

Citizen advisory panel (CAP) meeting minutes

23 October 2020 10am to 1pm Microsoft Teams

Attendees

- Sally Turner, CAP lay member (chair)
- Kathy Doeser, CAP lay member
- Sarah Fisher, head of communications, NHS Kernow Clinical Commissioning Group and Cornwall Partnership NHS Foundation Trust (CFT)
- Clare Greenwood, executive officer, Hearing Loss Cornwall
- Joan Heaton, CAP lay member
- Nikki Kelly, Governing Body lay members for patient and public involvement, NHS Kernow Clinical Commissioning Group
- 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
- Amanda Stratford, chief executive officer, Healthwatch Cornwall

Guests

- Carolyn Andrews, system transformation director
- Caroline Righton, CFT and Royal Cornwall Hospitals NHS Trust (RCHT) director of communications and engagement

Apologies

- Hollie Bone, engagement manager, NHS Kernow Clinical Commissioning Group
- Helen Charlesworth-May, strategic director for public health and care, accountable officer, NHS Kernow Clinical Commissioning Group
- John Groom, NHS Kernow, director for integrated care
- Frances Tippett, south west integrated personal commissioning (IPC) programme director, CAP lay member

Minutes from the meeting

Item 1 - Welcome and introductions

Sally welcomed everyone and apologies were noted.

Item 2 – Lay member representatives across the integrated care system (ICS) and the role of CAP

Carolyn Andrews attended the meeting to discuss the role of CAP and lay member representation across the ICS. A paper from Nigel May, with a suggested structure for consultation and engagement had been shared with the meeting papers. A discussion paper from Amanda had also been included in the meeting papers.

Sally explained that CAP members wished to be proactive and didn't feel they had a voice.

Carolyn explained that she was keen for there to be lay representation at different levels within the ICS. Programme board level was where lay representation would be particularly useful to get lay member views at the start of discussions.

There were lots of meetings where lay representation would be important, and the right people needed to be involved at the right level.

It was clear that there were some excellent pockets of engagement which were not always joined up.

It was recognised that lay members needed support in their roles, to understand the complexities of the system. CAP members also felt it was useful for 2 lay representatives to attend meetings for support and to de-brief.

Carolyn was keen to understand from CAP members their views on what an engagement framework might include and look like and discussion followed.

Need to seek out and develop channels that people recognise, use and feel comfortable with.

Communications need to be 2-way, both up and down.

Patient participation groups (PPGs) have struggled to communicate, even virtually, over the last 7 or 8 months.

Could use columns in newspapers to communicate with the wider public.

Involve people at a community level and feed in views of community.

Engaging with people needs to be ongoing, not just a project or tick box exercise.

Engaging with communities will vary from area to area.

A citizen group pilot was about to start in Perranporth.

Carolyn would like to see more lay chairs on boards.

CAP members would like to be able to present to other boards on what they are doing.

CAP role at present is to feedback from meetings and communicate via PPGs and community groups.

Carolyn advised that an engagement lead for the system was to be recruited and suggested that someone from CAP may be able to sit on that recruitment panel.

Carolyn clarified that although there were ICS posts being created, these were not new posts or new pots of money but being reshaped from other areas.

The West Integrated Board (WIB) was agreeable to two lay representatives, however, there were 4 primary care networks (PCNs) each with a reference group. Kathy would be attending the next meeting and in future representation would be shared around the 4 PCNs.

CAP members were interested to know more about how the group in the west was set up.

There are opportunities to engage with many groups that use services but don't want to be part of a formal structure.

Joan suggested that councils could help get information back out to people.

Carolyn had found the discussions helpful and would go away, reflect and update CAP at a future meeting, either in person or written update.

It was agreed that a session was required to reflect and focus on what the future role of CAP would look like.

Action 67/2020

All to reflect and record thoughts, comments and suggestions.

Item 3 – Minutes and actions from previous meeting

The minutes of the meeting held on 25 September were agreed as an accurate record of the meeting.

The action log was reviewed and updated.

Item 4 – Consultation and engagement

RCHT and CFT merger

Caroline Righton attended to provide an update on the engagement process regarding the RCHT and CFT merger.

Over the previous 3 months there had been virtual staff roadshows, where staff had had the opportunity to raise questions.

The strategic outline case had been sent to NHS England and NHS Improvement. NHS Kernow and the Health and Adult Social Care Overview and Scrutiny Committee had indicated their support for the proposal.

External engagement would start in the new year once staff engagement had concluded.

Stakeholder management and auditing software was being purchased and 5500 stakeholder organisations had been identified.

Initial ideas for engagement included virtual village hall meetings, in real time surveys, question and answer sessions, 1 to 1 briefings for individual organisations and print materials.

Groups that did not use technology would not be excluded. Patient user groups would be engaged with.

During further discussion Carolyn mentioned free digital tools that CAP members may be interested in such as Jamboard and Menitmeter.

Nigel May mentioned the work of e-Health Productivity and Innovation in Cornwall and the Isles of Scilly (EPIC) in making software more accessible and agreed to put them in touch with Caroline.

Action 68/2020

Carolyn to share further details of Jamboard and Mentimeter.

Action 69/2020

Nigel May to put EPIC in touch with Caroline.

Proposed council budget

Nigel Morson mentioned the proposed council budget and the engagement taking place.

Nigel requested that information on the budget proposal and engagement be put in the CAP and PPG bulletin.

Action 70/2020

Include details of the council's budget proposal engagement in the CAP bulletin.

Grampound branch surgery engagement

A virtual public meeting had taken place via Microsoft Teams Live.

Nigel Morson felt that the GP partner had dealt well and comprehensively with the many questions. However, he felt that the technology had felt distancing and unfriendly to participants.

Sarah explained that Teams Live had been used as it was unknown how many participants there would be. It was noted that perhaps an additional voice to read the questions would have helped.

Nigel Morson suggested that perhaps future public meetings could be moderated by a member of CAP or Healthwatch. Sarah agreed that this was a good idea.

Item 5 – Feedback and reports from CAP members on recent meetings attended

Sally had attended the senate and Governing Body meetings and her updates on those had been circulated with the meeting papers.

Nigel Morson had attended the primary care commissioning committee and had provided a summary for the CAP and PPG bulletin.

Nigel May had attended the east umbrella group meeting where members raised concerns that negative comments were now appearing about current GP services. There was a need for NHS Kernow and practices to ensure the patients and the local communities were aware of how COVID-19 regulations were affecting health provision and that all practices are open and working very hard to provide services for their patients.

Jeremy had attended the WIB meeting where there was an emphasis on the pressure on primary care.

Item 6 - Any other business

There was discussion about the role of carers and making care work an attractive opportunity for people to get a good job and progress. It was suggested that Paul Hargreaves could attend a future meeting to provide an update on the people plan.

There was discussion about foodbanks and a request to include the link to Transformation Cornwall's foodbank update in the next CAP bulletin.

There was also a request to include the link to Cornwall Council's coronavirus pages in the CAP and PPG bulletin.

Action 71/2020

Link to Transformation Cornwall foodbank update to be included in CAP and PPG bulletin.

Action 72/2020

Link to Cornwall Council's coronavirus pages to be included in CAP and PPG bulletin.