

Staffordshire LINK Co-ordinating Group
Friday 8th April 2011
10.30am – 1.00pm

Attendees:

Paul Carpenter (Chair)
 Dave Bassett
 Lynne Ashburner
 John Davies
 Chris Welch
 Jackie Owen (Interim Director)
 Sue Baknak (Co-ordinator)
 Alex Robinson and Kieran Mullen, Patients Association.
 5 LINK participants.

Apologies:

Shelagh McKiernan
 David Loades
 Will Taylor
 Paul Jay

MINUTES OF MEETING

As the meeting was not quorate at 10.30am (waiting for Dave Bassett's arrival) the presentation by Kieran Mullen, Patients Association was the first item on the Agenda.

Areas of Discussion	Action
<p>3. Presentation by Kieran Mullen, Patients Association.</p> <ul style="list-style-type: none"> • Copies of the presentation were distributed to all present. • KM went through the presentation explaining the background to the project; the project itself and its remit ie. advocacy programme, expert panel review and digital story telling; expert panel reviews to score individual complaints and in the process of recruiting clinicians/lay people to develop the score card and hoping to conduct the first review panel in July; lead advocate with clinical care expertise and access to independent clinical opinion plus lay person advocacy support for getting to appointments/liaison with the Trust; digital story telling used by the Trust in their training and as a training resource to try and improve care – proposing to run 3 workshops with staff involvement encouraged for later workshops which will help complainants translate their complaints into Patient Voice – digital stories. Pilgrim Projects have been commissioned to run the 3 workshops and timescale for workshop 1 is Autumn 2011. Other elements of the project include asking every complainant to complete a survey about the quality of the complaints process and looking for partnership Trusts to also run surveys for anonymised comparison and hoping to influence DH/NHS to use the survey nationally. Challenges – getting buy in from the local community and from staff at the Mid-Staffs Trust as well as developing professional working relationship with the Trust whilst maintaining independence; minimising duplication with similar projects ie. Engaging Communities. Community involvement - seeking members of local community to undertake various roles on the project. 	<p>Presentation uploaded to LINK website.</p>

- Question and Answer session.
 - Q. Does it include training for staff about the complaints process or any plans to do so?
 - A. Not currently but could look at doing workshops. Measuring it and saying if you are doing a good job or not and hoping this will help by holding to account. Campaign called Being Open – no blame culture – process needs to be balanced.
 - Q. How does the project link to PALS at Mid Staffs?
 - A. The Trust’s process will not change but PALS are there to provide help, advice and support. PALS is now patient advice service.
 - Q. What other channels of communication and feedback process are there?
 - A. Meeting today to ascertain how to communicate with the LINK. Regular reporting on the project and expert panel results will be published with the survey results.
 - Q. What qualitative data is there to back up scoring for the survey and panel?
 - A. Breakdown of the areas to try and give a better sense of the scoring.
 - Q. But what does the score mean on the ground eg. a score of 3 equates to – what does a score of 3 look like?

 - Q. What is the relationship with ICAS?
 - A. Discussion with ICAS to explore how to work together eg. the Trust explain the services available to patients ie. ICAS – mental health/learning difficulties expertise and it is up to the patient to make a choice. Patients Association – there is a capacity issue so a large proportion will still go to ICAS. There are different options and the patient chooses what is best for them.
 - Q. There should be simple guidelines for patients together with an explanation.
 - A. Yes definitely.
 - Q. Is there sign-up from other Trusts or just Mid-Staffs to learn from outcomes/proposals of the project?
 - A. Antony Sumara and Julie Hendry are keen to use the feedback from the project but wont know the outcomes until further down the line.
 - Q. What do you want the project to achieve? An improved complaints service and/or building blocks into that process?
 - A. Can’t change how the Trust handles its complaints.
 - Q. Is there any analysis being undertaken for making the process more streamlined ie. when a patient/complainant gets to Patients Association how did they get there – what was their route and based on what information?
 - A. Could include in the survey.
 - Q. It seems a very complex, multi-layered process for making complaints/accessing advocacy services which is neither fair or easy for the patient to have to try and understand and there seems a desperate need for one point of contact for the

<p>complainant.</p> <p>A. Yes agreed and there is a need for a single point of advice.</p> <p>Q. Would that advice be to write to the Chief Executive of the Trust?</p> <p>A. That is Patients Association’s national advice to do just that.</p> <p>Paul Carpenter thanked Kieran and Alex for their presentation.</p> <p>Dave Bassett arrived during the presentation and the meeting proceeded as it was now quorate.</p>	
<p>1. Apologies/Minutes of last meeting</p> <ul style="list-style-type: none"> • Apologies as above. • Minutes of last meeting approved. • Action points/follow-up from Minutes: <ul style="list-style-type: none"> ○ Dignity in Care meeting – pursuing actions. ○ Presentation and report to Social Care OSC was well received. ○ JO to write to all Trusts re: complaints - carried forward. ○ BB produced article for local community papers but waiting for publication dates. ○ Substance mis-use feedback – NSCHC want to pursue the issues raised and have asked LINK to arrange a meeting with the Trust/Group – BB will facilitate this. ○ No feedback from the Group re: year end finance. ○ Governance Framework Review – how do we go out to seek views from the LINK without incurring too much cost. ○ Wellbeing event at Cannock was well attended but no GPs present. 	<p>JO updating at 3 below.</p> <p>JO to write to all Trusts.</p> <p>Group agreed this should go in the Bulletin and on LINK website.</p>
<p>2. Declarations of interest</p> <p>None.</p>	
<p>4. LINK Activity Update – Jackie Owen</p> <ul style="list-style-type: none"> • JO gave an update as follows: <ul style="list-style-type: none"> ○ Enter and view – visit to Burton Hospital carried out. Visit arranged to Ward 10 at Stafford Hospital. ○ Quality Account presentations arranged for Mid Staffs, South Staffs PCT Provider Arm and others in the process of being arranged. Shelagh McKiernan and Brian Kitchen attending the Burton Hospital Quality Account meeting on 10th March. ○ Two joint community engagement events with SCIO to consult on whether adult social care should be integrated into the new community trust. Details will go on the website and in the Bulletin when finalised. ○ JO/BB met with CEO and Project Co-ordinator at Staffordshire Buddies who gave feedback from their service users that the GUM clinic at Stafford Hospital is a poor service compared to other hospitals and are asking the LINK to help raise concerns through enter and view and challenges to commissioners. ○ Carers Association South Staffordshire raised concerns 	

about consultation on direct payments and a letter was sent to Eric Robinson and a reply was received advising that this was being reviewed and would then go out to consultation and be implemented in April 2011. No consultation/not in the public arena and so another letter has been sent asking for information. It is reported that social workers are **not** undertaking assessments as there is nothing to offer (information received from North Staffs Carers). The letter requests figures of assessments taken in the last 2 years.

- Burton Hospital – reconfiguration of Burton Treatment Centre. Service has been provided by a private company for the last 5 years but is not being taken back in house with a handover in July 2011. Services include pain clinics and day surgery cases. Implications for patients eg. waiting times, appointments etc. as there will be a delay for a few weeks while transition takes place eg. equipment out/in. South Staffs PCT are asking the LINK to be involved regarding the commissioning of the service/survey of the service during the transition/handover period.
- The revised LINK website is now up and running and a series of roadshows is being arranged to promote the LINK and website in public places eg. libraries, hospitals and shopping centres. A schedule of the roadshows will be promoted in the LINK Bulletin and on the website.
- LINK office accommodation. Cllr Matthew Ellis' recent meeting with the Engaging Communities Project stakeholders was successful and there is now sign up from stakeholders to progress the project and the recruitment of a Project Manager and Assistant is now going ahead. Both posts will be based with the LINK Support Team and offers the opportunity to influence how the project develops. There is office space available within the Business Village and two larger offices that those currently rented would cost an additional £125 per month which would be recharged to the Engaging Communities Project plus a proportionate charge for consumables/telephone charges etc. Are the Group able to authorised the move?
- PoHwer/ICAS have asked if they could attend the next Co-ordinating Group meeting to talk through proposals for closer working with the LINK particularly around outcomes from complaints.

Enter and View

- LA gave an overview of the recent enter and view visit that she and SM undertook on behalf of the LINK and advised that the final report would be available publicly in due course. LA confirmed that it have been a positive experience with positive findings and recommendations around social interaction/activities would be incorporated in to the report. The visit also tested the LINK enter and view process which worked well on all levels.

Office move and recharge arrangements approved by the Group.

Co-ordinating Group agreed this would be very helpful.

HealthWatch Pathfinder

- A letter inviting local authorities/LINks/Hosts to work in partnership to submit proposals to become a HealthWatch Pathfinder. JO and JTEd met to go through what is required for a pathfinder submission. The work already done by Jessie Cunnett for the Engaging Communities project means the work is already two thirds of the way there. JC is producing a draft to go to the LINK and Joint Commissioners for comment and then to be submitted to DH by 12th May. JTEd advised that the outcome reports following the pathfinders are to be available in February 2012 which means there would be very little time to put a procurement process in place for 1st April 2012 so will have to see what comes out of the pathfinder projects in due course. KM – Patients Association involved with pilots eg. their helpline, national organisation re: info/advice/benchmarking service quality/outcomes. Collaboration with Stoke LINK – JTEd met with Stoke local authority lead but nothing further to report at this stage.
- PC – it is a very joined up thinking approach with the Engaging Communities Project/HealthWatch pathfinder with strong commitment from Cllr. Ellis to work together and if there are any concerns from within the Group these should still be raised as the LINK function will help to scope the way forward.

Overview and Scrutiny

- Report to follow. Report back on winter pressures. Attending public accountability session at Burton Hospital on 27th April.

Redesign of Services – Cannock Event

- JD attended this event on 29th March report to follow. Surprised by attendance of over 200 people but no GPs. Presentation from GP Group and PCT was very good. Several working groups looking at new services and how they will work. Good questions from the audience and able to speak to members of the working groups. Question – is it real engagement or decisions already made and just an exercise. Wait to see what feedback comes out of the event.

Community Engagement Activity – Final Reports

- CW presented 5 final reports from the work carried out since October 2010 and gave an overview of the resources and types of activity undertaken for the projects:
 - 5 staff members as project leads plus other staff
 - Meetings with hundreds of people
 - Lots of engagement methods
 - Relationship building with managers
 - Surveys both electronically and face to face
 - Mystery shopping and enter and view
 - Desk top research
 - Grass roots activity seeking opinions.
- Acute services at Stafford Hospital – 5 areas of significant change achieved.

- Next steps – Co-ordinating Group to decide what recommendations from the reports are to be carried forward. Small group to go through the reports in detail and map/extract the relevant/actionable outcomes to address the issues raised and put together an action plan to make recommendations for service improvements. Publicise what work has been done and what happens next.

Engaging Communities – Paul Carpenter

- Practical sign-up from stakeholders
- Recruitment of Project Manager/Admin
- Community engagement/commissioning will avoid duplication and will know what is being/has been done so a more effective organisation.

5. Finance

- In WT's absence from this meeting, he had provided an update which was read out by JO. Key points:
 - Year end summary position to date from a budget of £300,100 for the year 2010/11 is £274,796 resulting in an underspend of £25,304. With the £30,000 allocated in 2009/10 brought back in to 2010/11 budget the LINK will have an overall spend of £304,796 for the financial year. The underspend will not be carried forward to 2011/12 and thus be retained by Staffordshire County Council. The £25,304 does include the allocation for audit fees, and were advised to allow £5,000 for the cost of the audit, should the charge be less than £5,000 any surplus will not be retained by LINK.
 - Audit process. We have approached 5 local firms with a brief for an audit of LINK activity for 2010/11, a copy of which is attached. One firm having reviewed the brief has declined to put forward a fee proposal, we expect to hear from others by close of business of 8th April 2011. In the event that no bids are received there is an offer from Staffordshire County Council that their internal audit section will audit LINK activity with Price Waterhouse Coopers providing an independent external view. This option will be of no cost to Staffordshire LINK.

6. LINK AGM

- Need to identify a date, time, venue and format of the LINK Annual General Meeting. Group discussion of pros and cons of a central Stafford location. The Group agreed that a Stafford venue with good public transport access and free parking to be secured. Date confirmed as 8th June 2011 from 6.00pm – 8.00pm.

7. AOB

- DB - DES enhanced payments. Money to be reinvested in public participation. BMA guidance – useful for Hester Parsons to have sight of the document.
- CW raised the issue of no lunch being provided at the

Group members interested in being part of the small working group contact JO.

JD to do press releases.

Finalised reports to be published on LINK website with next steps info.

All Group members to read the reports to discuss at next meeting.

Support Team to secure a venue and advance notice of the date to be published in next LINK Bulletin and on the LINK website.

Support Team to forward information to HP.

<p>meetings. Discussion by Group and LINK participants present. Agreement that pastries/fruit in addition to tea, coffee and water to be provided at future meetings.</p>	
<p>8. Any Questions</p> <ul style="list-style-type: none"> • No questions submitted prior to the meeting. • Questions raised at the meeting: <ul style="list-style-type: none"> ○ Francis Biard – the Audit looks better if it is independent but cannot refuse the offer from the Council. ○ Francis Biard – Stafford Hospital discharge lounge is now in its 4th location in 2 years. What can be done about this to ensure it is fit for purpose. ○ PC – West Midlands Regional meetings have now ceased but LINK representatives would like to see them continue. WT is keeping a watching brief on this. 	<p>Enter and view to discharge lounge to be incorporated into schedule of LINK enter and view visits.</p>
<p>Meeting closed.</p>	