



Citizen Advisory Panel minutes

24 January 2020
10am to 1pm
Trevithick, Sedgemoor Centre

Attendees

- Sally Turner, CAP lay member (chair)
- Andrew Abbott, director for integrated care, primary care, NHS Kernow Clinical Commissioning Group
- Steve Bird, CAP lay member
- Liz Davies, CAP lay member
- Paul Ford, CAP lay member
- Jackie Goldie, speech to text operator
- Joan Heaton, CAP lay member
- Nigel May, CAP lay member (vice chair)
- Louise Moore, patient and public involvement assistant, NHS Kernow Clinical Commissioning Group
- Nigel Morson, CAP lay member
- Jeremy Preedy, CAP lay member
- Babs Rounsevell, Healthwatch Cornwall
- Amanda Stratford, chief executive officer, Healthwatch Cornwall

Guests

- Julie Gripton, principal, Health and Social Care Academy

Apologies

- Liz Berryman, CAP lay member
- Kathy Doeser, CAP lay member
- Catherine Fuller, co-ordinator, Healthwatch Isles of Scilly
- Jim Harris, CAP lay member
- Karen Hodgkin, co-ordinator, Healthwatch Isles of Scilly
- Ian Jones, Volunteer Cornwall
- Nikki Kelly, Governing Body lay member, patient and public involvement
- Richard Williams, chair, Voluntary Sector Forum

Item 1 - Welcome and introductions

Sally welcomed everyone and apologies were noted.

Sally advised that Jackie would be represented by a director on occasions when she could not attend.

Item 2 – Minutes and actions from previous meeting - December 2019

The minutes of the last meeting were agreed.

The action grid was discussed and updated.

Matters arising from the minutes

A communications officer had been appointed to work specifically within the Embrace project. Alison Eliot would sit with the communications team at Sedgemoor and be line-managed by a council colleague.

Item 3 – Health and Care Academy

Julie Gripton, principal of the Health and Care Academy attended. A presentation is available as an appendix to these minutes.

The newly developed academy is part of the Cornwall and Isles of Scilly Health and Care Partnership and is not aligned to any trust or organisation. There is no patient and public representation on the academy steering group.

A question posed to CAP members was “How can meaningful involvement be achieved?” The academy’s steering group provides oversight and scrutiny and considers future requirements.

Local organisations were competing for staff from the same pool of people. The academy is not a building or college, but virtual, working together to commission training.

The academy is also working with social care and children and families to ensure high quality training is available. As the academy develops it could work with voluntary organisations, charities and schools.

The academy aims to bring the system together, try new things, be innovative and engage people.

For the first time there are year 2 medical students at Truro. The first cohort of nursing associates had been recruited. The apprenticeship training programme was being used for some posts.

Jeremy remarked that many of the best carers have no qualifications and had been told they are not clever, yet they demonstrate world class empathy and emotional intelligence. Those people would be intimidated and reluctant to being tested academically, however they provide excellent care for people. There was, therefore, concern that if qualifications were expected it would exclude some who could do more, that have been told in the past that they are not clever enough.

There was discussion around the approaches the academy was considering to ensure that maths and English courses were accessible, including parallel courses or courses on site, to enable shift workers to attend.

There was discussion around the fact that carer should be promoted as a proper career, with progression, that was valued, not just what people do when they can't do anything else.

The academy was reviewing leadership and change management practices in each organisation in order to fill gaps, not to replicate what was already in place. The academy did not have resources to provide bursaries and had to take advantage of existing local and national schemes.

Babs was aware of many schemes which were doing similar work to the academy and she would liaise with Julie to provide the details and contact information. With regard to hard to reach groups, the academy was working across all organisations on a 'step into work programme' where people could try work placements. The academy was also in touch with the Department of Work and Pensions and the 11-25 pathway team at the council.

Amanda suggested that care leavers, who perhaps had missed out on education, could be a group to target. It was suggested that for those that were great carers but not academic, other less intimidating ways could be considered with regard to gaining a maths and English qualification.

CAP members suggested that engaging with local community groups and schools at primary care network level could be useful.

CAP members reiterated that Maths and English shouldn't be the barrier that stops people progressing.

Ways that CAP and people could get involved were suggested as follows:

- pop-up stalls at events in Perranporth, could join in with that
- when publicity material is available CAP members would be happy to share with patient and participation groups (PPGs) and primary care networks (PCNs)
- GP TV screens
- Healthwatch Cornwall drop-ins across the county and work with Mole Valley Farmers, could provide opportunities

Action 01/20

Babs to liaise with Julie with regard to the schemes she was aware of such as Cornwall Adult Health and Social Care Learning Partnership (CAHSC), Raising Excellence and Aspiration in Care and Health (REACH) and Skills for Care.

Action 02/20

Julie to provide resources when developed, for CAP members to share in their communities.

Item 4 – Primary care network (PCN) specifications

Andrew Abbott discussed the PCN specifications with CAP members. Key points from the discussion were:

Some groups that CAP members were involved with had written letters to MPs and NHS England outlining their concerns about the PCN specifications.

PCNs were set up for the whole county except for two practices in north Cornwall. Bude and Stratton practices were part of a PCN that crossed the border into Devon.

Andrew explained the differences between local enhanced services (LES) and directed enhanced services (DES) and that they had not changed much in recent times. Andrew was working with Local Medical Committee (LMC) colleagues and PCNs on how LES and DES could be redesigned.

The PCN maturity matrix model was useful in that it also described the rest of the system support for PCNs.

CAP members were encouraged to ask their PCN colleagues for their self-assessment in order to provide constructive challenge.

CAP members were asked by Andrew to consider how their PPGs could help PCNs mature and engage with communities.

Item 5 – PCN and PPG engagement and PPG conference

Rachel Tofts attended to update on arrangements for the next PPG conferences. 3 venues had been booked:

1. 27 October at Launceston Town Hall.
2. 3 November at Heron Tennis Centre, Newquay.
3. 4 November at Hayle Rugby Club.

CAP members were happy with the selected venues.

Rachel would be handing arrangements for the events over to the new engagement manager, once in post.

Rachel agreed to add the conference dates to Andrew, John and Jonathan's diaries.

Rachel advised that costs were being covered by NHS Kernow and that payments for the venue bookings had been approved.

It was agreed that at the next meeting there would be further discussion around the suggested agenda and speakers.

There was discussion about the mailing list used for PPGs. It was confirmed that the list was kept up to date however, not all PPGs had provided a contact email address for the chair. In those cases, all email correspondence was sent to practice managers and marked for the attention of PPGs. It was agreed that Sally should write a short article for the GP bulletin requesting practice managers to circulate PPG information to all their PPG members.

It was suggested that all PPGs could sign up to Ask Cornwall and join a dedicated project group, and then when contact details changed it would be up to date. Practice managers could also sign up and send the information on to their PPG members.

Action 03/20

Rachel to add the PPG conference dates to directors' diaries.

Action 04/20

CAP members to submit ideas for the conferences to Sally, for discussion at the February meeting.

Action 05/20

Louise to share the mailing list with CAP members (redacting personal email addresses) to show which PPGs were contacted via practice manager or chair.

Action 06/20

Sally to write an item for the GP bulletin requesting that practice managers forward information to all members of their PPGs when received.

Item 6 – Feedback and reports from CAP members

There was discussion about the 10 steps to better engagement training as local trainers were required to deliver the training in PCNs. Amanda confirmed that 2 colleagues from Healthwatch would be attending the train the trainer session. Sally suggested that this could be an item for the PPG conferences as well as anything that was identified at the Healthwatch conference.

There was discussion about the citizens' jury in Gloucestershire.

Paul advised that Cornwall Partnership NHS Foundation Trust (CFT) governors had had a very interesting equality and diversity session, provided by Dean at Pentreath, and felt that would be useful for CAP members and the PPG conferences too.

Steve advised that he had enrolled on the understanding the health and social care environment course, provided by NHS England.

Joan advised that the next interagency meeting would be in Bude on 14 February. These were very good meetings for networking and attendees included community makers, social prescribers, charities and more. Joan would share the details.

Nigel Morson and Joan had attended the primary care commissioning committee meeting on 16 January and Nigel tabled a report. Joan would be attending the next meeting.

Action 07/20

Louise to find out more information about the Gloucestershire citizens' jury to circulate to the group.

Action 08/20

Joan to provide more details on interagency meetings.

Item 7 – Any other business

Amanda advised CAP members that the Eventbrite invitation for the conference on 26 March would be sent shortly. There would be a marketplace and it was suggested that CAP could have a stall.

There was discussion about Embrace engagement and it was suggested that Tryphaena be invited to provide an update.

Andrew talked about the funded co-ordinate my care project. CAP members agreed that they would be agreeable to the project team attending a future meeting to discuss how CAP can help.

Action 09/20

CAP members to sign up to conference when Eventbrite invitation received.

Action 10/20

All to send Amanda ideas for table talk topics for Healthwatch conference on engagement.

Action 11/20

Louise to contact Sharon to request details of the new funded co-ordinate my care project for circulation to the group.