



**Notice of a public meeting of
Health and Adult Social Care Policy and Scrutiny Committee**

To: Councillors Doughty (Chair), Cuthbertson (Vice-Chair),
S Barnes, Cannon, Craghill and Richardson

Date: Tuesday, 24 May 2016

Time: 5.30 pm

Venue: The Severus Room - 1st Floor West Offices (F032)

AGENDA

1. Declarations of Interest (Pages 1 - 2)

At this point in the meeting, Members are asked to declare:

- any personal interests not included on the Register of Interests
- any prejudicial interests or
- any disclosable pecuniary interests

which they may have in respect of business on this agenda.

2. Minutes (Pages 3 - 8)

To approve and sign the minutes of the meeting held on 25 April 2016.

3. Public Participation

At this point in the meeting, members of the public who have registered their wish to speak regarding an item on the agenda or an issue within the Committee's remit can do so. The deadline for registering is **Monday 23 May 2016 at 5:00 pm**.

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4. Musculoskeletal (MSK) Service Update Report

(Pages 9 - 12)

This report provides the Committee with an update on work being undertaken to provide Musculoskeletal care across the Vale of York Clinical Commissioning Group area.

5. Healthwatch York: Performance Monitoring/Six Monthly Review Template(Pages 13 - 48)

This report sets out the performance of Healthwatch York over the past six months.

6. NHS Vale of York Clinical Commissioning Group Turnaround Action Plan (Pages 49 - 52)

This report informs Members about the measures that NHS Vale of York Clinical Commissioning Group (CCG) has put in place to improve the capacity and capability of the organisation to help address the local financial position and to return it to a sustainable position.

7. Update Report on Better Care Fund (BCF)

Members will receive an update on the Better Care Fund.

[Report to Follow]

8. Work Plan (Pages 53 - 54)

Members are asked to consider the Committee's work plan for the municipal year.

9. Urgent Business

Any other business which the Chair considers urgent under the Local Government Act 1972.

Democracy Officer:

Name- Judith Betts

Telephone – 01904 551078

E-mail- judith.betts@york.gov.uk

For more information about any of the following please contact the Democracy Officer responsible for servicing this meeting

- Registering to speak
- Business of the meeting
- Any special arrangements
- Copies of reports

Contact details are set out above

This information can be provided in your own language.

我們也用您們的語言提供這個信息 (Cantonese)

এই তথ্য আপনার নিজের ভাষায় দেয়া যেতে পারে। (Bengali)

Ta informacja może być dostarczona w twoim własnym języku. (Polish)

Bu bilgiyi kendi dilinizde almanız mümkündür. (Turkish)

یہ معلومات آپ کی اپنی زبان (بولی) میں بھی مہیا کی جاسکتی ہیں۔ (Urdu)

 **(01904) 551550**

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Health and Adult Social Care Policy and Scrutiny Committee**Agenda item 1: Declarations of interest.**

Please state any amendments you have to your declarations of interest:

- Councillor S Barnes Works for Leeds North Clinical Commissioning Group
- Councillor Cannon Member of Health and Wellbeing Board
Husband is a trustee of IDAS
- Councillor Craghill Member of Health and Wellbeing Board
- Councillor Doughty Member of York NHS Foundation Teaching Trust.
- Councillor Douglas (Substitute) Council appointee to Leeds and York NHS Partnership Trust.
- Councillor Richardson Niece is a district nurse.
Undergoing treatment at York Pain clinic

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City of York Council

Committee Minutes

Meeting	Health and Adult Social Care Policy and Scrutiny Committee
Date	25 April 2016
Present	Councillors Doughty (Chair), Cuthbertson (Vice-Chair), S Barnes, Craghill, Richardson and Funnell (Substitute for Councillor Cannon)
Apologies	Councillor Cannon

81. Declarations of Interest

At this point in the meeting, Members were asked to declare any personal, prejudicial or disclosable pecuniary interests that they had in the business on the agenda.

Councillor S Barnes declared his standing interest as an employee of Leeds North Clinical Commissioning Group in reference to the fact that they commissioned services from Leeds and York Partnership FoundationTrust.

No other interests were declared.

82. Public Participation

It was reported that there had been four registered speakers under the Council's Public Participation Scheme. Each spoke in relation to Agenda Item 3) Bootham Park Hospital Update Report.

Amanda Griffiths questioned why the CQC had concentrated on one death at the hospital over four years when there had been nineteen suicides in other facilities. She felt that there should have been a focus on care processes within the inspection report. Members were informed that when she had telephoned CQC inspectors to inform them of safeguarding failures within Bootham Park Hospital, they informed her to make a complaint to Leeds and York Partnership NHS Foundation Trust. She felt that the current problems were that patients were being sent out of area where their records were out of access, care plans were politically aimed and that front line staff were stretched to capacity.

Sarah Lazenby spoke about how a friend had committed suicide due to being treated away from Bootham Park in Middlesbrough. This was because he did not know staff and it was far from his home. She added that she felt personally affected by his death.

Joanne Lazenby felt that the age of Bootham Park should not be taken as a negative given that other sites such as The Retreat and Leeds General Infirmary (LGI) were old buildings and still offered quality healthcare. She added that LGI had been extended like Bootham had and could be. The grounds offered a safe and healing environment and that a new mental health unit at Clifton was not suitable as it was not safe as it was next to a busy road.

Chris Brace from Mental Health Action York felt that the Health and Social Care Act fragmented the four organisations responsible for mental health services in the city. This meant that the system could allow for no one party to take on all the responsibility. He wanted the Committee to understand the urgency of the situation in regards to mental health care in the city. He wished for meaningful consultation to be undertaken, and for mental health services to be reinstated in York.

83. Bootham Park Hospital Update Report

Members considered a report which provided them with information around the closure of Bootham Park Hospital and actions taken to restore services at the hospital following its de-registration.

Ruth Holt, Director of Nursing-Programmes, NHS England gave a Powerpoint presentation to Members. She said that the key issue to the closure were the restrictions to development at Bootham due to its Grade 1 listing, and that the premises were unsuitable as configured. She reminded Members that it was a legal requirement to register to deliver medical services at a hospital. There had been a number of delays in the scheduled building works. It was also noted that there was no action plan delivered from the Bootham Park Hospital Programme Board to which the Care Quality Commission was not a member. There was also a tight timeframe between the handover of the contract from Leeds and York Partnership NHS Foundation Trust (LYPFT) to Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV). She stated that there was no evidence to show that any of the organisations were not maintaining patient safety.

In regards to actions following the closure, NHS England were now asking all organisations involved to complete action plans and these should be completed by 25 May. There was a Memorandum of Understanding in development for the sudden hospital closures and this would be going to one of NHS England's most senior committees.

In response to questions from Members as to what would be the problems of continuing to use Bootham Park Hospital, it was felt that the configuration, in particular the layout of the wards and the lines of sight would be problematic. The lack of ability to have a single en-suite ward and the infrastructure problems would also contribute.

Dr Paul Lelliott, Deputy Chief Inspector from the Care Quality Commission (CQC) told Members that Bootham was in breach of regulations in the run up to its closure but also that there were different standards that could be applied if it was a new application for a registration.

In response to Members questions he stated that the responsibility to make Bootham Park Hospital safe rested with LYPFT not the CQC. He added that the closure of the hospital was not mandated by law but they felt that they could not add a hospital to the registration of a new provider to deliver services from a building they knew was unsafe. He confirmed that if the CQC had served notice on LYPFT without the transfer of the contract to the new provider the hospital would have closed anyway. In response to a question about the composition of the first and second inspections as to whether they were the same on each one, it was noted that they were large inspection teams and some from the September/October 2014 inspectors went again in 2015, one had also been involved in the 2013 inspection.

One Member asked what proactive measures could have been taken across the health community and under what circumstances could these have worked.

In response, it was reported that NHS England would have stepped in if issues had been escalated at an earlier point, however they had not got an official legal status and they could not take responsibility for commissioning mental health services.

Michelle Carrington, Chief Nurse, NHS Vale of York Clinical Commissioning Group and Janet Probert NHS Hambleton, Richmondshire and Whitby Clinical Commissioning Group, answered Members questions by stating that the building works were discussed

at every Bootham Park Hospital Programme Board Meeting. The transfer of registration between LYPFT and TEWV was unprecedented and as a commissioner, VOYCCG tried to do the right thing due to the tight timescales. However they admitted that perhaps they should have negotiated a longer contract but the CQC wanted to move patients out of Bootham. VOYCCG wanted to invest in mental health services in York and LYPFT had made a number of improvements at Bootham Park Hospital but there were a number of issues around regulation. The consequence was moving patients quickly which was not the desired option, but was the safest one. In regards to alternative provision for mental health care in the city, there was not a ready made ward but there was a long term plan.

John Ransford, who was the Independent Expert Adviser to the Committee on the Bootham Park Scrutiny Task Group shared some of his thoughts from his report, which was attached at Annex 2 to the agenda.

He stated that;

- We were dealing with a set of unintended consequences.
- An action plan had been devised but had not been followed.
- There was a lack of strategic leadership.
- When NHS England got involved things moved forward more quickly.
- The current structure of the NHS is a factor, there is a complexity to it.
- A tendering process is by its definition competitive and was high risk in this situation.
- It was good that NHS England are drawing action plans together for all organisations involved- but these plans must be held to account.

One Member asked what was the significance raised in third observation in the report. It was noted that during a competitive tendering process a lot of preparation time went in and if an organisation tendering for a contract was unsuccessful then they were unlikely to put in the second mile in their management in other areas to make things happen. In addition the successful tenderer did not have the information available when they were registered to provide care on the site and this further complicated matters.

Anthony Deery, Director of Nursing and Dawn Hanwell, Chief Financial Officer from Leeds and York Partnership Foundation Trust told Members that the standard of nursing care provided was high but

limited by the environment in which the nurses worked. They felt a deep frustration at the environmental issues and that they did not have the authority to change this, but added that they had not taken their eyes off the ball as far as safety issues were concerned. In regards to staff issues, they used bank and redeployed staff as they were not able to provide staff that had planned for. He added that having mental health services in the city retendered created a position of uncertainty and nurses took up permanent posts elsewhere.

Ian Butterworth, Regional Property Director from NHS Property Services reported that NHS Property Services had a programme of works linked to general maintenance and vacation of the wards. In response to a question from a Member in regards to what NHS Property Services were doing when concerns were first raised, he said they were facilitating the movement of the older people's ward to Cherry Trees and secondly work commissioned by LYPFT. However, the work commissioned by LYPFT was delayed by Cherry Trees. One Member asked if the works could have been phased but this was not possible as the main parts of the work had to be done in a patient occupied area.

All organisations present were asked which organisation they thought would be the lead body who would oversee action plans, if an event such as this were to happen again. It was felt that Vale of York CCG should be the lead body.

Siân Balsom, Manager Healthwatch York presented a Healthwatch report on the impact of the closure of Bootham Park Hospital and said that from the consultation it was clear that people wanted their stories to be told, but for some it was still too painful share. There was no overall consensus reached. She stated that the issue needed consideration at a national level and that Healthwatch York would be escalating it to Healthwatch England. She felt that the future of Health and Social Care depended on better conversations and with people at the heart of it.

Ruth Hill, Director of Operations, York and Selby, from Tees, Esk and Wear Valleys NHS Foundation Trust said that a meeting had been held recently with service users in regards to the plan for a new mental health hospital. Michelle Carrington, Chief Nurse, NHS Vale of York Clinical Commissioning Group felt that some of the anxiety felt by service users had come about from wanting to know how the closure situation had arisen.

Amanda Griffiths, one of the public speakers asked about a recent mental health symposium that she had attended run by TEWV and raised her concerns that it was about psychiatric hospitals closing down. Ruth Hill replied that it was about recovery and there had been a lot of discussion about bed based and community mental health care, they had wished to engage as many people as possible.

Chris Brace commented that he was reassured that lessons were being learnt, but he was concerned about consultation process and what range of options service users and the people of York would be offered in their mental health services.

It was noted that TEWV had a plan going forward in their options appraisal where people could have a say in the hospital design.

The Chair stated that all organisations would update the Committee after they had completed their action plans.

Resolved: (i) That the Task Group meet to discuss the recommendations made by NHS England and the Committee's Independent Adviser.

(ii) That the Task Group considers the action plans of partner organisations before making its final recommendations.

Reason: So the people of York and the Vale of York are not deprived of acute mental health inpatient services.

Cllr P Doughty, Chair

[The meeting started at 1.30 pm and finished at 4.15 pm].

Health & Adult Social Care Policy & Scrutiny Committee

24 May 2016

Musculoskeletal (MSK) Service Update Report**CCG Responsible Chief Officer and Title**

Dr Tim Maycock

Clinical Lead for Primary Care and Integration

Report Author and Title

Andrew Bucklee

Senior Innovation and Improvement Manager (Planned Care)

1. Since Dr Maycock's report, in November, to the Overview and Scrutiny Committee the CCG has confirmed that a new service model for musculoskeletal (MSK) provision will be developed via an integrated approach between primary care, community care and acute care services. This is instead of commissioning a new service via a procurement route. Communications about this decision have been made.
2. Since the November report we have carried out the following work.
3. A group of clinical colleagues from both primary and secondary care alongside the existing MSK service met to discuss the potential for developing a service via a more collaborative and integrated approach.
4. It was agreed that those attending should form a Service Development Group (SDG) that oversees the development of a proposed new model for consideration by the CCG commissioners.
5. It was further agreed that to be successful a truly integrated model should take into account the whole patient pathway from presentation at GP practice to discharge from the service and all the touch point intersections along the way.

This was seen as a preferable alternative to procuring a stand-alone service that can lead to a fragmented and 'siloed' way of delivering patient services.

6. It was established that any new MSK service would aim to transform care, for patients suffering with joint, bone and muscle pain, across the Vale of York Clinical Commissioning Group (CCG) locality by tailoring care to the needs of the individual patient and ensuring that their treatment is joined up and seamless across their particular pathway.
7. Essentially the aim of the SDG will be to oversee the development of a new approach for MSK care, which is created by local GPs, other healthcare professionals and patients of the current service. In the new design a clearly defined route through the service will be developed that will put patients at the centre of their care, sharing decisions about what treatment they receive and where that treatment takes place, ensuring they see the right clinician first time. The many services involved in musculoskeletal care will be brought together (including primary care, radiology, physiotherapy, orthopaedics and podiatry, and also potentially rheumatology and pain management). The new approach will ultimately result in more services being available closer to where patients live. It will also mean patient care will be joined up across general practice, community and hospital services.
8. The first stage for this development will be a series of 'task and finish' groups that will cover the main aspects of the new model namely:
 - A collaborative approach between providers and commissioner – designing the new model of care from the front-line.
 - Integrated working that is responsive and has clear 'hand-offs' utilising joint working/shared care processes. The process of pathway development will be evidenced based and utilising available data analysis, such as RightCare, to prioritise specific areas within the initial work programme e.g. the hip replacement pathway.
 - Strengthen the physiotherapy links to practices whilst maintaining the ESP link to physiotherapists.

- Re-instigation of the self-referral process, ensuring it is integral within the new model rather than a stand-alone process.
 - Shared decision making identifying the correct points in the pathways where this should be instigated.
 - Development of a robust governance process that covers the whole integrated model.
 - Development of a training and education programme to upskill colleagues in primary care.
 - Improve patient self-reliance via standardised advice, patient information and ensuring any communications provides appropriate information at the appropriate time.
 - Ensuring expertise within the system is valued.
 - Utilise opportunities that arise to create links with other work programmes e.g. the expansion of Clinical Hubs.
9. The Service Development Group will oversee this development. Below this Task and Finish Groups will be set up to develop the new model.
10. Feeding into this will be development of the outcomes the new service will be expected to deliver. The baseline for this piece of work will be the outcomes developed for the recently aborted re-procurement of MSK services. This piece of work will be overseen by the CCG, as part of their duty as commissioner of the service. Once completed these agreed outcomes will form the basis of a specification for the new service. At the centre of developing these outcomes will be a comprehensive public engagement process that will consist of gaining views through:
- Five drop-in sessions across the CCG locality
 - Attending four MSK hospital clinics to get the view patients within the current care pathway
 - Public survey available via the CCG website.

11. Details of the above have been advertised via the CCG's normal communications routes.
12. The CCG Senior Management Team has given permission to complete the work required to bring a proposal for an integrated MSK service based on the above principles. The major milestones for the project are as follows:

Work Programme (high level)	Completion
Communication from the CCG that it intends to develop an integrated approach rather than the re-procurement of a stand-alone service	April 2016
Development work required for new integrated model i.e. Task & Finish Groups	October 2016
Business case for proposed new model to the CCG Senior Management Team/Governing Body	November 2016
Implementation phase for new model – 'lead-in' time	February 2017
New model start	March 2017

Recommendation: This paper is for information only therefore there are no specific recommendations.

Healthwatch York: Performance Monitoring / Six Monthly Review Template

Name of Provider	York CVS
Service Provided	Healthwatch York
Contract Start Date (Service Commencement Date)	01 April 2015
Contract Finish Date (Expiry Date)	31 March 2016

The aims of the performance monitoring / six monthly review process are to:

- Review the achievements of the Service in delivering the agreed outcomes
- Consider how the Service might be developed going forward
- Identify how beneficiary needs are being delivered
- Establish that the Service is being managed in accordance with the Agreement

The information contained in this report will be used as a basis for the Annual Service Review, in conjunction with that information provided on a regular basis during each year of the Term.

Six monthly performance monitoring reports will include a mixture of qualitative and quantitative data to ensure that the process is not simply a mechanistic one, but feeds into a continuous cycle of improved performance. Six monthly reports will be presented to Performance Management Group meetings on dates to be agreed.

In addition, a six monthly performance management meeting will be held between representatives of the Council and Healthwatch York. The performance management group meetings will:

- Agree additional Key Performance Indicators that will constitute six monthly performance summaries
- Set annual milestones for each Key Performance Indicator as appropriate
- Receive six monthly performance summaries, define any gaps in performance and discuss how these might be rectified.

In addition to the six monthly reporting process it is proposed that 360 degree feedback on Healthwatch York activity is invited from all key stakeholders annually.

INDEX

Section 1: To be completed six monthly

Section 2: To be completed six monthly

Section 3: To be completed six monthly

Signature on behalf of Provider		
Signature Siân Balsom	Name Siân Balsom	Date 10/05/16

SECTION 1: Service Provided (Quarterly Updates) 01/10/15-31/03/16

What have been the main focus areas of Healthwatch York during the last six months?

Qtr 3

- Published our report on discharge from hospital and other health and care settings.
- Undertook 7 care home visits, consulting with 42 residents
- Developed a survey looking at access to GP services and publicised this widely, with York People First developing an Easy Read version with specific questions about annual health checks and accessible information
- Launched our dedicated signposting section within our Autumn magazine
- Worked with Kyra to develop a survey looking at antenatal services and promoted this widely
- Held 26 information stands
- Developed our workplan survey for release in January
- Developed plans with City of York Council to involve the Young Inspectors in looking at GP services
- Our readability volunteers reviewed York Hospital's new accessible parking information leaflet, and made suggestions for improving it
- Developed an introduction to PLACE (Patient Led Assessment of the Care Environment) training session for Healthwatch and provider volunteers

Qtr 4

- Put out a press release calling for people's views following the closure of Bootham Park Hospital
- Published our report "[Bootham Park Hospital: What next for mental health in York?](#)"
- Undertook 9 care home visits, consulting with 40 residents

- Began analysing over 200 responses to the GP survey, including 36 Easy Read responses, as well as receiving the results from the Young Inspectors visits
- Published our workplan survey and promoted this with our winter magazine
- Held 37 information stands
- Held 6 workshops for over 300 children as part of the Rock Challenge event at the Barbican
- Our readability volunteers reviewed York Hospital's postural hypotension, trans-anal surgery, and biosimilars leaflets and letters, and made suggestions for improving them
- We spent a day with Rhian Wells, Citizen Insight Policy Lead at Department of Health, to help colleagues understand the role of local Healthwatch, and what a 'typical day' might look like
- Delivered two PLACE training sessions for Healthwatch York volunteers and other lay assessors
- Worked with Tees, Esk and Wear Valley NHS Foundation Trust on the first Exchange event on 31st March, beginning conversations about the future of mental health services in York and the wider area
- Held a development day with volunteers

Key Performance Indicators to include:

- The impact of Healthwatch activity on community / commissioners / service providers – including progress towards Public Engagement Reports, involvement in key strategic meetings.
- Feedback mechanisms used by Healthwatch to inform participants and the wider public on the outcomes of the issues covered by Healthwatch.
- Communication and Reach - evidence of public, patient, carer and user-group engagement with / participation in Healthwatch
- Financial / Spend monitoring
- e.g. The number, frequency and type of methods used by the Host to engage with individuals, organisations and groups. (captured in quarterly Information and Signposting Reports)
- The outcomes of any visit to Health and Social Care premises in York.

What progress has been made during the last quarter in respect of the above?
Have you identified any barriers to achievement of agreed outcomes?

For more details regarding our engagement work, please see the attached engagement calendar, giving details of all events we have held and participated in.

During strategic meetings, both Healthwatch York staff and volunteer representatives complete Reps Reports. These, along with information about Healthwatch York activity, and wider health and care issues form a monthly bulletin for partners and volunteers which is also publicly available. For more details on these bulletins (monthly except December) please follow these links; <http://www.healthwatchyork.co.uk/wp-content/uploads/2016/04/March-2016-bulletin.pdf>
<http://www.healthwatchyork.co.uk/wp-content/uploads/2014/10/February-2016-bulletin.pdf>
<http://www.healthwatchyork.co.uk/wp-content/uploads/2014/10/January-2016-bulletin.pdf>
<http://www.healthwatchyork.co.uk/wp-content/uploads/2014/10/November-2015-bulletin.pdf>
<http://www.healthwatchyork.co.uk/wp-content/uploads/2014/10/Oct-2015-bulletin.pdf>

The impact of our work on wheelchair services, as requested by this committee, has led to significant change across the four North Yorkshire Clinical Commissioning Groups. As a result of our report, and their own review of services, there have been two rapid improvement events highlighting actions to be taken in 30, 60 and 90 days to improve experience. NHS Vale of York Clinical Commissioning Group has now commissioned us to establish a regular forum for users of the community equipment and wheelchair service across North Yorkshire.

We are still seeing the impact of our work on access to services for Deaf people. Following on from the report, a further complaint reached us which we asked permission to forward on to the provider. As a result, further work has been done with staff to improve awareness of how to book interpreters and support Deaf patients.

We developed an introduction to PLACE due to feedback previously reported by our volunteers regarding inconsistency. We will be evaluating the benefit of this work during the course of this year.

One of the barriers to progressing the recommendations in our reports has been the lack of a firm sub structure under the Health and Wellbeing Board to take forward some of the recommendations made. For example, without a Board overseeing work around “Making York a great place to live for older people” or the health inequalities agenda there is no obvious place for our recommendations around Loneliness to go. There was to be a new working group on Loneliness, in line with the Health and Wellbeing Strategy commitment to this area of work, but due to a number of key personnel changes this has not met since its initial formation.

Similarly there has been no straight forward mechanism for progressing the recommendations made in our reports on discrimination against disabled people, or around discharge from health and care settings. However, we are hopeful that the JSNA / Health and Wellbeing Strategy meeting, and the refreshed focus on the Health and Wellbeing Board substructures will provide additional clarity.

Outcomes of visits to Health and Social Care premises in York

Our care home visits contributed to and enhanced 16 City of York Council care home reports.

Partner Programme

We have 32 voluntary and community sector organisations who are signed up as Healthwatch York partners, and 2 pharmacy partner organisations. We continue to encourage organisations working with seldom heard groups to apply.

Volunteers

We currently have 35 volunteers covering a range of volunteer roles. These include Representatives, Community Champions, Enter & View, Care Home Assessor, Research, Marketing and Communications, Readability Panel, and Leadership Group members.

For more information about how our volunteers feel about being part of Healthwatch York, please see these quotes about their experiences;
<http://www.healthwatchyork.co.uk/wp-content/uploads/2014/10/Quotes-from-volunteers.pptx>

Engagement

Community engagement has taken place at a variety of events throughout the city.

We have maintained our regular outreach posts, with monthly drop-ins at Lidgett Grove, St Sampsons, Sainsbury's Monks Cross and Spurriergate Centre, and regular participation with Food and Fun at Clements Hall. This means our volunteers have established a presence within community venues, becoming a familiar, welcome presence

1 quarterly magazine produced and distributed by post to 42 organisations and 311 individuals and by email to 212 organisations and 616 individuals, as well as being available through our website, and distributed at our information stands at community venues

@healthwatchyork had 1,584 followers as at 31 March 2016, continuing a steady increase at around 1 new follower a day

We have also encouraged Healthwatch England to take a more proactive approach to engagement through their committee meetings. We were the first local Healthwatch to ask for a stall to share information about our work when the Healthwatch England committee meeting came to York on 26th February 2016:

Hello Sian,

I wanted to say thank you very much for taking the initiative to bring along some of your reports and documents, this was the first time anyone had asked and displayed their work during a Committee meeting and I had a number of people reflect that often having a physical copy and being able to speak to the project lead about what has been written and methods etc is useful.

Many thanks again and definitely something we will be looking to do at other meetings.

Kind regards,

Esi

Esi Addae
Committee Secretary

Logging issues

- 164 new issues were logged in this half year. This includes over 40 comments received following our call for information regarding Bootham Park Hospital's closure. The majority are still received either direct from the public or via a third party, relating to individual's experiences in health and care.

Area / Provider /	Comment	Complaint	Compliment	Concern	Signposting	Total
YAS		1		2	1	4
Other	3	2	1	5	2	13
Social care	1	3		6	3	13
Not York	1	3		1	6	11
Mental health	26	3		21	13	63
Care home				3	2	5
GP	4	11		3	4	22
Dentist				1	2	3
Pharmacy		1				1
Children					1	1
YTH	6	11	1	7	3	28
Total	41	35	2	49	37	164

- We received 36 reviews through our feedback centre.

Themes and trends from the log

Social care – 7 items on the log related to information, advice, rights and access to services; 5 related to awaiting assessment, both for social care and continuing care; 5 related to challenges with making changes to care plans, including 3 regarding moving from a care home to a care home with nursing; 2 related to poor care provision, both involving home care

Hospital – 9 items related to A&E services, 6 about discharge from hospital; 1 relating to physiotherapy, noted due to further issue raised under Other

Dentists – 2 items relating to rights to access services, including one situation where patient has been told they will need to pay privately for treatment not available on the NHS – highlighted because there was a similar issue in the previous 6 months, and there are nationally emerging concerns over access to dentists

YAS – 1 item regarding perception of NHS 111, 1 regarding poor attitudes towards a young person with autism, 1 concern regarding paramedic's suggested course of treatment

GPs – 2 items relating to failure to provide BSL interpreters at 2 different surgeries; 2 items regarding refusal to visit 2 different patients with ME at home both indicating ME patients do not on principle get home visits even if bed bound; 2 people signposted to York Advocacy for support with making a complaint

Other – 2 items relating to wheelchair services; 2 relating to End of Life care; 1 item regarding MSK services and access to physiotherapy; 1 relating to public safety concern; 1 issue regarding transport and 1 regarding the library both relating to failure to make a reasonable adjustment; 1 regarding NHS Vale of York Clinical Commissioning Group's gluten free voucher scheme

Signposting and advice

We continue to record signposting activity through the issues log. We continue to find that both our Directory and our guide to mental health and wellbeing are very popular. We understand these are being used by a number of GP practices, pharmacies, and City of York Council staff, schools, and other voluntary groups to signpost customers to support.

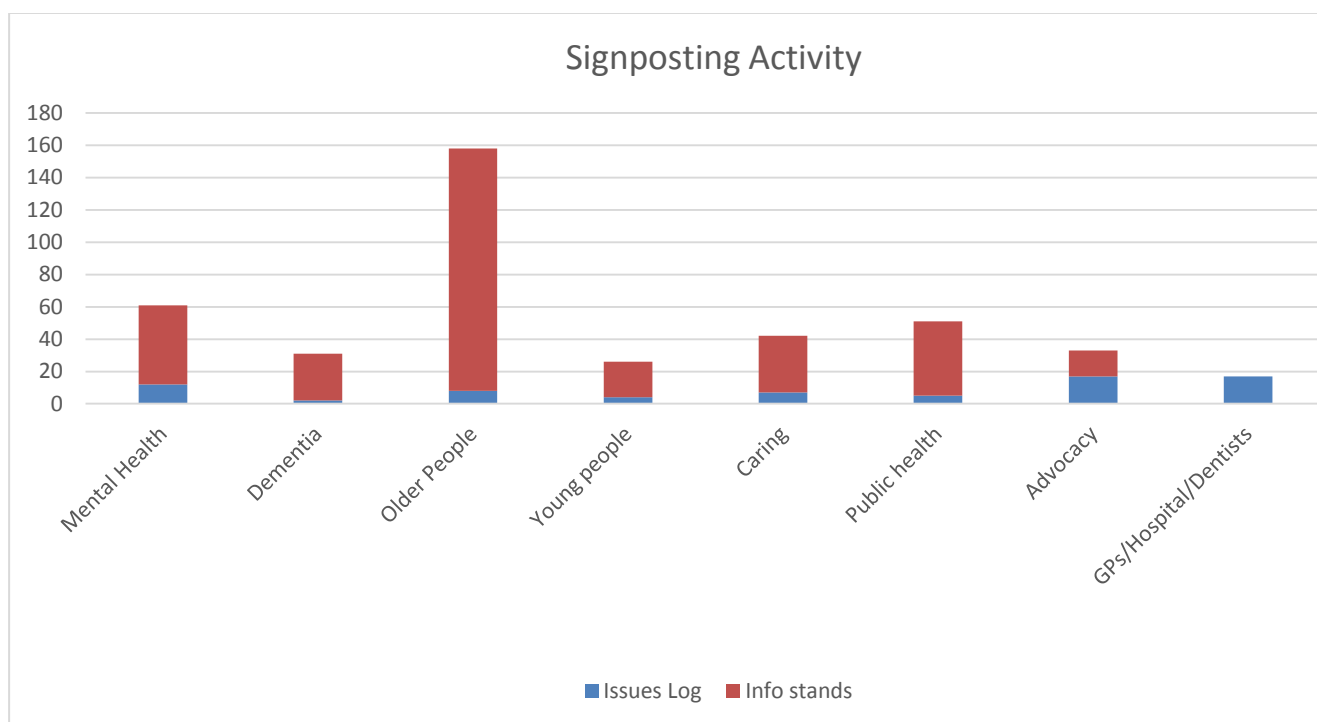
We continue to use our magazine to improve public awareness of services available to them. Our Autumn and Winter magazines featured information on a wide range of health and care services and initiatives, including;

- Publicising the Tees, Esk and Wear Valley NHS Foundation Trust Helpline number following the closure of Bootham Park Hospital
- Guidance on choosing a care home and finding out about the quality of care services
- York Timebank
- Local Children's Centres
- Social prescribing
- Being 'Sugar Smart'

- The Herbert Protocol
- Pharmacy First
- The Home Library service

The magazines also include dates of city meetings including NHS Vale of York Clinical Commissioning Group’s Governing Body meeting, Health OSC and the Health and Wellbeing Board.

We have improved our recording of signposting information. Over the past 12 months, we have given out information as follows;



This signposting data includes signposting recorded through our issues log and signposting completed at information stands.

Strategic Impact

What future improvements or developments do you expect/hope to implement in the next quarter?

- We will be undertaking further Care Home Assessment visits.
- We will be gathering information for our Access to GP Services report
- We will be updating our Mental Health Guide having secured funding early in quarter 1, 2016

- We will be holding monthly Community Equipment and Wheelchair Services, funded by NHS Vale of York Clinical Commissioning Group
- We will be inducting a new staff member to support this new forum
- We will be continuing to move our data onto the Healthwatch England developed CRM system, improving reporting at national level
- We will be releasing a 3rd edition of our Health and Social Care Directory
- We will be escalating our national recommendation from the Bootham Park Hospital report to Healthwatch England

SECTION 2: Staff training and development / Healthwatch Volunteers			
Details of all training courses undertaken in the last six months: To update			
Course title	No's Of Staff / volunteers Attended	Refresher	
		Yes	No
• PLACE training	7v, plus 1 member of York Hospital staff and 1 lay assessor from Nuffield Hospital		✓
• Volunteer Induction	9v		✓
• Enter & View	1v		✓
• Disability Awareness Training	4v		✓
• Dementia Friends awareness session	13v 2s	✓ for some	First time for others

- Please provide a brief update on the roles / achievements of staff and Healthwatch Board members during the last quarter.

Carol Pack, Information Officer, has led on our information work, including our quarterly magazine, and our monthly volunteer and partner bulletin. This involves significant amounts of work to very tight deadlines. Carol also leads our Care Home Assessor programme, including training volunteers and accompanying them on their first visits. She has established quarterly meetings for this role, increasing information sharing, and helping resolve any issues or concerns volunteers have. Over the past six months Carol also led on developing our first "Preparing for PLACE" training session, to support volunteers involved in Patient Led Assessments of the Care Environment (PLACE) to be better equipped for their work.

Helen Patching, Project Support Officer, continues to lead our work on issues log reports to partners. She has begun to look at how we gain more detailed feedback from commissioners and providers regarding action taken following our sharing of issues. Helen has also worked to gain greater Healthwatch England involvement with transferring our records onto their approved database system, CiviCRM. She also provides administrative support around care home assessment.

Barbara Hilton, Project & Volunteer Development Officer, has led on events logging and attendance at community events. She also continued to update our database of interested organisations. She has been the key contact for support to our Community Champions, and continues to hold quarterly meetings for these volunteers to share best practice and discuss different approaches to starting conversations with members of the public. Barbara has now started to look at arranging 1-2-1 meetings with all our partners, to make sure we continue to build on this approach to reaching more people, especially those who may face barriers to their full inclusion.

Siân Balsom, Manager, has led our work around the closure of Bootham Park Hospital. She attends a wide range of strategic meetings, maintaining the Healthwatch presence at Health and Wellbeing Board and other partnership boards within the City of York area, and representing patient voice on the Vale of York CCG Governing Body. She also represented Healthwatch York at the Healthwatch England committee meeting held in York in quarter 4.

John Clark, our Chair, has continued to chair our Leadership Group meetings, creating an helpful and supportive environment within which to discuss the challenges of delivering a successful Healthwatch. He also chairs our Assembly meetings, ensuring volunteers, partners and key stakeholders have opportunity to debate key issues in health and social care, and raise matters of concern or interest.

Staff Support	
How often are staff meetings held?	There have been 4 staff team meetings this period, plus 2 full staff team meeting for all York CVS staff. We also now have weekly start the week meetings with York CVS colleagues.
How often do staff receive supervision from a senior?	Every 6-8 weeks.
How often are staff formally appraised?	We have an annual performance development review system, which involves a full annual review, and quarterly progress checks.
Number of staff appraised in last period:	0 (due end June 2016)
Complaints/Commendations	
How many informal complaints have been received?	0
How many formal complaints have been received?	0
Further detail: We are not supporting people to make complaints but are signposting these to the right organisations, and recording issues people raise with us. See issues log attached for more details.	

Please list any additional details/comments/recommendations that you wish to make.

Since the cut to our funding last year, the need to secure additional funding has a significant impact on a very small organisation like ours. We are very mindful of the challenging financial situation all local statutory partners find themselves in, but cannot continue to do everything people want us to do without additional capacity. Many other local Healthwatch have secured additional funds through, for example, local Vanguard work, enabling them to support engagement with the public on transforming the health and care system. In direct contrast we have had to say no to some additional activities as we simply cannot be everywhere we are asked to be. These challenges include engaging with the new Sustainability and Transformation Plan work now beginning across the 6 CCG areas covered by this plan locally, and getting involved with the Integration and Transformation Board (ITB) work. Thankfully, our connections through York CVS enable us to be involved at a distance with the ITB.

The delay in extending our contract also had a significant impact on the team. York CVS were very supportive in not beginning formal redundancy processes but understandably this did lead to speculation on the future of the project and potential implications for the staff team.

What we've been told over the past 6 months

Healthwatch York A

Event Categories

Information Event

Volunteer Development

Staff Development

HW Visits

Representing

HW Meetings

Activity Log Key

any activity where we provide information about Healthwatch York and other agencies that provide support, advice or information. These also appear on our information distribution log from October 2015.

Includes training, meetings, supervision, 1-2-1 sessions, and time HW volunteers spend working with us

includes training, meetings, supervision, 1-2-1 sessions, and York CVS staff meetings, and peer learning

includes Enter & View visits, PLACE assessments, Care Home Assessor work

includes all occasions where we are being represented. This is usually as a member of the meeting, as a member of the audience, or a 1-2-1 meeting with other agencies in the city, but also includes press activity.

this includes all activity we organise, from our regular meetings like the Assembly and our Annual Meeting, to specific workplan activity like focus groups, and 1-2-1 meetings with people sharing their experiences

Healthwatch York Activity Oct-Mar 15-16										
Date	Event	Ward	Staff	Vols	Nº at event	Nº engaged	Nº signed-up	Total staff hours - decimal	Total vol hours - decimal	Category of event
04.01.16	Sainsburys café		CP	JB	220	20	1	4	3.5	Information event
04.01.16	Care home planning meeting		HP, CP					2		HW Meetings
05.01.16	Leadership Development Programme		SB					7		Staff Development
05.01.16	Spurriergate Centre			KW, CH	100	30			5	Information event
06.01.16	Lidgett Grove Community cafe			FB	40	30			2	Information event
07.01.16	Vale of York Governing Body		SB					5		Representing
07.01.16	Meeting with Sue Symington, Chair of York Hospital		SB					1		Volunteer Development
08.01.16	Tutorial for Leadership Development first assignment		SB					1		Staff Development
08.01.16	Chair and Manager Catch Up		SB	JC				1.5	1.5	Staff
11.01.16	Focus Groups JRF Dementia Project		SB	FB, LM				2	4	Representing
11.01.16	Volunteer in HW office			LS					3	Volunteer Development
11.01.16	Care Home Assessors meeting		CP, HP	FB, JCh, CH, DM, JS				4	10	HW Meetings
11.01.16	Leadership Group Meeting		SB, CP	JC, GC, LF, JS				4	8	HW Meetings
12.01.16	Supervision		SB/CP					3		Staff
12.01.16	Multi-Agency Accelerated Discharge Event			PG					2	Representing
12.01.16	Team Catch Up development day		SB, HP, CP, BH					8		Staff Development
13.01.16	Meeting re York Cares Work Programme		SB/J							Volunteer Development
13.01.16	Meeting with Tracy Wallis to discuss HW York report recommendations and the HWB Strategy/ISNA meeting		SB					1		Representing
13.01.16	Meeting to discuss intermediate care with Paul Henry and Kat Macann. Vale of York CCG		SB/KM/PH					1		Representing
13.01.16	Meeting with Jason Stamp, North Bank Forum, about HWNY		SB							Representing
14.01.16	Meeting with Su Sear regarding Integrated Wellness plans		SB					2		Representing
14.01.16	Urgent Care Working group		SB							Representing
14.01.16	Meeting with Lindsay Springhall regarding progress with wheelchair work		SB/LS							Representing
15.01.16	Meeting with representatives from organisations working in mental health regarding Bootham Park Hospital work		SB							Representing
15.01.16	St Sampson's			FB, KW	300	50			9	Information event
18.01.16	Volunteer Development Day		SB, BH, CP, HP	SA, FB, LB, JB, JCh, KC, JC, MC, GG, JG, PG, CH, CL, CM, AM, LM, DM, LS, JS, JSB, KW				24	105	Volunteer Development
19.01.16	Supervision		SB/HP					4		Staff
19.01.16	Conversation with volunteer about dementia work		SB							Volunteer Development
20.01.16	Roko Gym			LB, CH, FB	100	20				Information event
20.01.16	Meeting with Sally Hutchinson, Age UK York, regarding Patient Experience Steering		SB					1		Representing
20.01.16	Health & Wellbeing Board		SB/BG					2		Representing
20.01.16	Health & Wellbeing Board		SB					2		Representing
25.01.16	Staff meeting		SB, CP, BH, HP					8		Staff Development
25.01.16	Volunteer in HW office			LS					3	Volunteer Development
25.01.16	Mental Health & Learning Disabilities Partnership Board		SB					2		Representing
26.01.16	Healthwatch Assembly		SB, CP, BH					6		HW Meetings
26.01.16	VCS forum OP & LTC			DM					2	Representing
27.01.16	Radio York appearance - hospital finances and Bootham report		SB					1		Representing
27.01.16	Supervision		SB/BH					4		Staff
27.01.16	Meeting with Rita Santos, Centre for Health Economics		SB							Representing
27.01.16	Meeting with Hannah Crookes, North Bank Forum, regarding Healthwatch North Yorkshire		SB					1		Representing
28.01.16	Fulford Church			JS		10			3	Information event
28.01.16	Meeting with member of the public regarding ongoing		SB							HW Meetings
29.01.16	Safeguarding Adults Board Development Day		SB/MH					7		Representing
30.01.16	Holy Redeemer church			FB	100	40			2	Information event
01.02.16	Volunteer in HW office			LS					4	Volunteer Development
01.02.16	Sainsburys café			JC		5				Information event
01.02.16	Volunteer meeting		SB, HP	SA, JAB, JB, JCh, PG, JG, LM, CM, DM, LP, LS, KW				6	24	HW Meetings
02.02.16	Volunteer Interview		CP, HP					2	1	Volunteer Development

02.02.16	Leadership Gp		SB							HW Meetings
02.02.16	Spurriergate Centre			KW, CH	100	8			5	Information event
03.02.16	Lidgett Grove Community cafe			FB	45	25			2	Information event
03.02.16	Meeting with Sarah Armstrong		SB/SA					3		HW Meetings
03.02.16	HW York Interview		SB/BH	SF						Volunteer Development
03.02.16	Communication strategy meeting		SB/CP	LW						HW Meetings
04.02.16	Vale of York Governing Body meeting		SB					7		Representing
04.02.16	York Hospital PLACE training meeting		CP	LP				1	1	HW Meetings
04.02.16	Fairness Forum			LP					2	Representing
05.02.16	Acomb library			JG		60				Information event
08.02.16	Volunteer in HW office			LS					2	Volunteer Development
08.02.16	Ophthalmology patient group			LP						Representing
08.02.16	Focus Group/JRF Dementia		SB	FB, LM				2	4	HW Meetings
08.02.16	Catch up about dementia Work		SB	LM				1	1	Volunteer Development
09.02.16	Pathfinder MH Conference			KW, FB	100	40			8	Information event
09.02.16	Priory medical Stakeholder		SB					2		Representing
09.02.16	Meeting about Young Inspectors GP work with Jennie Noble. CYC		SB					1		HW Meetings
10.02.16	Volunteer in Healthwatch office			JG					2.5	Volunteer Development
10.02.16	NELLI			KW, CH					4	Information event
10.02.16	NY&Y Crisis Care Concordat reference Group		SB					2		Representing
10.02.16	Heath and Wellbeing Board Development Session		SB					2		
10.02.16	Coaching for Leadership Development Programme		SB					1.5		Staff Development
11.02.16	EDS2 Conference			LP						Representing
11.02.16	West Offices		BH	FB, JC, CL	50	18		2	12	Information event
15.02.16	Meeting with Volunteer		SB	SF						Volunteer Development
15.02.16	HW Intro		SB/PL					1		Staff
16.02.16	West Offices		BH	JG, JB, LP, LM, CH	75	22		2	20	Information event
16.02.16	Meeting re Yorkshire & Humber Quality Surveillance Group with Julie Finch. NHS England		SB							Representing
17.02.16	Meeting with volunteer regarding work		SB	CL				1	1	Volunteer Development
18.02.16	Meeting with potential volunteer		SB	MR				1	1	Volunteer Development
19.02.16	St Sampson's			KW, FB	150	25			9	Information event
19.02.16	Meeting with volunteer regarding work		SB	TT				1	1	Volunteer Development
19.02.16	Volunteer Interview		SB/BH	SS						
22.02.16	Volunteer in HW office			LS					2	Volunteer Development
22.02.16	Leadership Group		SB, CP	JC, LP, GC,				4	8	HW Meetings
22.02.16	Meeting with Steve Wright, TEWV, regarding the Mental Health symposium		SB					2		Representing
22.02.16	Campaign Planning discussion		SB, CP	LW				2	1	Staff
22.02.16	Leadership Group pre meet		SB, SA	JC				1	0.5	Staff
23.02.16	Volunteer Interview							2	1	Volunteer Development
23.02.16	PLACE Training		CP	LP, JS				3	6	Volunteer Development
23.02.16	HW Team Meeting		SB, CP, HP, BH					6		Staff Development
23.02.16	First meeting of JSNA/Joint Health and Well being Strategy Steering Gp		SB					2		Representing
23.02.16	Health and Adult Social Care Policy & Scrutiny Comm Mtg		SB					3		Representing
24.02.16	Fulford Church			JS	45	18	2		3	Information event
24.02.16	Hospital Board meeting			LP						Representing
24.02.16	Supervision with Catherine		SB					1.5		Staff
25.02.16	HW England Committee - meeting for Chief Officers and Chairs with local Healthwatch		SB					4		Representing
25.02.16	Training & Development sub Gp		SB					2		Representing
26.02.16	HW England Committee meeting		SB	LP, JB, LB, DM				6	20	Representing
29.02.16	Volunteer in HW office			LS					2	Volunteer Development
29.02.16	Haxby Group PPG meeting			KC					2	Representing
29.02.16	Rhian Wells visiting from DH, to shadow		SB					7		Representing
29.02.16	Meeting with TEWV - working group for engagement events		SB					1		Representing
01.03.16	Spurriergate Centre			KW	100	16			4	Information event
01.03.16	Volunteer interview		HP	LP				1	1.5	Volunteer Development
01.03.16	Volunteer interview		HP, BH					2		Volunteer Development
01.03.16	Volunteer in HW office			CL					3	Volunteer Development
01.03.16	Leadership Development programme		SB					7		Staff Development
02.03.16	Volunteer in HW office			JG						Volunteer Development

02.03.16	Meeting with Helena Nowell, CCG, about information and		SB					1		Representing
03.03.16	Vale of York Governing Body meeting		SB					5		Representing
03.03.16	Meeting with Sarah Armstrong		SB							Staff
04.03.16	Rock Challenge, Barbican			KW, JB, JS, FB, GG, CH						Information event
04.03.16	Adult Safeguarding Board		SB					3		Representing
07.03.16	HW Reps meeting		SB	LP, DM, JB				2	6	HW Meetings
07.03.16	Meeting with Tom Cray		SB							Representing
08.03.16	Volunteer meeting		SB, BH, CP	LP, LB, LS, SF, GG, KC, JAB, DM, CH, LM, PR, JB, CM, SA, FB				7	30	HW Meetings
08.03.16	Meeting End of Life KS		SB							Representing
08.03.16	Volunteer meeting		SB							HW Meetings
09.03.16	NELLI			KW, CH	50	10			4	Information event
09.03.16	Meeting with Martin Farran, Director of Adult Social Care, City of York Council		SB						1	Representing
09.03.16	Health and Wellbeing Board Meeting		SB							Representing
10.03.16	HW England - Yorkshire & Humber Network meeting		SB							Representing
11.03.16	Regional Health & Wellbeing Board Networking Event SH		SB							Representing
14.03.16	DAA Meeting - with the Focus Group participants		SB							Representing
15.03.16	Volunteer in HW office			CL					3	Volunteer Development
15.03.16	Bi-annual meeting Chair of HWBB TW		SB							Representing
16.03.16	Fulford Church			JS	30	10	2		3	Information event
18.03.16	St Sampson's			FB					4	Information event
19.03.16	Holy Redeemer church			FB					2	Information event
21.03.16	Meeting SA		SB							Staff
21.03.16	Mental Health and Learning Disabilities PB		SB							Representing
22.03.16	Volunteer in HW office			LB					4	Volunteer Development
23.03.16	Volunteer in HW office			JG					3	Volunteer Development
29.03.16	Spurriergate Centre			KW, CH					5	Information event
30.03.16	Volunteer in HW office			CL					3	Volunteer Development
30.03.16	Lidgett Grove Community cafe			FB	65	23			2	Information event
30.03.16	Meeting with TEWV - working group for engagement events		SB					1.5		Representing
30.03.16	Meeting with Sharon Stoltz, Director of Public Health at City of York council, and Sarah Armstrong, York CVS		SB					1.5		Representing
31.03.16	TEWV Exchange Event, Priory Street		SB	JB	25	10		3	3	Representing
					1695	490	5	227.5	394.5	

Healthwatch York Activity Oct-Mar 15-16									
Date	Event	Staff	Vols	No at event	No engaged	No signed-up	Total staff hours - decimal	Total vol hours - decimal	Category of event
01.10.15	Vale of York CCG Governing Body meeting	SB		30			3.5		Representing
01.10.15	Eye Department Partnership Board		KB					2	Representing
01.10.15	50+ festival-Clifton library		KW, LB, CH	40	6			12	Information
01.10.15	Acomb ward meeting		KW					2	Information
01.10.15	HW Contract Monitoring Meeting	SB, MM					2		Representing
02.10.15	Staff supervision meeting	SB, CP					3		Staff
02.10.15	York Hospital Quality Summit with CQC and Monitor	SB					3		Representing
05.10.15	Volunteer Interview	HP, CP	SA				2	1	Volunteer Development
05.10.15	Volunteer meeting	SB, HP, CP	FB, JAB, LB, JB, MC, KC, PG, CH, CM, DM, JG, LP, LS				3	13	Volunteer Development
05.10.15	Dementia Friends Training	SB, HP, CP	FB, JAB, LB, JB, MC, KC, PG, CH, CM, DM, JG, LP, LS				3	13	Volunteer Development
06.10.15	Spurriergate Centre		KW, CH	100	13			7	Information
06.10.15	Voluntary Sector Forum	SB					2		Representing
06.10.15	HW Assembly Pre meeting	SB					1		Representing
06.10.15	Healthwatch Assembly	SB, CP, BH	FB, JAB, JB, MC, LM, LP				6	12	HW Meetings
07.10.15	Lidgett Grove Community café		FB, LB	40	35			4	Information
07.10.15	York Diabetes Support Group	CP		15	15		2		Representing
08.10.15	Meeting with Fiona Bell re PPE	SB					1		Representing
08.10.15	Radio York interview about York Hospital CQC report	SB					0.5		Representing
08.10.15	Meeting with individual about support for adults with ADHD						1.5		HW Meetings
08.10.15	MH Awareness day-Explore		FB, JB, LS	100	47	3		12	Information
09.10.15	Tea & talk event for World Mental Health Day	SB, CP (plus YCVS staff team members)					2		Staff Development
09.10.15	MH Awareness Day-York Univ		FB, JB, LS, GG	300	91	10		20	Information
09.10.15	Meeting with individual regarding complaint about treatment	SB					1		HW Meetings
12.10.15	Meeting of Minds & Voices Dementia Forum	SB					2.5		HW Meetings
13.10.15	Leadership Development	SB					7		Staff
14.10.15	Meeting with Kate Bryan, Foundation Housing	SB							HW Meetings
14.10.15	Meeting with Contract Lead	SB	GC						HW Meetings
14.10.15	NELLI		KW, CH	60	15			4	Information
15.10.15	Converge		FB						Information
16.10.15	St Sampson's		FB, JG, KW					9	Information
19.10.15	MS awareness training for care managers	HP	JC				2.5		Representing
19.10.15	HWY Leadership Group	SB, CP	JC, GC, LF, LP				4	8	HW Meetings
20.10.15	Staff Meeting	HP, SB, BH					2		Staff
20.10.15	Health OSC	SB					3		Representing
20.10.15	Visit to Broadway Lodge Care	CP	CH				5	5	HW Visits
21.10.15	Health and Well Being Board	SB					3		Representing
21.10.15	Team meeting	HP, SB, CP, BH					4		Staff
23.10.15	Research volunteer meeting	SB	JG, FB, LB, IM				2	8	Volunteer Development
26.10.15	Health and Well Being Board	SB					2		
27.10.15	Wheelchair Service Improvement event	CP					7		Representing
27.10.15	Update engagement calendar	SB					0.5		
27.10.15	Travel to London	SB					3		
27.10.15	Tube to Parliament	SB					1		
27.10.15	HWE Annual Report launch	SB					2		
28.10.15	Meeting with Linsay	SB					2.5		
27.10.15	Travel back from Parliamentary Reception	SB					3.5		
28.10.15	Visit to The Lodge Care Home		FB, JG					10	HW Visits

29.10.15	Call - Fliss Wood	SB					0.5			
29.10.15	St Clements		KW					2	Information	
02.11.15	Meeting with Judith Bromfield	SB						1.5		
02.11.15	Sainsbury's		JC					4	Information	
02.11.15	VOYCCG Winter Planning Group Teleconference calls	SB						1		
03.11.15	Volunteer meeting	SB, HP, BH	JB,LP,MC,CM, SA,PG,KB,K W.CH.LB.FB					5	22	Volunteer Development
03.11.15	MH forum	SB						2		
03.11.15	JSNA Steering Group Meeting	SB						2		
03.11.15	Volunteer meeting	SB						2		
03.11.15	Supplier Engagement Event - Intergrated Wellness	SB						2		
03.11.15	Spurriergate Centre		KW, CH	100	12	1			5	Information
04.11.15	Self Advocates Forum re: Access to GP Services	SB						2		
04.11.70	Fairness Forum, YH		LP						2	Representing
05.11.15	Vale of York Governing Body	SB						7		
05.11.15	Meeting with Lisa & Yvonne from	SB						1		
04.11.15	Lidgett Grove Community café		FB,LB	82	32				3	Information
06.11.15	Leadership Development	SB						8		
05.11.15	Acomb ward meeting		FB						2	Information
05.11.15	Visit to Connaught Court care home		FB, JC						8	HW visits
09.11.15	Meeting with Sally Burns	SB						1		
09.11.15	HW Induction Part II	SB						3		
09.11.15	VOYCCG Winter Planning Group Teleconference calls	SB						1		
09.11.15	Volunteer Induction training	CP	SA, KC, MC,					3	9	Volunteer Development
09.11.15	Volunteer Induction training DDA	SB	SA, KC, MC, CH					2	8	Volunteer Development
09.11.15	YorOK		PG						2	Representing
10.11.15	DAA meeting	SB						3.5		
10.11.15	Update Connected Support	SB						3		
10.11.15	Dementia Action Alliance Meeting	SB						3		Representing
11.11.15	Wilf Ward meeting	SB						2		
11.11.15	Call with Liz	SB						3		
11.11.15	Bootham Park - Past, Present & Future	SB						2		
11.11.15	NELLI		KW,CH						4	Information
12.11.15	St Clements		KW						2	Information
12.11.15	Clifton Medical Practice merger meeting	HP	KW	200				3	3	Representing
12.11.15	Urgent Care Working Group	SB						2		Representing
17.11.15	Volunteer Interview	HP, CP	LW					2	1	Volunteer Development
17.11.15	Visit to Lifestyles Care Home		JG						3	HW Visits
17.11.15	Ophthalmology programme board		LP						2	Representing
20.11.15	St Sampson's		FB	250	150				3	Information
23.11.15	Visit to Birchlands Care Home	CP	GW					6.5	6.5	HW Visits
24.11.15	Visit to Minster Grange Care Home		JS, CH						10	HW Visits
25.11.15	Everybody's business (young peoples' mental health)	SB							2	Representing
26.11.15	St Clements		KW						2	Information
01.12.15	Volunteer meeting	SB, CP, HP								Volunteer Development
01.12.15	Spurriergate Centre		KW, CH	100	16				5	Information
01.12.15	Health And Social Care Policy and Sructiny Committee	SB						3		Representing
01.12.15	Yorkshire & Humber Academic Health Science Network	SB						5		Representing
02.12.15	Health and Well Being Board	SB							2	Representing
02.12.15	Lidgett Grove Community café		FB	60	45				2	Information
03.12.15	Vale of York Governing Body	SB						3		Representing
04.12.15	Safeguarding Adults Board Meeting	SB						2		Representing
08.12.15	Acomb ward committee	CP		12	6			1.5		Information
09.12.15	Team meeting	BH, SB, CP, HP						8		HW Meetings
10.12.15	Fairness & Equalities Board	SB								Representing
10.12.15	Urgent Care Working Group	SB								Representing
11.12.15	HWY editorial meeting with Neil	CP						1		HW Meetings
14.12.15	Dementia study, Lidgett Grove	SB	LM, FB					2	4	HW Meetings

	Q3&4	Budget Q3&4	Difference
Staff Costs (salaries & expenses)	£34,214.71	£33,006.00	-£1,208.71
Volunteer expenses	£1,431.85	£ 500.00	-£ 931.85
Indirect staffing Costs - inc in sal costs (sickness, training time, mat, holiday cover)		£0.00	£0.00
Training & Recruitment	£0.00	£250.00	£250.00
Local Administration (office, sup Licence fee for HW Office)	£13,889.11	£13,792.50	-£96.61
Insurance			
Building			
Office	£13,810.40		
Postage	£74.21		
Stationery	4.50		
Other	£9,931.32	£11,635.00	£1,703.68
(see spread Marketing	£2,628.00		
Website &	£982.99		
Events &	£414.12		
Evaluation	£883.33		
Access Cc	£0.00		
Publicity M	£455.00		
Projects C	£195.00		
Office Equ	£3,997.50		
Irrecoveral	£375.38		
	59,466.99	59,183.50	-283.49

Qtrs 3&4

Staff costs
(salaries & expenses) £34,214.71

Volunteer expenses £1,431.85

Indirect staffing Costs - inc in sal costs
(sickness, training time, mat, holiday cover) £0.00

Training & Recruitment £0.00

Local Administration **£13,889.11**
(office, supplies, mobile phone, insurance)

Other **£9,931.32**
(see spreadsheet)

Total £59,466.99

	Category	Title
1	Hospitals	Good treatment
	Hospitals	Excellent treatment but....
2		
3	GPs	A highly positive experience
4	Hospitals	Luxurious conditions in the orthopaedic dept
	GPs	Very happy with the surgery and staff
5		
	GPs	very patient and pleasant receptionist
6		
	GPs	Seen very quickly and was not rushed.
7		
8	Dentists	Always take time to put you at ease
9	Hospitals	Kind staff on ward 11
	Hospitals	Poor care on ward 14
10		
	GPs	Shabby, uncaring, discriminatory
11		
	Dentists	Fair - in all meanings of the word
12		

- 13 Pharmacies Great independent pharmacy!
 Other It's ok, it's local
- 14
- 15 GPs Hard to contact by phone,hard to get an appoi
 Hospitals Reasonably good but could be a lot better.
- 16
- 17 GPs Excellent
 Hospitals Horrible Waste of Time
- 18
- 19 GPs Good Service at Water Lane
 Hospitals Staff were compassionate, caring & skilled
- 20
- 21 Pharmacies excellent advise and very helpful
- 22 GPs excellent service
 Emergency Care Good service within a reasonable time
- 23

	Pharmacies	Help discussion about a sore eye
24		
25	Emergency Care	Better than A&E, Brilliant
	GPs	Brilliant
26		
	Dentists	Really good service
27		
	Hospitals	Good MRI experience & convenient appointment
28		
	Pharmacies	Knowledge and advice second to none!
29		
30	Hospitals	Cardiac department - fantastic
31	Pharmacies	Polite but unhelpful
	Hospitals	Delay in receiving Physiotherapy
32		
	Dentists	Superb dental practice
33		
	Dentists	Wonderful experience for my daughter
34		

- 35 Other Excellent service all round
- 36 Dentists Quick, efficient, sympathetic service

I have received good treatment from this clinic for the 18 years I have lived in York.

Excellent treatment for the last eight years. Only one concern! After bowel cancer operation, I couldn't convince staff that Parkinson tablets MUST be on time. Our consultant tells us that this is now improving.

From the wonderful receptionists to the equally wonderful doctors it is (almost!!) a pleasure to go there.

Luxurious conditions, like being in an airport and the service was quick.

The GP I have been seeing recently has been very personable and invested in my well-being (Dr Turner-Parry)

went into make an appointment. receptionist went out of her way to try and find an early appointment at a surgery I could easily access

My original appointment was cancelled but I was offered an urgent appointment the next day. I turned up early and was seen straight away. I was listened to and talked through all the possibilities of what could be causing the problem. Left feeling I had been listened to and dealt with in a very professional and friendly manner.

They explain any treatment required in a friendly and professional way.

The staff in ward 11 were very kind and attentive with one of the nurses arranging for a cleaner to visit me at home where I currently I was told I would be discharged after breakfast. At 8pm the evening before a nurse arrived at my bedside with my bag to say I was to be discharged as the bed was needed by someone from A&E. I wasn't in suitable clothes, there was no heating in my flat, my bathroom was covered in blood as I had been taken into hospital by ambulance and there was no-one at home to help me. I refused to be discharged and was transferred to another ward where the staff were much more understanding.

Poor organisation, total anonymity, no GP continuity, long waits for phone to be answered, 2 weeks' wait for non-urgent appointments, active discrimination against M.E. patients, no opportunity to sort out medical problems - only quick prescriptions, often without adequate information, complaints poorly handled, some fairly uncaring receptionists and some extremely arrogant GPs not listening to or accepting patient needs, no concerns for patients' well-being or safety.

At times receptions are too busy to pay attention to newcomers and at times it can take a while to get through on the phone. But calls are returned promptly if you ask to be called back. Mobile phone appointment reminder system. Urgent appointments are done within the day (and often within just a few hours!). My dentist (Mr Duklas) is thorough, gentle, kind and very approachable.

No parking for cars and no/very poor parking for bicycles, though - with no plans to alleviate the latter either. Shame, really!

Friendly, helpful staff. Nice premises. Brilliant opening hours. Brilliant home delivery service (even for urgent emergencies)!!!

Independent advice (no preferred brands, etc.).

Premises a bit haphazard above farmfood's in Clifton Moor. Fair wait for next appointment. No add-on facilities (like to-pay-for yoga/meditation/well-being classes, group sessions, support groups). Therapists good on the whole, but a little powerless in what they can do to support you. NHS only pay for very few sessions, so for a long-term condition not overly helpful.

Every-one there is lovely - helpful and caring, but recently they have become so stretched that it is often WEEKS before you can get a non urgent appointment

Feel that I have spent far too long in the process of getting well. Too much time has been spent on tests and drugs over a 9 year period. We have not got to the root of the problem quick enough. In hind sight there has not been the necessary expertise to handle the simple complaint of Atrial Fibrillation. We have started at the wrong end of the process spending too much time on hospital visits, taking debilitating drugs, causing anxiety, losing working time and money and adding to the hospital expenditure.

Walked in with large blister on thumb and taken care of very quickly

I sat in a room with an incredibly condescending woman who plainly didn't care what I had to say. It didn't matter to her what I consider to be important or what I wanted to get out of the meetings, because she ignored most of it and just addressed two issues, one of which I attended here today as an alternative to my 'usual' GP Practice, very impressed with thorough timely appointment and information

Prior to the merger with Leeds, I found BPH staff were in my experience highly skilled, compassionate, caring. The ward I was on (Ward2) had an ethos of the 3R's. For its age the building was well maintained, it needed repairs just like any other and I found the buildings heritage and grandeur added to the recovery experience. The park setting is wonderful for quiet strolls, the adjacent YTH meant easy

Went in with a rash and was referred to my GP. Knew what the problem was .

came into reception explained I had already been to pharmacy and was seen within ten minutes
3 year old daughter was ill between on Sunday 27th Dec. Following advice from a pharmacist we rang NHS 111 to try and get an urgent GP appointment. We had a call back within an hour, with an appointment made at the Out of Hours Service for 4pm that afternoon. The operator was very helpful, giving us directions and advice on parking. The GP was very helpful and reassuring.

The pharmacist explained clearly what he thought was the cause of my sore eye and how it could well have come about. He explained that I should still be able to continue to wear my contact lenses, and also what to do if the problem became worse. He didn't try to sell me anything as he felt there was no need in this case.

They had read and understood my consultant's wishes that if I had appeared in A&E was to admit

Have extremely kind doctors and I have an rare and complex condition. I can always get an appointment or that they ring me via EMIS.

Kind and courteous, sympathetic and empathetic

My appointment was on time, the dentist, Miss Stacey, and the dental nurse were incredibly welcoming and friendly, everything was explained to me and, for a visit to the dentist, it was a very good experience.

Recently had to have a MRI scan at the hospital. Appointment date was within 3 weeks of referral by my GP and scheduled for Sunday afternoon. This was very convenient as I work full time. There was no wait time on arrival and the whole experience was very easy. very empathetic and knowledgeable support and advice available. Keen to hear more feedback on how symptoms were progressing and information following GP appointment

Cardiac department was fantastic

Wanted to charge Â£3 per blister pack. That's Â£12 per month, which I can't afford, so I now have to go elsewhere.

The operation went well but it took 12 weeks to get Physiotherapy despite two phone calls and a letter. Some patients receive

Physiotherapy soon after their operation but mine was offered only after the follow-up consultation 6 weeks later.

Normal waiting time is 3 to 4 weeks.

It took 2 months of writing before I got a reply that any where answered my concerns.

My dentist, Victoria Poyner is truly the best dentist I have ever had. She engages patients as active and informed partners in their own dental health.

What could have been very traumatic experience was made good! My little girl aged 7 has problems with her teeth and has received absolutely fantastic care.

Friendly and helpful!

I use York Wheels and I cannot speak more highly about the service they provide. I'm grateful to all the drivers and the call centre staff. Able to respond to emergency quickly; explains options clearly and it makes a difference having Classic FM on

Location	Approved	Anonymous	Alert	Source	Rating	Cleanliness	Staff Attitude	Waiting Time	explanation	care	food	Is there a particular member of staff you would single out for special praise?
York	1	1	0		5							
Stamford Bridge	1	1	0		5							
	1	0	0	0	4	3	5	4	5	5		Dr Mc Clure
York	1	1	0	0	5	5		5				
York	1	1	1	0	5	5	5					Dr Turner-Parry and the midwife Sally-Anne, plus reception staff are always helpful.
	1	1	1	0	4	4	5	4				receptionist but there were two on duty and i dont think they had name tags on
	1	1	0	0	5	4	5	5	5	5		Dr Johnathon Anderson
	1	1	0	0	4	5	3	4	5	5		Simon Dench
York	1	1	0	0	5		5					
York	1	1	0	0	1		1				1	
York	1	1	0	0	1	2	2	1	1	1		
York	1	1	0	0	4	4	4	4	5	5		

	Approved	Anonymous	Alert	Source	Rating	Cleanliness	Staff Attitude	Waiting Time	explanation	Quality of care	Quality of food
York	1	1	0	0	5	4	4	5	5	5	
York	1	1	0	0	3	3	5	3	4	4	
	1	1	0	0	3	4	5	3	4	5	
South Milford, Leed	1	0	0	0	3	4	5	4	3	5	3
York	1	0	0	0	5	5	5	5	5	5	No, they were all kind and helpful.
	1	1	1	0	1	4	1	2	1	1	Nurse Helen Lawson and Dr. Muhammed
	1	1	0	0	5	5	5	5	5	5	
	1	1	0	0	5	5	5	5	5	5	5
	1	1	0	0	5	5	5	5	5		Sylvia Graves
	1	1	0	0	5	5	5	5	5		SALLY
	1	1	0	0	4		4	4	4	4	nurse practitioner

Is there a particular member of staff you would single out for special praise?

York

Approved	Anonymous	Alert	Source	Rating	Cleanliness	Staff Attitude	Waiting Time	explanation	Quality of care	Quality of food
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Is there a particular member of staff you would single out for special praise?

York

1	1	0	0	5		5	5	5		
1	1	0	0	5	3	5	5	5	5	5

York

1	0	0	0	5	4	5	3	4	5	
---	---	---	---	---	---	---	---	---	---	--

York

1	1	0	0	5	5	5	5	5	5	Dr Lockett
---	---	---	---	---	---	---	---	---	---	------------

1	1	0	0	5	5	5	5	5	5	
---	---	---	---	---	---	---	---	---	---	--

1	1	0	0	5	5	5	5	5	5	
---	---	---	---	---	---	---	---	---	---	--

1	1	0	0	5					5	Simon
---	---	---	---	---	--	--	--	--	---	-------

1	1	0	0	2	3	4	4		1	
---	---	---	---	---	---	---	---	--	---	--

Malton

1	0	1	0	2	5	4	1	4	2	
---	---	---	---	---	---	---	---	---	---	--

1	0	0	0	5	5	5	5	5	5	
---	---	---	---	---	---	---	---	---	---	--

york

1	1	0	0	5	5	5	5	5	5	5 Victoria Poyner
---	---	---	---	---	---	---	---	---	---	-------------------

	Approved	Anonymous	Alert	Source	Rating	Cleanliness	Staff Attitude	Waiting Time	explanation	Quality of care	Quality of food	
York	1	1	0	0	5		5					Victoria Poyner
York	1	1	0	0	5	5	5	5	5	5		Drivers & call centre staff

Is there a particular member of staff you would single out for special praise?



Health & Adult Social Care Policy & Scrutiny Committee**24 May 2016**

Report of the Chief Operating Officer of the NHS
NHS Vale of York Clinical Commissioning Group
(CCG)

NHS Vale of York CCG Turnaround Action Plan**Summary**

1. NHS Vale of York Clinical Commissioning Group (CCG) has put in place a number of measures to improve the capacity and capability of the organisation to help address the local financial position and return to a sustainable position.

Background

2. The CCG has implemented a Turnaround Action Plan for the organisation. This has focused on decision making, leadership, financial planning and programme delivery.

Turning the Corner

3. The CCG has increased its leadership and senior capacity. This includes a leadership support team and the secondment of an interim Accountable Officer, Helen Hirst.
4. The CCG has increased senior finance capacity, to provide additional focus on Continuing Health Care spend and to support Primary Care Commissioning.
5. The CCG Governing Body have instigated a governance review to ensure our decision making structure is agile and responsive while remaining robust, to enable the organisation to respond quickly to in-year challenges. This includes a restructuring of the organisational risks and risk reporting.

6. The CCG has implemented an action plan in conjunction with the members of its Council of Representatives to improve engagement with our local practices. This has seen the reestablishment of local network groups to discuss and inform commissioning intentions on the Strategic Programmes. The Council of Representatives have been actively engaged on decision making work to support the financial plan.
7. The CCG has developed a challenging operational and financial plan to deliver sustainable finances during 2016-17 with a focus to returning to a balance position and achieving NHS Business Rules by 2019-20.
8. The CCG has re-focused to deliver five strategic programmes (Integration of community based services, urgent care, planned care and cancer, primary care and prescribing) with three areas for continued improvement (prevention, mental health and learning disabilities, and children and maternity).
9. The CCG has established multi-disciplinary teams for the strategic programmes across the organisations, led by a Chief Officer and Clinical Lead.
10. A programme management office (PMO) has been established with revised processes to further strengthen the CCG's effective monitoring of progress against the Quality, Innovation, Productivity and Prevention (QIPP) schemes within each strategic programme. An independent review of processes has been commissioned to ensure these are fit for purpose for the challenging delivery this year.

Next Steps

11. The CCG continues to implement the Turnaround Plan, with a focus on implementing governance changes, stakeholder engagement and organisational development during 2016-17.
12. The CCG has a challenging financial and operational plan to deliver and will continue to work across the health and social care system to deliver this in partnership to reduce the impact on other agencies and the local population.

Options

13. There are no options included in this report.

Financial Update

14. The CCG submitted a final plan on 19th April with support from NHS England.
15. The plan is for a 2016-17 year-end deficit of £13.3m; a deterioration of £7.0m from the 2015-16 out turn of £6.3m. This is the first year of a four year financial recovery plan which will see the CCG hold the financial position steady in 2017-18 and return to meeting NHS England business rules in 2019-20.
16. The QIPP programme is for £12.2m of savings of which the majority is identified and £5.5m is considered a medium to high level of confidence in delivery.
17. The risk of non-delivery of the remainder is reflected in the financial plan. The CCG continues to identify areas of opportunity for QIPP and work with partner organisations on removing duplication and ensuring schemes are consistent across the health system.

Risks & Implications

18. The CCG will continue to be assessed against the national requirements through the Assessment and Improvement regime for Clinical Commissioning Groups. This CCG is ambitious to return to a level of assurance and will be working closely with NHS England to achieve this goal.

Recommendation

19. The Committee is asked to note the content of this report.

Reason: So that Members are informed of the Turnaround Action Plan.

Contact Details

Author:

Rachel Potts
Chief Operating Officer
NHS Vale of York CCG

Tracey Preece
Chief Finance Officer
NHS Vale of York CCG

Chief Officer Responsible for the report:

Rachel Potts
Chief Operating Officer
NHS Vale of York CCG

Tracey Preece
Chief Finance Officer
NHS Vale of York CCG

**Report
Approved**



Date

13 May 2016

Wards Affected:

All



Annexes:

None

Health & Adult Social Care Policy & Scrutiny Committee Draft Work Plan 2016-17

Meeting Date	Work Programme
Wednesday 22 June 2016 @ 5.30pm	<ol style="list-style-type: none"> 1. Attendance of Executive Member for Health and Adult Social Care to explain her challenges and priorities for the municipal year 2. Further update on actions against York Hospital Action Plan 3. Be Independent End of Year Position 4. Bootham Park Hospital Scrutiny Review (tbc) 5. Work Plan 2016/17
Tues 19 July at 3pm or Wed 27 July @ 5.30pm	<ol style="list-style-type: none"> 1. End of Year Finance & Performance Monitoring Report 2. Safeguarding Vulnerable Adults Annual Assurance report 3. Update report on Healthy Child Service Board 4. Work Plan 2016/17
Wed 28 Sept @ 5.30pm	<ol style="list-style-type: none"> 1. Annual Report of Health & Wellbeing Board 2. Annual Report of the Chief Executive of York Teaching Hospitals NHS Foundation Trust. 3. Update Report on roll out of the re-procurement of North Yorkshire community equipment and Wheelchair services (tbc) 4. 1st Quarter Finance & Performance Monitoring Report 5. Work Plan 2016/17
Tues 18 Oct @ 5.30pm	<ol style="list-style-type: none"> 1. Annual Report of the Chief Executive of Yorkshire Ambulance Service. 2. Tees, Esk and Wear NHS Foundation Trust – One Year On in York 3. 2nd Quarter Finance & Performance Monitoring Report 4. Update Report on CCG turnaround plans (tbc)

	<ol style="list-style-type: none"> 5. Update report on Winter Pressures Monies (tbc) 6. Work Plan 2016/17
Wed 30 Nov @ 5.30pm	<ol style="list-style-type: none"> 1. Healthwatch six-monthly Performance Update report 2. Annual Carers Strategy Update report 3. Six-monthly Quality Monitoring Report – Residential, Nursing and Homecare Services 4. Update Report on Elderly Persons' Homes 5. Work Plan 2016/17
Tues 20 Dec @ 5.30pm	<ol style="list-style-type: none"> 1. Work Plan 2016/17
Mon 30 Jan 2017 @ 5.30pm	<ol style="list-style-type: none"> 1. Safeguarding Vulnerable Adults Six-Monthly Assurance Report 2. Work Plan 2016/17
Mon 27 Feb 2017 @ 5.30pm	<ol style="list-style-type: none"> 1. 3rd Quarter Finance & Performance Monitoring Report 2. Work Plan 2016/17
Wed 29 March 2017 @ 5.30pm	<ol style="list-style-type: none"> 1. Health & Wellbeing Board six-monthly update report 2. Work Plan 2016/17
Wed 19 April 2017 @ 5.30pm	<ol style="list-style-type: none"> 1. Six-monthly Quality Monitoring Report – Residential, Nursing and Homecare Services 2. Work Plan 2016/17
Wed 31 May 2017 @ 5.30pm	<ol style="list-style-type: none"> 1. Healthwatch six-monthly Performance Update report 2. Work Plan 2016/17