# BaNES locality: Your Health Your Voice Meeting

# 10 February 2021 | 14:00 – 15:30 | Virtual meeting via Zoom

**Present:**

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| **Name** | **Initial** | **Job title /role** |
| Julian Kirby | JK | Lay Member for Patient & Public Engagement, BSW CCG - Chair |
| Tamsin May | TM | Deputy Director of Communications and Engagement |
| Corrine Edwards | CE | B&NES Chief Operating Officer BSW CCG |
| Lee Rockingham | LR | Engagement Officer, BSW CCG |
| Donna Peake | DP | Public Engagement & Insight Manager, BSW CCG |
| Ruth Jones | RJ | Quality Manager for BaNES locality, BSW CCG |
| Hilary King | HK | Member of the public and Keep Our NHS Public Group |
| Mark O’Sullivan | MS | Member of the Public |
| Jenny Evans | JE | Chair of Friends of St Chad’s and Chilcompton Surgeries Charity |
| Ann Harding | AH | Member of the public and Healthwatch link volunteer for Virgin Care (B&NES community health and care services) |
| Ian Perkins | IP | Member of the Public |
| Julie Hockey | JH | Member of the Public |
| Diane Woodhouse | DW | Member of the Public |
| Deborah Jane | DJ | Member of the Public |
| Sue Poole | SP | Healthwatch Wiltshire |
| Andy Morley | AM | Member of the Public |
| Janet Cowland | JC | Member of the Public |
| Julia Holding | JH | Engagement Consultant |

**Apologies:**

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| **Name** | **Initial** | **Job title /role** |
| Robert Page | RP | Member of the Public |
| Rob Wills | RW | Member of the Public |

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|  | **Welcome and Apologies** |
|  | JK welcomed the attendees to the meeting and LR noted any apologies. |
|  | **Declarations of Interest** |
|  | JK asked members to declare any interests. No declarations were made. |
|  | **B&NES Locality update** |
|  | CE thanked the group for attending the meeting and outlined the key areas that she would be discussing today, which were:   * Update on the transition from Clinical Commissioning Group to Integrated Care Board * Update on system pressures and operational planning * Questions regarding HCRG   CE advised that the group of the delay in the bill for the proposed change to an Integrated Care Board (ICB) being passed through Parliament. The new arrangement scheduled to be in place from 1 April 2022, has now been delayed until 1 July 2022. C The assumption is still that this will be passed through Parliament, so the CCG is continuing with its plan to transition on 1 July 2022, including recruitment to the mandatory and non-mandatory positions within the proposed ICB.  Sue Hariman has begun her role as the new Chief Executive on 7 Feb 2022 and has begun meeting with partners and system leaders in order to get an understanding of the services and challenges faced within BSW.  CE also confirmed that a number of Director roles are expected to be recruited to the ICB by the end of March 2022.  AH: asked what the salaries are for the roles on offer?  CE: advised that these are senior management roles within the ICB, and although she could not provide the exact figures, it is expected that these would be in the region of £120,000 per annum.  AH: advised she was horrified that Directors earn that amount of money when there is a shortage of frontline staff.  JK: advised NHSE set out Director salaries so locally we don’t have a choice in the amount of offer.  CE: echoed the comments from JK, and also agreed with AH that there is a lack of frontline staff and highlighted the focus on workforce and their mental wellbeing with the current Covid-19 pandemic taking its toll on NHS staff that it was important to recognise the work being done behind the scenes should be celebrated, as well as taking care of our staff.  HK: asked why there are so many Director vacancies currently? And if the roles were only open to people in post or if it’s an open recruitment process?  CE: advised explained that the roles on offer are not vacancies but were out to wider recruitment as the CCG is being abolished and the current roles will no longer exist.  The ICB Director roles will cover a wider portfolio and that it would be an open recruitment process.  AM: asked the group if they had received an email asking them to be part of a panel for the recruitment process of the Executive Directors and enquired how the panel will work?  JK: advised that an external company has been appointed to create the panels, and individuals will be asked to sit on the panel and ask the interview questions to the shortlisted candidates. The exact format of the panel will depend on the role on offer as well as the experience and skill set of the panellist.  CE: advised that there has been a lot of press, both nationally and regionally, reporting on the significant challenges and demands on services as a result of the pandemic. As a locality we are continuing to focus daily on how we support patients being discharged from hospital. Extra ordinary measures have been in place since the beginning of January, including the opening of Ward 4 at St Martins Hospital Bath, which has increased from 18 beds to 22 beds.  A care hotel has now opened in Bath, which is also being used to support patients being discharged from hospitals.  CE: NHS has published planning guidance for 2022-23 There is a need to get back on track to try to significantly reduce the wait times on hospital and community provider waiting lists.  CE explained that HCRG were new owners of Virgin Care Group. CE advised the Forum that the CCG has commissioned an organisation to perform due diligence and will take the findings, along with the procurement information through the relevant legal process if applicable.  IP: the government are obsessed with targets, and that each time targets are set nationally an effort goes in to reaching them, rather than improving the services on offer.  CE: advised that the NHS has always had and worked to targets, and that targets have a place as long as there is a focus a focus on the outcomes. |
|  | **Minutes from the meeting held on 8 December 2021** **&** **action tracker** |
|  | JK: advised that the previous minutes have been circulated and asked if the group were asked to confirm if the minutes are accurate. One amendment had been received via email and once this amendment has been made the minutes can be signed off as accurate.  The Action outstanding is with a member of the infection control team from RUH who will attend a future meeting to provide an update when there is capacity. **Action ongoing**  MS: raised a point regarding infection control measures at Pulteney Practice where he experienced, he had to wait in areas that were cramped, small spaces with no access to open windows.MS had written to the practice manager, who had in turn passed on his letter to someone, and the response that he received was not favourable and did not address his query.  MS advised that he did not wish to make a complaint but wanted to raise the issue here in the forum and it was agreed that this should be added to the minutes and that JK would take forward the feedback through the CCGs own governance measures. |
|  | **Public Questions** |
|  | DP advised that due to time constraints if it was ok to circulate the public questions and answers along with the minutes of this meeting, and if anyone would like to feed back further information, they can contact the engagement team via the [bswccg.engagement@nhs.net](mailto:bswccg.engagement@nhs.net) address.  The group agreed to this, and a [copy of the questions will be included in the minutes](https://www.bswccg.nhs.uk/docs-reports/2586-3-q-a-presentation-10-02-22/file).  **Action: Send out questions with agenda** |
|  | **People and Communities update** |
|  | DP: introduced herself to the group and explained that this was her first forum in her new role as the Insight and Engagement Manager for BSW CCG. There will be a with a clearer focus on engagement and public feedback through a new People and Communities strategy.  The strategy would help to build firm foundations for the future, with the CCG working with partners and communities focusing on co-design and co-production in order to support and advise the ICB on its formation by 1 July 2022.  This will bring us nearer to working with diverse communities to shape the future of our healthcare services. It is important that we focus our attention on health inequalities and those seldom heard groups, thinking about how their lives and experiences can help shape the strategy and bring new ideas to the work that we already undertake. There is a need to develop and build our networks and existing relationships to find where the gaps are in current services.  The people and communities’ strategy is underpinned by 10 keys principles which will help us get the foundations right in order to build for the future. To do this, we want to start engaging with communities and community groups as early as possible, working hard to be clear, accessible and inclusive with everyone through engagement approaches such as co-production workshops.  IP: advised that he is yet to see a description of co-production, as the word is banded about as a buzz word with no real description as to its purpose.  DP: advised co-production is a start point for creating a new strategy, pathway or service, and to working with people from the ground up, with a shared vision and shared influence to create a change together.  JK advised that the ICB will have people from all providers in the room, and its design is to address all issues raised. IP expressed to the group that local governments produce their own version of co-production and work within legal parameters that may be different to the CCGs version.  DP agreed that there were a range of co-production descriptions and approaches use, so it was important that we work with our partners including local authority leads to bring a clearer joined up vision to on what co-production is.  TM: to the group. TM advised that community engagement is a key feature of the new ICB and part of a 5-year plan which will also bring a huge cultural shift, and the scepticism along the way. TM advised that national policy from NHSE focusses on engagement support for communities which will improve joined up collaborative working. Issues may arise with the language being used in the strategy but plans and projects can be shaped better by bringing in organisations earlier in order to collaborate better.  DP canvassed for volunteers to create a new panel (or sounding board) is. Ideally this would include two forum members from each locality to give a wide range of perspectives, challenges and to add value to the engagement policy and strategy we are now drafting. Volunteers are also being requested from our Swindon Forum and from across our communities to bring diversity, challenge and sense check how we for the people and communities strategy.  If any of the group are interested to contact Donna at [bswccg.engagement@nhs.net](mailto:bswccg.engagement@nhs.net) |
|  | **Any other business** |
|  | LR: advised that the CCG are in the process of reviewing its use of Zoom and migrating to Microsoft Teams. and he will keep the group informed as this develops and would help anyone who needs a quick guide support call before using MS Teams.  AH and JC advised they may require help as they have found Microsoft Teams difficult to use.JE explained that she had previously been apprehensive, but after using it found that Microsoft Teams was easier to use than she expected. |
|  | **Closing remarks and next meeting** |
|  | JK advised that a date will be set for the next meeting.  Update: These will be quarterly, and the next meeting will take place on 9 June 2022, 2pm-3:30pm. |