

ESSEX AND SOUTHEND LINK: PUBLIC MEETING

Date and time **25th February 2010 12pm – 5pm**

Location **Essex Record Office, Wharf Road, Chelmsford, CM2 6YT**

Minute taker: **Sharon Cohen**

	Topic	Discussion	Action
		<p>Sixty seven participants attended the meeting and signed the attendance sheet.</p> <p>Peter Blackman introduced himself as Chair of the Countywide Coordinating Group and gave health and safety instructions to all present. He commented about the two short films by Amanda Waring and the film produced for NHS East of England shown at the beginning of the day and said that there were lessons to be learnt from them.</p> <p>Peter explained that the business section of the meeting would be dealt with first, which would be followed by the breakout group workshops and then the introduction to commissioning session would take place at 3.30pm.</p> <p>Those present were asked if they had any objections to photographs being taken and published. No one objected. There were subsequent objections by two members. Their photographs will not be used.</p>	
1	To receive the minutes of the last meeting: 2nd December 2009	<p>The notes of the previous meeting held on 2nd December 2009 were agreed for accuracy, proposed and adopted as a true record of the last meeting.</p> <p>There were no matters arising from the minutes.</p>	
2	Introduction to the changes in the Governance of Essex & Southend LINK	<p>Peter Blackman explained that there had been some changes to the Essex and Southend LINK Governance documents to complement the previous ones discussed and agreed in the June 2008, January 2009 and September 2009 meetings. Southend Borough Council, Essex County Council, our Host and the Countywide Coordinating Group (CCG) have been working together to take stock of the LINK further to the guidance from the Department of Health. They have been reflecting and learning from the experience of the LINK so far and feeding this into the work plans and identifying gaps and points that need clarifying. Peter explained that the documents presented to the meeting had been worked on by SBC, ECC, the Host and CCG and that approval or comment on these documents would be sought after the workshops at the end of the session.</p>	

		<p>Peter stated that the workshops were set up to get the thoughts, ideas and feedback so that “we” (the LINK) can work on this over the next few weeks to help and inform us if we need to make any further changes to the plans for the E & S LINK going forward. The documents that were asked to be considered and approved were the;</p> <ul style="list-style-type: none"> • LINK structure diagram • Essex & Southend LINK – General Principles • Essex & Southend LINK’s Role Descriptions • Essex & Southend LINK Terms of Reference for Locality, Theme and Issue Groups. <p>The Basic Operating Principles document, a working document agreed between the local authorities, Host and CCG, was provided for information and background but not for approval. A brief discussion then ensued relating to the time that participants had had to read the papers and that some members had not received the papers to read before the meeting. It was stated that the people invited to the meeting had been alerted that all the documents were on our website and also asked to request hard copies of the documents if required. A couple of participants stated that they had not got copies of the papers upon arrival. The attendance at the meeting was higher than expected and only a certain number of packs were made up. Anyone that had not received the information was asked to make a member of staff aware and they would be sent a full set of papers following the meeting (only 39 people had registered their intention to attend so 50 packs had been prepared in advance). After the workshop sessions the 4 documents listed above were asked to be considered for approval, the documents were proposed and seconded and then a vote was cast the results were;</p> <table style="margin-left: 20px;"> <tr> <td>For</td> <td style="text-align: right;">16</td> </tr> <tr> <td>Against</td> <td style="text-align: right;">2</td> </tr> <tr> <td>Abstentions</td> <td style="text-align: right;">15</td> </tr> </table> <p>Therefore all the documents were adopted and to be added to E&S LINK’s set of Governance & Policy documents.</p>	For	16	Against	2	Abstentions	15	<p>ALL / STAFF</p> <p>NV</p>
For	16								
Against	2								
Abstentions	15								
<p>3</p>	<p>Breakout Groups</p>	<p>Three breakout groups were set up to gain feedback and ideas from the participants. Members were asked to select a group they would like to participate in upon their arrival. The three groups were;</p> <ul style="list-style-type: none"> • Complaints & Disputes/Conflict of Interest • Involving People • Roles & Responsibilities <p>The Complaints & Disputes/Conflict of Interest group was led by Joyce Sweeny and facilitated by Julie Harkus. The group agreed that the Host’s complaints policy should be adapted rather than reinventing the wheel. In relation to conflict of interest the group felt that this should be addressed in all meetings. The main points that arose from the discussions were;</p> <ul style="list-style-type: none"> • It should be initially up to the Chair of a group to deal with conflicts and complaints and then escalate if necessary. • Resolution of conflicts and complaints should be done at the lowest level but there should be a process in place to do this. • It was felt that the process should be included in a policy document rather than in a Governance document. <p>Joyce was asked to feed back any further comments that arose to Julie and for them to work together following the feedback. This would be done in conjunction with a review of the existing Complaints Policy.</p>	<p>JS/JH</p>						

		<p>The Involving People group was led by Sharon Wheeler and facilitated by Gabriella Horecka. The group felt that the Essex and Southend LINK had achieved some successes so far but that there was still work to be done to include more people and “hear their voices”. They felt it was important to “piggy back” on to other events where people are already exhibiting an interest in an area or issue. They also discussed how to get “Joe Bloggs off the street”. The main points that arose from the group discussions were;</p> <ul style="list-style-type: none"> • There need to be actions and routes established to encourage wider involvement in the LINK. • It would be useful to match the actions and activities suggested against the governance arrangements already in place. <p>Gabby was asked to take details from the participant of any further suggestions they may have in relation to involving people.</p> <p>The Roles & Responsibilities group was led by Ian Flack and facilitated by Charlene Gordon. The group discussions included the openness of the LINK in relation to the work it is doing, and the progress and outcomes and how easily the information is made available. It was felt that it would be good to draw on people’s existing contacts to share information and to spread the workload. Delegation of work to members was discussed to get better outcomes. There was a feeling that the Essex and Southend LINK needed to do more on the governance arrangements. The main points that arose from the group discussions were;</p> <ul style="list-style-type: none"> • The LINK needs to be more public facing in regard to letting people know what they are doing. • If the LINK is more public facing and more open about what it is doing it will make members respond and actively want to join and participate. <p>The group discussion was summarised and it was agreed that the main work was to agree what LINK should do going forward. The Newsletter and the e-bulletin keep people informed of what the LINK and others are doing.</p> <p>The workshop session notes will be written up fully and will be made available on the Essex and Southend LINK website in due course.</p>	<p>GH</p> <p>IF & NV</p>
<p>4</p>	<p>Introduction to commissioning</p>	<p>Reg Mckenna Chaired this section of the meeting. There were three presentations given, copies of these will be available on the Essex and Southend LINK website www.essexandsouthendlink.org.uk in due course. Hard copies can be provided upon request.</p> <p><u>Commissioning and the commissioning cycle – Ian Flack</u> Ian gave a brief overview to the participants setting the scene from a non commissioner’s point of view.</p> <p><u>World Class Commissioning in Healthcare - Wendy Smith (Interim Director of Communications, NHS Mid Essex)</u> Wendy started her presentation by giving a recap on how the health service works and then went onto explain what world class commissioning meant. Wendy gave an interesting plain English presentation followed by questions from the participants;</p> <p>Q. A member stated that it was not always possible to get an NHS dentist, if a private dentist is used do they get paid for their services by the NHS?</p> <p>A. Wendy responded that if the dentist is providing non NHS</p>	

services then they do not get paid money from the NHS.

Q. Do GPs have to sign contracts for the services they provide?

A. Wendy responded that any commissioned services provided by GPs were subject to contracts and targets.

Q. How are GPs monitored for the services they provide?

A. Wendy responded that GPs are regularly monitored and the PCT work closely with them.

Q. Are GPs paid for the services in advance or in arrears?

A. Wendy was unsure of the answer to this so she asked Sally Wallis-Bore to find out and to provide the LINK with the answer to this.

Q. Is the NHS Smoke Free Quit Kit money well spent?

A. Wendy responded that there is clinical evidence to show that smoking is one of the biggest killers and reasons for premature death and long term incurable diseases. These have a great impact on NHS finances and the majority of people in the NHS agree that reducing the number of people that smoke is a priority.

Q. Is it money well spent on drug users and alcoholics?

A. Wendy responded where do you draw the line. The NHS is free at the point of use for all users.

Q. How do you justify paying bonuses for fewer hospital admissions?

A. Wendy responded that advancements show that people can be treated without the need to be admitted to hospital. Hospital is not always the best place to treat individuals with the availability of modern healthcare techniques. Essex is not the most advanced, other areas are more so. We should make the most of modern healthcare and make the shift from treatment in hospitals to get better, quicker and effective care in the community.

WS/
SWB

Wendy thanked everyone for their questions and said that they had opened up a good debate and raised some interesting issues.

Commissioning in Social Care – Chris Martin, (Senior Manager Strategic Commissioning Essex County Council)

Chris gave a concise presentation on commissioning in social care. Wendy and Chris then invited questions from the participants;

Q. It was stated that Chris had mentioned that needs assessments were important. When will there be a reduction in waiting times for alternative therapies?

A. Chris was unsure of the answer to this question and was asked to find out the information and provide the response to the LINK.

Q. Commissioning via social enterprise seems to be the new buzz word for purchasing facilities. Will managers come under the social enterprise?

A. Wendy responded that yes, managers would come under social enterprise. A social enterprise is a legal framework for organisations to exist. People will be TUPE'd under this arrangement. Ian Flack gave two examples of a social enterprise working; The London Borough of Bexley Learning Disabilities department was bought out by the managers and has run successfully for 5 years. Essex Carers was a fairly recent example which was also bought out by the managers and seems to be running well. Wendy said that the Community Services in mid and south east Essex are considering becoming a social enterprise and that this will be discussed at a meeting taking place on 2nd March. Social enterprises offer financial viability and a strong competitive organisation to compete against other companies.

CM

		<p>Q. On the 17th March Essex and Southend LINK will be looking at their work plan for the next 12 months. Wendy & Chris were asked, looking forward, what could they come up with that we would include in the LINK plan that could improve their services?</p> <p>A. Wendy responded that patient and public involvement in practice based commissioning was an area they were looking for “real involvement” from GPs and the LINK. Wendy was asked how many people she thought she would want to be involved from the LINK in the mid Essex area. Wendy stated that there were 11 practice based commissioning clusters in mid Essex. She said they would look at how this could be divided geographically and let the LINK know how many people would be needed.</p> <p>Ian flack said that he would contact Wendy and Chris to set up some training for members of the LINK on commissioning, with the hope that we would end up with expert lay commissioners.</p> <p>Q. New Horizons will become increasingly important in the 3.5% efficiency saving required for services. Early intervention in psychosis and mental health in general would save money. How do you propose to reduce costs in mental health?</p> <p>A. Wendy responded that in mid Essex the strategic plan addresses this for spending money in mental health services. They rely on acute care and they have far fewer community based services in this area. Rapid Assessment and Rapid Response teams have worked well. They need to look at other things especially related to early intervention.</p> <p>Q. A member stated that working practices and innovation are important to get more effective and cheaper services.</p> <p>A. Chris gave an example relating to domiciliary care he gave an example of past services e.g. a carer coming in at 8am to wake someone up and 9pm to put them to bed. He said that in the past services have been historical in the future it is hoped that people will be able to pick and choose services. This is an advantage of having a wider range of services.</p> <p>Q. A member stated that it was hard to change rural services, as people don't want to come out to rural areas.</p> <p>A. Chris responded that demography and geography does play a large part in the availability of services.</p> <p>Q. Who decides what is social care and what is health care?</p> <p>A. Wendy responded that there is a clear set criterion. Wendy was asked to provide the criteria for this for NHS Mid Essex. Wendy suggested that we get this from PCTs from other locality areas.</p> <p>Q. A member raised an issue of a mobile blood pressure clinic unit. That has lottery funding ending in March 2010. She is trying to get the NHS to fund this service but has not received any favourable information on how to go about this. She asked how do you recognise the need for services?</p> <p>A. Wendy responded that the PCT offer a tender for a service and a provider then responds to this tender. In view of the mobile unit mentioned Wendy said that there would be a GP contract to provide this service. Therefore if this was provided by an independent sector provider the service would be being paid for twice.</p> <p>Wendy and Chris were thanked for their presentations and for answering the questions put to them.</p>	<p>WS</p> <p>IF/WS/ CM</p> <p>WS</p>
7	Date & time of next meetings	<p>Future public meetings;</p> <p>Wednesday 17th March 2010. This will be held at the Central</p>	

		<p>Baptist Church, Victoria Road South, Chelmsford, Essex, CM1 1LN. The subject of the meeting will be care of older people and end of life care.</p>	
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Wednesday 16th June 2010. This will be held at the Cliffs Pavilion, (Maritime Suite), Station Road, Westcliff on Sea, Essex, SS0 7RA.