

Reporting on matters occurring since last meeting on Wednesday, September 3, 2014

1. Activities Updates

Steering group - This group met on Wednesday, September 30, 2014, with 13 members present including representatives of all partner agencies (except Disability Cornwall), the operational team, 1 director, 2 lay representatives (including Chair) and a representative from SEAP. (7 apologies received)

Activity discussed or initiated

- Tracey Roose spoke to the group about the Penwith Pioneer project
- A review of the Steering Group recommended more active workshop sessions, opportunities for members to feed in relevant information, keeping the Chair for a minimum 2 year term and opportunities for speakers where relevant.
- Task groups updated meeting on progress made
- Urgent and Out of Hours research project postal survey (population 5000) was discussed and group were updated how this could feed into a Stakeholder workshop on the future of urgent care. 2 external research projects on Care of Dying, and Personal and Health budgets have commenced.
- Our limited discharge inquiry result was discussed - key findings of which showed some concern around care and discharge of people who had attempted suicide. 2 partners contributed to this topic which will be followed up at next meeting.
- Poltair consultation - general dissatisfaction with response about next steps and further letter and meeting requested.

2. Evidence and Research update

a) Attitudes of GPs to patients presenting with mental health concerns and subsequent treatment
RESULTS

Published in August 2014 results show:-

- 24% of respondents were not satisfied with the service they get from their GP or reported that the doctor did not seem interested in their condition or what they had to say.
- Nearly 40% of under 24 year olds who replied felt they were not referred to, or informed of support services, with at least 20% of ages 25-75 reporting the same.
- When asked whether they were communicated with clearly about their condition and treatment, between 20 and 75% were unhappy with this process, with younger age groups most dissatisfied and the 50-64 year olds least dissatisfied.
- 35% of people reported no choice of treatment or being given treatment options.

UPDATE

We have been collating responses from stakeholders and working on recommendations.

- We have given a report to Cornwall Foundation Trust on feedback received about BeMe and discussed this with them.
- We have given a report to Outlook Southwest on feedback relating to them and a meeting is booked to discuss this.
- We have had replies from 5 GP locality leads.

Early evidence seems to be suggesting a gap in services for people who would not benefit from short interventions but are not seen as severe enough to need intervention from CMHT/acute

provision. These people inevitably attend GPs for support with little available to offer them. Further investigation of this is needed.

- We contacted 5 GP practices to report positive feedback - Probus, Carnewater (Bodmin), Falmouth Health Centre, Lander Surgery and St Agnes surgery.
- We received feedback from NHS England re: GP professional development and Health Education England re: GP training and are assimilating this. No further needed here.
- We received feedback from the Education, Health and Social Care directorate on how mental health is being addressed as a theme for pastoral education across the age ranges. No further needed here.

We are planning to collate information on voluntary sector services available for people with mental health issues to send to GP practices, in association with our partners and providers. Good practice in working with young people will also be shared.

b) Availability of services generally in East Cornwall

RESULTS

- A need for increased NHS Dentist services, especially in Launceston
- A lack of awareness of Minor Injury Units in Launceston, Torpoint and Saltash
- Only 40% of patient referred for oncology and cardiology reported being seen within the 2-week NICE guidelines (but note sample size was small)
- There were long waiting lists for hospital dentistry, gynaecology and ophthalmology appointments
- Hospital patients felt that there should be extra consideration around appointment times for people travelling long distances

UPDATE

Following this investigation, Healthwatch Cornwall made three recommendations to NHS England, the commissioners of NHS dental services, which included exploring NHS dentist provision in Bude, Liskeard, Launceston and Callington to bring about improvement; better awareness of NHS dentists' places; and that dentists consider later opening times.

To raise awareness of how to people can find an NHS dentist, NHS England confirmed it has sent the helpline signposting information to all GP practices and may also create information cards to be made available in a variety of public spaces to encourage people to call the helpline number.

It will use data collected from the helpline to review unmet need by location and target those with unused NHS capacity to discuss how they can increase the amount of NHS work delivered, with the first phase of a review in Falmouth and Helston already underway. We understand 4 new dental reviewers have been appointed to look at provision across the whole of the NHS South area.

A Liskeard practice has been running a pilot of extended opening hours since July, with uptake from existing patients filling the places available and NHS England plans to use this initiative in discussion with other NHS dentistry providers about potential changes to opening times.

We are delighted that this research has prompted a review of NHS dental provision and will follow this closely.

We are still following up on appointment times and transport.

Follow on and referral to treatment times is closely monitored already so we are not pursuing any further work here.

Urgent care practices are also under review by NHS Kernow so no further work on MIU is being carried out and a recent communication confirms extended opening times for Camborne, Bodmin, Liskeard and Stratton, and the opening of 2 GP led urgent care centres in Camborne and Liskeard.

c) Out of hours services/urgent care

A survey to determine awareness of 111 and use of 999, and when to use different urgent care services, which also incorporates a public consultation of potential changes to out-of-hours (OOH) services provided by GPs and public feeling about use of community pharmacy, is underway; completion December 2014. 5000 postal surveys, as well as electronic circulation of Survey Monkey are being distributed. 300 results on awareness already achieved from summer engagement events.

NHS Kernow have shown interest in using this to help shape future OOH/urgent care provision and agreed to support a Stakeholder event on this, hosted by ourselves. We have been invited to attend Urgent Care board meetings at NHS Kernow to support this work.

d) Task group work on domiciliary care and dementia services is progressing, with engagement likely to commence in the next month.

3. Enter and View Update

Work has commenced regarding follow up appointments and in a small number of care homes. Hospital work proceeding slowly and CQC follow up work now in planning stage.

4. Outreach Update

The regular drop-in activity at Treliske with SEAP is giving us good feedback.

A “community champion” volunteer day was held in September, which saw 5 volunteers commit to various community engagement.

A focussed event with The Pearl Centre, on issues facing those with autism and Aspergers syndrome yielded some research that indicates lack of a support service for adults being diagnosed late with Aspergers, little support for parents with behavioural management and difficulties with people who have co-morbid conditions. Further work needed here. We now have specific drop-ins at Pearl Centre.

Outreach workers have been focussing outreach on young people, mothers/maternity in the past 2 months.

5. Marketing and Media Update

Radio marketing has been a recent focus of marketing activity, with regular slots on Pirate 2’s Health and Well-being show on Tuesday evenings and also Hospital Radio.

There have been issues with the on-screen marketing purchased at the RCHT group and JP is chasing this for satisfactory resolution.

We have HC advertising on the back of library bookmarks that have been distributed to all libraries in Cornwall.

We featured on 2 episodes of a week-long documentary series focussing on dementia, recorded by BBC Spotlight and BBC Radio Cornwall in September/October.

A Christmas campaign - “Be a Docemberist” is underway in line with Live Well Strategy - designed to encourage individuals to do one good thing to encourage well being in their local community.

6.Representation activity

NHS Kernow Governors meeting (RS)
Mental Health Expert Reference Group (JB)
South West HW Peninsula meeting (DP)
Andrew Abbott - NHS Kernow (DP AND JE)
Dementia Services meetings (various)
Transition event (GT- volunteer)
Discharge re-design (JB)
Best Practice in complaints (DP)
Complaints network (JW)
Patient experience - Treliske - report presented (JB)
Patient experience Derriford - report presented
QSG - report on GPs presented (also to CQC, in attendance)
JSNA focus group (DP and partners)
South West Forum (DP - voluntary sector and HW focus)
Prescribing committee (MA)
Care Providers meeting (JJP)
Overview and Scrutiny (MA)
CAP meeting - report presented (JB)

Many of these now have added value as either a way of reporting feedback to providers for action and information, or as a way of engaging about topics we are working on. Representation will now be recorded on database by new business admin assistant. A summary can be collated for board papers from 2015.

7.CEO activity

In addition to regular meetings, supervisions and monitoring and above, CEO has taken part in the following

- Meetings with Carers Break and Carers service to discuss ideas for potential collaborative research
- Meetings with CPFT and Outlook to discuss their feedback and gaps in services
- Parliamentary Reception in London for launch of HWE Annual report and Complaints report.
- Quarterly monitoring and review of reporting arrangements
- Influencing for Red Concerns, including Boots
- Own Community Champion focus - met with Practice Mgr Probus, attended flu clinic to promote HC and our research
- Penclarc - research question session
- Met with Carol Steer and Barbara Pendleton
- Interviewing for staff and induction for Chair and Business admin
- Week long Data Protection course

8.Operational Matters

Phone line monitoring showed a reduction in call volume over that reported by partners, prior to coming in house. New business administration person to be trained to take over manning the line and a cost-benefit review to be completed for February board.

Social Media Partnership funding has been approved and I am happy with the terms of agreement - which give South West Academic Health Science network access to data that could be purchased by providers. No confidential or identifiable data to be shared. Detailed contract details have not been received.

By engaging a legal service we have achieved a substantial rate reduction from £3297 annually to £561 annually, with a rebate of £2844.42. Rebate applies until 2017. Fees were £1196.32.

9.HR and Staff Matters

Training on H&S, risk assessment, manual handling for October 8, delivered to 5 staff.

DP attended data protection course 20-24 October. Training to staff and volunteers to follow.

JP attending film editing refresher training (funded).

Media training booked for November 7.

2 further staff booked on E&D training for December. Bespoke session being arranged for other staff and volunteers.

New Business admin assistant - Maisie Parkin, started with us on 27.10.14.