

# Local Involvement Network (LINK) for Health and Social Services in Windsor, Ascot and Maidenhead

## Steering Group Meeting Notes



**Wednesday, 24<sup>th</sup> February 2010 6pm-8.00pm Maidenhead Town Hall, Maidenhead**

**Present:** Brian Huggett (replacement Chair), Doreen Joel, Trisha, Mike Copeland, Karen Mustard, Anita Li Kayleigh Argyle, Nicola Flanagan (notes), John Scaifh (Visitor)  
**Apologies:** Jazz Khan, Sheena Hester, Zena Pike, Tracy Morgan

### Agenda Item 1: Introduction & Apologies

John gave a short introduction; He took over from Ed Thompson as Joint Commissioning Manager in September 2009. He previously was programme managing the Transforming Adult Social Care project. His current role is joint funded by LA and PCT. Commissions services such as homecare, residential services for all client groups within adult and community services directorate. Also responsible for Adult Safeguarding. Responsible for contracting, accreditation of external providers, quality monitoring. John here to be educated, open to facilitate work of LINK, act as catalyst for areas of involvement.

BH asked about the reduction of staff by around 100 within the Royal Borough and asked how it would effect John's department. John said it is difficult to predict impact, read between 10 and 100 staff may be lost, bulk of will probably be from Corporate Functions. Directorates that deliver services to the community should not be affected as much, will of course have to make efficiencies in these financially challenging times.

### Agenda Item 2: Matters Arising

Last met a long time ago (December). Group accepted minutes as accurate.

**Action**

**Deadline**

### Agenda item 4: Activity Reports

#### St Marks MIU

MC believes the MIU will eventually be closed. Meetings being postponed. Withdrawn fractures dept, making it less and less useful. A&E Wexham rates not gone up. High rates of immigration in the area mean A&E used due to lack of GP.

KM asked what the Link can do. BH said we have not done any work to provide evidence to support it staying open. LINK has not collected any independent evidence. BH explained he is a governor of Heatherwood and Wexham Park, does not believe there to be a conflict of interest. AL spoke about this kind of project being a challenge due to it taking time to educate people to use the facility.

Doreen drew attention to the Jesus Hospital that was saved, MC spoke about high profile people campaigning having clout to keep it open (Rolf Harris and Michal Parkinson). Teresa May is supporting to keep MIU open.

MC felt we have not involved ourselves enough therefore do not know who is using it. On the basis that we are ignorant about the detailed rationale, arguments and case for closure, the LINK has rights to ask questions and receive answers. MC suggested a task force to gather information to support keeping it open. BH not sure the taskforce first task is info gathering as this is available, we have the facility to ask for rationale, hold them to account

**ACTION;** MC to draft a letter to the PCT, asking how many people using it, types of usage, how many referring on to AE, opening hour policy, how many have GPS or not, qualify effect not only on Wexham but other surrounding hospital.

MC

11.03.10

<p>KM said if response not positive can we link in with Advertiser as they are leading the campaign. BH suggested we get the response first</p>	
<p><b>Agenda Item 5. Transport</b>  MC said contract with PCT for South Central ambulance to provide non emergency patient services expires 31.3.10, it has now extended to July 2010.  Several Organisations have tendered, however they have been told the PCT only have £3.2 million to deliver whole patient services across Berks, which is the same amount of money granted in 08/09, the year in which they made a loss. Organisations been asked to re-tender by 10.03.10 to take into account new prescribed budget, for provision of services to start in July running for a 12 month period.  This will mean current services offered to transport people to appointments will reduce, eligibility criteria for transport will change (this is determined by GP or hospital consultant – qualify mainly by age or mobility, no possibility for people to part fund transport), as it cannot be done for that amount of money.</p> <p><b>ACTION;</b> MC will let us know outcome of tendering process and get us a copy of copy new eligibly criteria, it will change soon but need to know what changes will be made.</p> <p>JS asked if the potential exists for an operator to use its major asset (vehicles) to cross subsidise service by using vehicles for commercial orientated activities? MC informed group that ambulances currently pick up prescriptions and transport staff between sites, collection/delivery of samples to hospitals. Due to a levels of cleanliness needed ambulances cannot use as public transport. JS is in the process of retendering People to Places services (Dial A Ride) encouraging bidders to offer a service that is innovative around reducing public subsidy. BH said if he is not eligible he would be happy to pay to use that vehicle – currently not an option. MC said it is worth typing “Community transport services in Berks” into Google a range of options</p>	<p>MC 24.03.10</p>
<p><b>Agenda Item 6: Website</b> <a href="http://www.makesachange">www.makesachange</a>  NF explained that the website is currently undergoing a re-vamp in order to make the locality pages stand out from one another. Hoping to re-launch the site in March and encourage better use of the site – blogging, forums etc.  Adido, the company that has the contract to maintain the site, did provide some training about the uses of the website a few months ago. <b>ACTION</b> NF to forward Anita minutes of the website training course that Adido did</p>	<p>NF 28.02.10</p>
<p><b>Agenda Item 7: Community Engagement</b>  KA provided a record of Engagement. NF explained this form is being changed so outcomes of engagement will be made clearer. KM would find it helpful to have a report to structure what she has been doing, this would be helpful  <b>ACTION;</b> KA to develop a report of all work for next SG meeting</p> <p>NF &amp; MC spoke about engagement being more than just meeting people, <b>ACTION;</b> KA to code currently participants on datacentre as to engagement levels e.g. interested in getting involved in sub group, enter and view team etc.</p>	<p>KA 24.03.10  KA 28.03.10</p>
<p><b>Agenda Item 8: OSC Meeting</b>  KA requested an attendee from SG to attend the OSC meetings. KM asked if somebody from wider LINK could attend? Shelia Holmes used to attend but currently poorly with back problems. Group would like to know about the frequency and location of OSC meeting, agendas, and work streams? MC suggested a diff person going each</p>	<p>KA 28.02.10</p>

<p>time <b>ACTION;</b> KA to circulate details of OSC and their work streams to SG.</p>	
<p><b>Agenda Item 9 Finance</b> Not spent much at all this year, spent about £7k of £17k budget. Have spent a little on marketing and publicity materials. Booked article in Express 6 times next year, great first western trains advertising space at Berks, slot on Time Radio, advert in Thames Valley Leader. NF explained a Summary of Account is sent to JK on a monthly basis. KM reminded group of JK agreeing to take responsibility for finance and him requesting a second person to assist. KM said lack of spending raises the problem that we do have issues and work groups but they have not been active enough throughout the year. There is the ability to accrue some money if define an activity. Have a few weeks to do that. NF will inform group of next year's budget soon as it is agreed.</p>	
<p><b>Agenda Item 10 Publicity</b> KA informed group that we have several stands in the Windsor and Maidenhead libraries and drop in sessions have been arranged for both libraries. DJ was impressed with the one in Maidenhead. BH asked if KA can report back to the SG <b>ACTION;</b> KA new report to include outcomes of publicity in her new report</p>	<p>KA 24.03.10</p>
<p><b>Agenda Item 11 Work Programme</b> Chair asked where we are at with work plan? There is just one project on work plan, the DSS, final report should be shared with the Steering Group at next meeting. Trisha spoke about stigma around homeless people; plan to do a count early hours of the morning to evidence numbers. NF spoke about KA advocacy work to re-house people being commendable, there is great risk that homeless people will expect this of LINKs. This is not what LINKs is about.  A project is being considered – the lack of access to NHS dentistry in care homes <b>ACTION;</b> KA to provide Group with scoping document on this issue  KM asked if issues collated are centralised. NF explained each locality has issues spreadsheet but joint work does happen. NF informed the group about the SE Regional Summit of LINKs that took place last month. NF acknowledged the use of all SG members working together to put issues through the matrix in SG meetings, thought perhaps this was not best use of time and encouraged the group to form a separate issues sub. AL spoke about preferring to work on something like this virtually. NF explained this is done in other areas. <b>ACTION:</b> KA to provide group with an up to date contact list of SG members</p>	<p>DSS sub Group 24.03.10  KA 14.03.10  SG to decide 24.03.10 KA 28.02.10</p>
<p><b>Agenda Item 12 Personalised budgets</b> KA informed that at the last sub group it was agreed to take a back step due to it being so new. BH spoke about as the strategy being rolled out, problems now emerging. Need to be aware of the responses of people in receipt of SDS/PBs. NF endorsed this and felt that Self Directed Support is something that the LINK should be involved in.  JS asked how the LINK could challenge the personalisation agenda to demonstrate it is improving outcomes for local people – John can offer some direction, <b>ACTION;</b> KM to speak to JS about LINK getting involved</p>	<p>KM 24.03.10</p>

<p><b>Agenda Item 13 Potential Project</b>  MC is interested in finding out about the training given to NHS staff and care staff for identifying &amp; working with different forms of mental health problems. Issue was raised at last ambulance meeting. It is becoming an increasing problem.  Js suggested Liz Bateman is the manager of the Community Mental health team might be a good contact? JS happy to act as conduit for this, also sits on the Berks East Dementia Strategy group..  <b>ACTION:</b> KA to make contact with Liz Batement and find out what training is currently available for NHS staff and how much of it specialises on mental disorders?  Jazz and Zena have expertise in this field so could lead a possible project?</p>	<p>KA 15.03.10  JK/ZP?</p>
<p><b>Agenda Item 14 Enter and View team</b>  DL &amp; participant Alan Gibbs completed Enter and View training. A small team that needs to be developed or possibly join with other Enter and View teams.  MC has a CRB with NHS and has been told he does not need another one to be done. NF explained that whilst people may be very experienced in “inspections” there is a statutory requirement for authorised representatives to undergo specific training, due to Enter and View not being the same as inspections.  NF spoke about the risk of Authorised Representatives losing skill base if not used. Other LINKs are promoting use of Enter and View powers within provider domain  <b>ACTION</b> NF to draw up a proposal for Steering Group   <b>ACTION</b> Regular care home providers forum are held quarterly at York House, might be a good audience. KA to find out about this.   NF spoke about the additional power that LINKs now has in being able to comment on provider’s Quality Accounts. This means that it is now in providers best interest to have a relationship with LINKs</p>	<p>NF 24.03.10  KA 15.03.10</p>
<p><b>Agenda Item 15 Training</b>  Decision making training took place yesterday Project Planning not sure that anybody from WAM attended last month? Will keep group informed of any training opportunities.</p>	
<p><b>Agenda Item 16 Future Meeting Dates</b>  Need to agree dates for year ahead. Group looked at meeting every other month, but felt the risk of this would mean activity and projects would not be driven forward, but left to dwindle as has happened currently. With the contract ending in a year the Commissioners and funders are expecting to see outcomes of the difference links has made Group discussed how they could ensure inclusivity in terms of accessing the meetings. With regards time MC preferred Mornings, however those working would have to take time off. Group also discussed venue and considered alternating between Windsor and Maidenhead SG agreed to alternate between day time and evenings each months, to open up the possibility of other people attending e.g professionals reluctant to come to another meeting in the evening, as well as venue. Agreed Wed 24 March next meeting  <b>ACTION</b> KA to propose meeting dates to the end of the year, date venues</p>	<p>KA 24.03.10</p>
<p><b>Agenda Item 17 AOB Safeguarding</b>  KM was at a meeting with JK and Andrew Small, Safeguarding lead. He is hoping to put together a SU and Carers network/forum, they would like LINKs to help them promote this. Group agreed this would be possible. Recognised that due to safeguarding issues LINKs may be ideally positioned to support this  <b>ACTION;</b> KA to invite Andrew along to the next meeting to talk about safeguarding.</p>	<p>KA 24.03.10</p>

<p><b>Guest Speaker</b> MC spoke about the possibility of inviting a guest speaker to each meeting? CQC Lead, Berks Healthcare Trust is willing to attend</p> <p><b>Annual Report.</b> NF explained DH have issued a Template for this years Annual Report which requires detail. Will circulate and suggested a Sub group to be formed to begin work. To be with Secretary of State by 30.06.10, having been signed off by the wider LINK (not just the SG)</p> <p><b>Minority groups accessing services</b> JS spoke about current concern around the ability of minority groups living in the Borough being able to access services. Very little is known. JS is holding a focus group on 29.3.10 and invited the LINK to be involved; in order to help Council develop a more informed view. Possibly ZP? BH suggested the Link scope out the issue, draw up a plan and</p> <p><b>Joint work with CQC</b> BH wondered if there is a protocol in how we work with CQC. NF will circulate document Voices Into Action – a guide for LINKs &amp; OSCs</p>	<p>Steering Group Asap</p> <p>ZP? Confirm by 15.03.10</p> <p>Steering Group Before end of £ year 28.02.10</p> <p>NF</p>
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