**Meeting of Healthwatch City of London Board Meeting in Public**

**Date and Time:** Friday 11th December 2020, 4:00pm – 6:30pm

**Venue:** Zoom

**Chair:** Gail Beer

**Present:** Trustees: Chair: Gail Beer (GB), Lynn Strother (LS), Malcolm Waters (MW), Board Associates: Stuart McKenzie (SM), Janet Porter (JP), Dr Cynthia White (CW). Staff In attendance: Teri Anderson (TA), Paul Coles (PC), Rachel Cleave (RC). Guest Speakers: Dean Henderson Borough Director City and Hackney ELFT (DH) David Maher Managing Director, City & Hackney CCG (DM), Jordann Birch Public Health City of London (JB). Members of the public: Maureen Child (MC), James Torr (JT), Jakki Mellor-Ellis (JM), Patricia O’Connor (PO), Sean Lee (SL).

**Apologies:** Steve Stevenson, Sarah Greenwood

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| **Item** | **Issue** | **Action** | **Owner** | **Date for Resolution** |
| 1 | **Welcome, introductions and apologies. Declaration of conflicts of interest.**  Gail Beer | Welcome by Chair  Apologies were received from Steve Stevenson  The Board introduced themselves.  There were no other new declarations of conflicts of interest. |  |  |
| 2 | **Minutes of the Annual General Meeting, to note.**  Gail Beer | Minutes from the AGM were presented.  The Minutes will be posted on HWCoL’s website for comment prior to the AGM in 2021  Point of Information: the AGM Minutes are to be accepted as a true record of the meeting at the next AGM. |  |  |
| 3 | **Minutes of previous meeting.**  Gail Beer | The Minutes were checked for accuracy  A few grammatical errors were noted.  Item 5 St Leonards Hospital should read that it is not fit for purpose.  Item 6 should read “digitised” not “digitalised”. | PC | Dec2020 |
| 4 | **Matters arising from Attachment B**  Gail Beer | Item 6 -PC followed up on the text service provided the Neaman Practice. No response had been received to a request that the Neaman Practice send text messages on HWCoL’s behalf.  Item 6 -PC Digital by Design not default is part of HWCoL’s ongoing work to ensure that patients are always offered non digital appointments. GB asked PC to prepare a follow-up plan.  Item 13 -Physiotherapy services direct appointments. PC is waiting for confirmation of a contact number for publication. PC to follow up next week. | PC | Dec 2020 |
| 5 | **Chair Update – Verbal Update**  Gail Beer | HWCoL has been awarded grant funding for work on three projects. These are:   * North East London (NEL) Covid Community Insights Project, a joint project with the other Healthwatch in NEL * Shoreditch Park and City Patient Engagement project in partnership with (i) the Primary Care Network (PCN) for Shoreditch Park and City; and (ii) Healthwatch Hackney * COVID-19 Information Grant   HWCol’s Business Plan consultation has closed  PC The Shoreditch Park and City Engagement work will cover the services that the residents require for their health needs. The survey will be launched in January. HWCoL is producing a flyer for Shoreditch Park and City residents to inform them of the survey. Focus groups will be held in February and March for further insight from the survey results. A final report will be produced with a summary report in the form of flyer. The findings will go to the PCN Board in April 2021.  SM asked what would be a reasonable minimum number of respondents to the survey?  PC replied that a reasonable minimum would be 100 with a balance of Shoreditch residents and City residents.  GB would like to see how this is determined. She also asked how PC will get the flyers out.  PC The City of London have confirmed they can deliver it to the residents, and it will be available online as well. |  |  |
| 6 | **HWCoL Business Plan**  Paul Coles | PC The business plan was shared with key stakeholders including the City of London (CoL) Health and Well-being Board, the Col Common Councilmen, the CoL Commissioning Team, City and Hackney Clinical Commissioning Group and Healthwatch England for comment. The draft plan was presented at HWCoL’s annual general meeting. To gather City residents’ feedback, a short survey on the plan was made available via HWCoL’s website. The plan was shared with City and Hackney CCG **Public and Patient Involvement (PPI) Committee on the 12th November 2020 for comment.**  **The survey was completed by two residents and feedback was received from Sarah Greenwood, Healthwatch England and the PPI Committee.** The residents commented on the SWOT analysis. Sarah Greenwood commented that the Business Plan is health focussed and needs to include more about the delivery of Social Care and the role of HWCoL as a critical friend to the CoL  The PPI committee and members were pleased with the content of the plan but emphasised the importance of evaluating HWCoL’s work. They congratulated the team on the diversity and recruitment plan for the board.  In future, HWCoL will consider the option of allowing feedback by telephone or returning a card. Focus groups may also be used. |  |  |
| 7 | **City and Hackney CCG update**  David Maher | DM gave an update on the progress on the development of an Integrated Care Partnership for City and Hackney. Approval has been given to the merger of the seven CCG’s in North East London (NEL), these being: City and Hackney, Newham, Tower Hamlets, Waltham Forest, Barking and Dagenham, Havering, and Redbridge. This paves the way for the new Integrated Care System (ICS) for NEL to be established. NHS England intends to put ICS’s on a statutory basis, removing them from competition scrutiny.  Top priorities for the new ICS are a better start in life, living well, a good end to life, better mental health, reducing inequalities. Becoming an ICS is about learning to work in new ways. The focus of attention will be on delivering service improvements and improving health and wellbeing.  The merger will result in a rethink of our communication and engagement with residents in NEL. Resources will continue to be delivered locally through the Integrated Care Partnership Board (ICPB) for City and Hackney. The integration plan is in line with the national NHS long-term plan. The intent is to reduce inequalities associated with the indirect impact of the pandemic response.  Development of the ICPB for City and Hackney is ongoing. The ICPB would be a version of the current CCG governing body. City and Hackney would continue to deliver 98% of services locally.  As regards inequalities, new long COVID clinics were being set up and the indirect response to COVID was being looked at. There would be engagement on other priorities in the coming weeks.  Forthcoming legislation may lessen the power of veto which Foundation Trusts currently enjoy by virtue of their sovereign authority under statute.  MW asked what effect the organisational changes would have on plans for the redevelopment of the St Leonard’s Hospital site. DM said that the changes would be helpful as giving greater firepower at the NEL level.  CW said that the inequalities focus is very wide ranging but the Covid experience is not the only one to flag up inequalities. What about people who live on their own whatever their age, as living alone was itself an indicator of inequalities? CW also noted that Education is missing which is closely aligned with health.  DM replied that the establishment of the ICS was an opportunity to have a wider influence in education. Mental health services are available in schools but there is more work we can do by talking to children about poor lifestyles and health. DM has no evidence of people who live alone and are struggling. He cited East Hackney as a very deprived area in which social capital was lighter than in more affluent areas but said that communities in deprived area have the power within them to come together to support each other.  SM said that communication by frontline staff such as receptionists needed greater emphasis. For example, call-handlers should be briefed to give accurate information about services.  DM replied HWCoL has done good work highlighting customer service in General Practice and that further work on this was needed within hospitals.  PO supported the need for accurate information from frontline staff. She also asked if there will be an independent unbiased overall supervisor who will be monitoring the groups when they merge.  DM replied that the ICS would have an independent Chair providing oversight. There would also be an opportunity for challenge from independent partners.  GB wanted to know how the vaccinations will be rolled out in North East London.  DM answered that three hub sites would open up in primary care, with the Lawson practice having responsibility for the City. Queen’s Hospital in Havering would also have some stocks. City and Hackney will have its first delivery next Wednesday, 16/12/20. Practices will have only 120 hours in which to work through delivers of the Pfizer BioNTech vaccine. It is a fast-moving and complicated picture. The Oxford AstraZeneca vaccine will be easier to deal with. |  |  |
| 8 | **Mental health service provision during and post Covid-19**  Dean Henderson | DH introduced himself and discussed how East London Foundation Trust (ELFT), which manages adult mental healthcare for City and Hackney, is coping with the pandemic. Their most significant challenge was that 120 staff have had to self-isolate and shield. Service changes had to be made at short notice and decisions had to be made quickly. Wearing PPE became part of daily life which was time-consuming and uncomfortable for staff and created a barrier when people wore masks. The danger of hacking meant that Zoom was not safe for patient interactions, so Microsoft Teams and WebEx were being used for delivery of services.  The number of in-patients testing positive for Covid was low but there was a spike in Crisis line calls (including from new callers) in the early months of the crisis. ELFT works with 3,000 service users and has developed a RAG-rating system to assess their mental health and Covid vulnerability. Staff working from home could contact service users which worked well. A complete in-patient ward had to be closed due to the number of ward team members having to self-isolate, resulting in community teams having to merge at short notice, with some being moved to other locations. Patients with complex needs are being treated in their own homes.  The current situation is that all services are open and routine and urgent referrals are being received. Activity levels are back to where they were before Covid. The key learning point was the importance of face-to-face contact with service users. Face-to-face contact is offered to all new assessments and will always be offered to patients in crisis. New ways of working are here to stay, more appointments will be delivered via digital platforms, but face-to-face contact will remain central for how they work with people.  PC HWCoL carried out a mental health survey and the result showed an increase in numbers having mental health issues but not in those using mental health services. How can we encourage them?  DH replied that ELFT has services to support available through the Crisis Line and they can also access ELFT services through their GP.  CW is supporting an Islington patient with dementia. The patient had a telephone consultation and was discharged by telephone, after which she deteriorated rapidly. It was difficult to get them reconnected. CW would like to know how telephone consultations could ever be used for dementia patients.  DH replied that, while there was a need to avoid unnecessary contact because of the Covid risk, it was still essential to maintain face-to-face contact where it was needed. Carers should be talked to and a face-to-face appointment should have been offered.  LS said when peopled are distressed and are finding it difficult to go to Homerton from the City will there be a hub for people to go to in the CoL as an alternative?  DH replied we don’t have any plans to put a hub in the CoL, but we can see people in their own homes, and we see people in their GP practices now. |  |  |
| 9 | **Receive and note HWCoL contract monitoring report: Quarter 2.**  Paul Coles | This was not discussed. |  |  |
| 10 | **Covid-19 Update**  Paul Coles | HWCoL applied to Hackney Giving under the COVID-19 Information Grant programme to act as a Contact Point. The grant provides funding for 12 months and requires HWCoL to provide information on test and trace as well as ensuring that accurate information on the response to COVID-19 is distributed to the community. Over the next 12 months newsletters and bulletins will be produced weekly. There will be a dedicated section on track and trace on HWCoL’s website. Four Factsheets will be produced, and these will be translated into Bengali, Sylheti, and Somali. HWCoL will run Monthly Carers’ Focus groups and bi-monthly Mental Health Focus groups. Monthly drop-in surgeries will be held. Until there is access to facilities in the City these will be held on-line.  LS said the number of people attending HWCoL’s existing focus groups (on mental health and for Carers) was quite small. She asked if a focus group on COVID for all CoL residents could be organised to get the numbers up.  PC replied that the drop-in surgery would be open to all and raised the possibility of setting up a Carers’ group for younger people. Focus groups were promoted through the Newsletters and Bulletins, which were available to all CoL residents.  GB said HWCoL will have to run some separate bulletins and newsletters, as well as running some separate focus groups and including the east of the CoL through Tower Hamlets. |  |  |
| 11 | **New City of London finding support services**  Jordann Birch | Jordann Birch informed us that during Covid-19 Hackney piloted the new Finding Support Services website, which lists voluntary and community services available to residents. The website is very interactive and consists of maps enabling residents to search for health and care information and services like GPs. The CoL wants to establish a website listing as many voluntary organisations as possible – these can include organisations outside the CoL area.  CW said there is a lot of outdated information online and asked whether the information will be checked.  JB replied everyone who provides information has to keep their information up to date or they will be removed. Training will be provided to enable organisations to be able to carry this out.  CW asked whether there was any incentive or option for someone using the service to be routed back to the CoL if the information was incorrect.  JB replied that the CoL was looking to recruit a data officer to deal with any problems.  LS asked if the website was tested by members of the public.  JB replied that it was tested through community centres in Hackney to check that it worked on all platforms. They received good feedback and the constructive criticism was used to fix any problems.  RC asked when the map was going to be up and running.  JB replied that, subject to clearance from cyber testing, it would probably be up and running in early January.  GB said that RC is to put this up on the website. | RC | Feb 2021 |
| 12 | **Any other business.**  Gail Beer | SM contacted St Leonards about podiatry. SM was informed there were no clinics at the Neaman Practice. SM told them they were wrong, when checked it was confirmed that a clinic was available on Friday 18th December 2020.  GB requested that PC contacts the podiatry service at Homerton regarding this.  PC has emailed St Leonard’s podiatry to explain why people are not turning up at this clinic. | PC | Jan 2021 |
| 13 | **Close**  Gail Beer |  |  |  |