other business</p> <p>KM/MSD advised the group of an accessibility test walk around being carried out by One Medicare at Brants Bridge. Ctu volunteered her services, others to advise of anyone they know of that would be suitable to assist. The walk around is on Tuesday 25 Feb 2014.</p> <p>KM discussed a possible proposal regarding a CCG readers group. The intention would be to start all information in an easy read format and then work it up from there if necessary to make accessibility of documentation easier for all.</p> <p>KM advised that Relay for Life held at Ascot Race course during July 2014 would make an ideal venue for health partners to promote health care as they already had a 'health tent'. To be investigated further by HWBF.</p> <p>KM requested that HWBF raise awareness of the CCG and PPI groups when out and about promoting HW. CT advised that he did raise awareness of the CCG and hand out there documentation and PPI groups did get a mention, but acknowledged that more could be done. As PPI groups are setup by the individual surgeries CT would have to investigate how this could be done efficiently and effectively as they all have their individual differences.</p> <p>RF advised that she had been promoting HWBF at an event called 'Ageing with Autism' RF to send a summary of the event.</p> <p>KM suggested that a BASE (NHS) event related to Healthwatch might be beneficial to raise awareness.</p> <p>SG requested more HWBF leaflets as they were running low.</p> <p>A number of the Board Members had responded to AMcP invite to attend Healthwatch England's committee meeting in Reading, AMcP advised places were still available. Members to confirm their attendance or decline asap.</p> <p>Future Meetings are every second Tuesday of each month, 2.30pm to 4.30pm at The Space, Market Street. 11 March 2014 08 April 2014 13 May 2014 10 June 2014 08 July 2014 12 August 2014</p>	<p>ALL</p>
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NHS: Berkshire East Clinical Commissioning Groups Bracknell and Ascot Clinical Commissioning Group

Meetings attended: 1. EBerks Health and Social Care Urgent Care Programme Group;
2. Royal Berkshire HealthSpace UCC Project Board

Name of representative: Madeline Diver

Date: 1. 10 Jan 2014; 2. 4 Feb 2014

Significant points for Healthwatch BF:

1. Urgent Care Programme Group considered programme updates:

- a/ urgent care access issues helped by the winter pressures measures when staff were available. This included increased reablement and more home visiting capacity. 111 service was receiving 3 to 4 times the expected volume of calls. HWatch WAM survey had been launched on 5 Jan and would be passed to BF for alteration of Post Codes for use (meeting next week) here.
- b/ Flow through Wexham Park hospital was improving, supported by the current initiatives and despite an increase in the ambulance arrivals numbers.
- c/ Discharge Processes were still causing concern (eg medication) In some areas the discharge plan was not effective (not so in BF)
- d/ The urgent care dashboard demonstrated the need for the Education Reference Group to act in support.

2. UCC Project Group met with One Medicare to review actions towards anticipated opening in April if all the necessary papers were signed by 7 Feb.

- a/ A small group, including the patient representatives visited their centre in Sheffield. Suggestions for access, the patient education centre and communications were discussed.
- b/ Lay Member was working on communication and engagement strategy.
- c/ Lay Member would arrange a walk round of a demographic cross section of local residents

3. Other Meetings. 1st As the only member of the HW Board at the CCG Board Meeting in public (Dec 11th 2013), I reported that afternoon to the Board that One Medicare had been appointed to run the UCC.

2nd I have been asked by the patient representative from WAM who the EOL Care contact in HW BF was to be. Who, please?

Madeline Diver for meeting on 11 Feb 2014.





As you may be aware, NHS England has commenced a programme of work to develop and implement an Information Standard for accessible information.

We are committed to undertaking effective engagement at this early stage, to ensure that our work is shaped by patients, carers, service users, clinicians and other health and care professionals, commissioners and providers of health and social care, and others with an interest in accessible information.

We are particularly keen to understand the views of people from the communities who are likely to be most affected by this project. That is people who are d/Deaf or have some hearing loss, blind or have some visual loss, people who are deafblind, and / or people with a learning disability, as well as from carers.

We have developed three online surveys aimed at seeking views from health and social care professionals and organisations, service users, and from patient groups including local healthwatch organisations. Further details, and links to the surveys, are available from the dedicated webpage on the NHS England website www.england.nhs.uk/accessibleinfo The service user survey is also available from this site in a range of different formats. Please take the time to complete the survey which is most relevant to you or your organisation.

The deadline for responses is 21 February 2014.

For specific queries in the first instance, including requests for information in alternative formats, please contact england.nhs.participation@nhs.net

