

# Public Document Pack



**Nottingham  
City Council**

## **NOTTINGHAM CITY COUNCIL** **HEALTH SCRUTINY COMMITTEE**

**Date:** Thursday, 21 July 2016

**Time:** 1.30 pm (pre-meeting for all Committee members at 1pm)

**Place:** Ground Floor Committee Room - Loxley House, Station Street, Nottingham,  
NG2 3NG

**Senior Governance Officer:** Jane Garrard **Direct Dial:** 0115 8764315

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IF YOU NEED ANY ADVICE ON DECLARING AN INTEREST IN ANY ITEM ON THE AGENDA, PLEASE CONTACT THE GOVERNANCE OFFICER SHOWN ABOVE, IF POSSIBLE BEFORE THE DAY OF THE MEETING

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**NOTTINGHAM CITY COUNCIL**

**HEALTH SCRUTINY COMMITTEE**

**MINUTES of the meeting held in the Ground Floor Committee Room - Loxley House, Station Street, Nottingham, NG2 3NG on 30 June 2016 from 13.30 - 14.32**

**Membership**

Present

Councillor Anne Peach (Chair)  
Councillor Chris Tansley  
Councillor Carole-Ann Jones  
Councillor Patience Uloma Ifediora

Absent

Councillor Ginny Klein  
Councillor Corall Jenkins  
Councillor Ilyas Aziz  
Councillor Dave Liversidge  
Councillor Jim Armstrong  
Councillor Merlita Bryan

**Colleagues, partners and others in attendance:**

Helen Jones - Head of Urgent Care at Nottingham City Clinical Commissioning Group  
Rav Kalsi - Senior Governance Officer  
James Rhodes - Strategic Insight Manager  
Ann Simpson - Head of Urgent Care Centre, CityCare  
Zena West - Governance Officer

**1 CHANGE TO COMMITTEE MEMBERSHIP**

**RESOLVED to note that Councillor Patience Uloma Ifediora and Councillor Carole Jones have been appointed as members of the Health Scrutiny Committee.**

**2 APOLOGIES FOR ABSENCE**

Councillor Jim Armstrong – non Council business  
Councillor Merlita Bryan – non Council business  
Councillor Ginny Klein – non Council business

**3 DECLARATIONS OF INTEREST**

None.

**4 MINUTES**

The minutes of the Health Scrutiny Committee meeting held on 19 May 2016 were agreed and signed by the Chair.

**5 URGENT CARE CENTRE**

Helen Jones (Head of Urgent Care at Nottingham City Clinical Commissioning Group (CCG)) and Ann Simpson (Head of Urgent Care Centre, CityCare), updated the

Committee on the first six months operation of the Urgent Care Centre on London Road, highlighting the following:

- (a) Nottingham City Urgent Care Centre (UCC) opened on 1 October 2015 and the service operates every day from 7am to 9pm. Any members of the public who have an urgent, unplanned health need can access the service regardless of residence or registration. The hope is that the UCC will improve access to medical attention for patients with non-life threatening illness or injury;
- (b) Although commissioned for 75,000 treated patients per year, current activity indicates that 57,500 will be treated this year. Public marketing around the UCC's activity has been minimal to date due to building work and restricted consulting space available during renovation however this work is now complete;
- (c) X-ray activity has been audited during the first six months showing an average of 30% positive fracture rate. 585 patients were treated between January and March 2016 who would otherwise have been referred to an emergency department (ED) for their injury. This reflects a minimum saving to the health community of circa £74,000 per quarter;
- (d) 98% of non-urgent patients are seen within 2 hours with 98% of complex diagnosis seen with 4 hours (which is better than the national target of 95%);
- (e) The next step is to integrate care pathways across urgent care systems. This will provide closer links between access routes for care and the treatment services.

The following points were raised in discussion:

- (f) Having inspected UCC data, it is possible to hypothesise that patients with a higher acuity would possibly have presented at ED so it is possible to identify a positive impact on EDs in the region;
- (g) UCC has recently been awarded Vanguard status for Greater Nottingham and part of this requires UCC to deliver an integrated urgent care service. National guidelines point to an integrated service by 2020 but the UCC in Nottingham is expecting to do it sooner;
- (h) Now that the implementation phase has passed, the UCC will continue to work with commissioners to market new and emerging aspects of the centre, such as the X-ray facilities which will lead to a significant change in consumer choice. A targeted social media campaign will also advertise waiting times as the main demographic for urgent care is the under 40s. Work will continue to take place with GP practices and patients groups to widen patient engagement;
- (i) The UCC provide a variety of ways for service users to provide feedback, ranging from verbal feedback to clinicians, a short feedback form, NHS choices website and the NCCP Twitter account. During October to December

2015, the total number of Satisfaction Surveys completed was 98 and the UCC met the satisfaction target of 85%;

- (j) On 15 June 2016 members of the Committee visited the Centre to observe it in practice and engage with staff. Those present found this experience incredibly worthwhile and were impressed with the space and layout of the facilities.

**RESOLVED to**

- (1) note the content of the report;**
- (2) thank CityCare and Nottingham City CCG for hosting members of the Committee at the Urgent Care Centre for a visit on 15 June 2016;**
- (3) receive a report on the integrated urgent care pathway in 12 months;**
- (4) review how the Urgent Care Centre is operating and whether it is meeting the expected outcomes in 12 months.**

**6 DEVELOPMENT OF THE JOINT HEALTH AND WELLBEING STRATEGY 2016-2020**

James Rhodes, Strategic Insight Manager at Nottingham City Council, updated the Committee on the Joint Health and Wellbeing Board Strategy 2016-2020, highlighting the following key points:

- (a) A proposed strategic framework was agreed by the Health and Wellbeing Board in January 2016, based around the following four key outcomes:
  - Adults, children and young people in Nottingham adopt and maintain healthy lifestyles;
  - Adults, children and young people in Nottingham will have positive Mental Wellbeing and those with serious mental health illness will have good physical health;
  - There will be a healthy culture in Nottingham in which citizens are supported and empowered to live healthy and manage ill health;
  - Nottingham's environment will be sustainable; supporting and enabling its citizens to have good health and wellbeing.
- (b) The purpose of the strategy is to enable all Health and Wellbeing Board partners to be clear about the agreed priorities for the next four years and to add value to the planned activity for the Board;
- (c) Consultation on the strategy ends today and will be presented to the Health and Wellbeing Board in July 2016 for approval. In September 2016, detailed action plans will be presented to the Board for approval which will detail the programme of activity for each key outcome.

The following points were raised in discussion:

- (d) In recent months concerns have been raised about the lack of access to mental health pathways in some settings and the lack of direct access points to mental health pathways from the urgent care centre. This needs addressing in order to ensure access to care for people with serious or urgent mental health problems are supported appropriately. Outcome two will provide an action plan to support this and will be presented to Health and Wellbeing Board in September 2016;
- (e) The Committee has identified the importance of health literacy and its role in developing a healthy culture. This would require a coordinated approach, including a better understanding of deprivation in Nottingham, not just health inequality.

**RESOLVED to provide the following feedback in relation to Joint Health and Wellbeing Strategy 2016 – 2020:**

- (1) **The lack of access to mental health pathways, for example from urgent care or by the East Midlands Ambulance Service will need to be addressed as part of the Strategy;**
- (2) **The Committee notes the importance of health literacy in supporting adults, children and young people in developing a healthy culture.**

**7 HEALTH SCRUTINY COMMITTEE WORK PROGRAMME 2016/17**

Rav Kalsi, Senior Governance Officer presented a report on the work programme for the Health Scrutiny Committee for 2016/17.

**RESOLVED to amend the Work Programme and schedule the item on Safeguarding and Social Care Perspective on Homecare for Health Scrutiny Committee on 22 September 2016.**

<b>HEALTH SCRUTINY COMMITTEE</b>
<b>21 JULY 2016</b>
<b>SCRUTINY OF PORTFOLIO HOLDER FOR ADULTS AND HEALTH</b>
<b>REPORT OF CORPORATE DIRECTOR FOR RESILIENCE</b>

**1 Purpose**

- 1.1 To discuss with the Portfolio Holder for Adults and Health his key priorities, progress against relevant aspects of the Council Plan, challenges and pressures and key objectives for 2016/17.

**2 Action required**

- 2.1 The Committee is asked to use the information provided at the meeting by the Portfolio Holder for Adults and Health to inform questioning.

**3 Background information**

- 3.1 On 9 November 2015 the Council Plan was formally approved by Full Council and this will guide the Council's services and approach to support the delivery of its key priorities for the City over the next four years to 2019.
- 3.2 Each Portfolio Holder has been consulted on the deliverables in their area. Overview and Scrutiny has a role in scrutinising performance and progress against the Council Plan and therefore a programme of sessions with Portfolio Holders has been established. The majority of these sessions will be carried out by the Overview and Scrutiny Committee but the Health Scrutiny Committee leads on scrutiny of most issues within the remit of the Portfolio Holder for Adults and Health.
- 3.3 The Portfolio Holder for Adults and Health is Councillor Alex Norris. He will be attending the meeting to discuss his key priorities, progress against relevant aspects of the Council Plan, challenges and pressures and key objectives for 2016/17.
- 3.4 The Adults, Health and Community Sector theme within the Council Plan sets out an ambition to achieve the following by the end of the Plan:
- Make life better for the 35,000 older persons in the City enabling choice and confidence in the care they receive and the way it is delivered, maintaining dignity, independence and control.
  - Be a City that enables healthy lifestyles, promotes wellbeing and supports community resilience.
  - To take the lead on improving working between our social care services and the NHS to ensure better care for our vulnerable residents.

The key things that the Plan states will take place are:

- Tailor care to individual needs through proper integration of the Council's social care services with those delivered by the NHS.
- Reduce teenage pregnancy by a further third.
- Promote community resilience by backing the 'Looking After Each Other' campaign and other groups that tackle loneliness and promote self-help.

#### **4 List of attached information**

4.1 None

#### **5 Background papers, other than published works or those disclosing exempt or confidential information**

5.1 None

#### **6 Published documents referred to in compiling this report**

6.1 Nottingham City Council Plan 2015-2019

#### **7 Wards affected**

7.1 All

#### **8 Contact information**

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<b>HEALTH SCRUTINY COMMITTEE</b>
<b>21 JULY 2016</b>
<b>HEALTHWATCH NOTTINGHAM ANNUAL REPORT 2015/16</b>
<b>REPORT OF CORPORATE DIRECTOR FOR RESILIENCE</b>

**1 Purpose**

- 1.1 To consider the Healthwatch Nottingham Annual Report 2015/16

**2 Action required**

- 2.1 The Committee is asked to give consideration to the Healthwatch Nottingham Annual Report 2015/16 and identify if there are any implications for health scrutiny operation and work programme.

**3 Background information**

- 3.1 Healthwatch is a consumer champion in health and social care. It has a role at both national and local level to make sure that views of the public and service users are taken into account in decision making.
- 3.2 Since April 2013 every local authority with social services responsibilities has been required to establish arrangements for a Local Healthwatch organisation. In Nottingham this is Healthwatch Nottingham.
- 3.3 Healthwatch Nottingham is an independent organisation but the Council holds the contract for local Healthwatch arrangements and is responsible for ensuring that the arrangements operate effectively. Earlier this year the Council agreed funding for a further 12 months to the end of 2016/17.
- 3.4 In the working agreement between Health Scrutiny, Healthwatch Nottingham and the Health and Wellbeing Board, Healthwatch Nottingham agreed to provide a copy of its annual report to the Health Scrutiny Committee.
- 3.5 The Healthwatch Nottingham Annual Report 2015/16 is attached.
- 3.6 A representative of Healthwatch Nottingham will be attending the meeting to present the annual report and answer questions from the Committee about its content.

**4 List of attached information**

- 4.1 Healthwatch Nottingham Annual Report 2015/16

**5 Background papers, other than published works or those disclosing exempt or confidential information**

5.1 None

**6 Published documents referred to in compiling this report**

6.1 Delegated Decision 2458 'Healthwatch Funding 2016/17'

**7 Wards affected**

7.1 All

**8 Contact information**

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# Healthwatch Nottingham

## Annual Report 2015/16





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# Message from our Chair



Welcome to the third Annual Report of Healthwatch Nottingham.

Health and Social Care continue to maintain a high profile in current media debates and people from all perspectives have both praise and concerns for many of our local services.

Our aim, as Healthwatch Nottingham, is to ensure that citizens' voices, particularly those from seldom heard groups, are articulated and used to inform the judgements of providers, commissioners and policy makers across the City. Healthwatch does not provide the sole source of consultation, in fact a key aim is to ensure that statutory agencies responsible for spending large amounts of public funding themselves consult with local people in relation to their plans and decisions.

We fully endorse the growing cooperation across health and social care and the drive towards more integrated service provision. We continue to seek ever closer working

throughout the system and are involved in ensuring plans to transform local services in the City and beyond.

The Board has been keen to draw on local knowledge of services from a wide range of sources:

- Our Talk to Us points
- Our Information Line
- Our website  
[www.healthwatchnottingham.co.uk](http://www.healthwatchnottingham.co.uk) - which encourages feedback about local services
- Our 'Champions' - A network of volunteers and staff in other agencies
- Through our attendance at other public events
- Drawing information and dialogue from social media
- Through our contact with other networks and specialist groups, Children and Young People Provider Forum, Vulnerable Adults Forum, Refugee Forum etc.

**“This work enables us to both raise concerns and to challenge decisions made in your name, which we have done through the course of this year.”**

We continue to develop Healthwatch and ensure your voice is heard amidst the immense changes that health and social care services are undergoing.

We are also continuing to develop our Board to enable us to have a greater breadth of experience and knowledge.

At Healthwatch Nottingham we will also use our influence to try and ensure that services are available at the right time and location for those who need them. We will however use our best endeavours to help local services improve the information and knowledge available to local citizens so that they can make the right choice in accessing services.

Our active research is also important in informing us and our partners of people's views about our local health and care system. We share the information we receive with the Care Quality Commission (CQC), commissioners and service providers. Our recent Insight Report into Nottingham University Hospitals NHS Trust was highlighted for its good practice by the CQC.

We will continue to act as the local independent voice for Nottingham citizens, to share and champion your views, so please Talk to Us.



Martin Gawith  
Chair - Healthwatch Nottingham

# The year at a glance

We've directly engaged with **1057** local people at community events across the city



We've collected **1682** experiences of care services in Nottingham



**43%\*** of all experiences collected were from people in vulnerable or seldom heard groups

\*it could be more as people don't always tell us these details

Our volunteers have donated over **500** hours of time and led or supported **39** activities



Our reports focused on:

- Nottingham University Hospitals NHS Trust services
- GP practices across the city
- The Care Act
- Community pharmacy
- Opticians



We've provided advice and information about care services in Nottingham **573** times

# Who we are

Healthwatch Nottingham is an independent organisation making sure your views on health and social care services in Nottingham are heard.

At a local level, Healthwatch Nottingham works to help local people get the best out of their local health and social care services - whether it's improving them today or helping to shape them for tomorrow. Healthwatch Nottingham is all about local voices being able to influence the delivery and design of local services. Not just for people who currently use them, but anyone who might need to do so in future.

## Our vision

*Our vision for Healthwatch Nottingham is that it becomes a respected, representative and effective influencer to improve and develop Nottingham's health, wellbeing and social care landscape.*

Healthwatch Nottingham will seek to represent all communities, groups and individuals, taking particular care to give a voice to those that are currently unheard and have little connection to services.

We will work with health and social care providers to research and analyse services and to bring issues to their attention; working together we will strive

to improve the quality of life for citizens, consumers and patients.

Healthwatch Nottingham will seek innovative ways to capture the views of patients, and citizens in Nottingham and ensure that we use this information to inform our stakeholder partners so that they can improve the quality of care for our citizens.

Nottingham, like many cities in the UK, has mortality rates much poorer than some of our near neighbours. We will work with health and social care partners to identify and highlight ways we can improve. Whilst we recognise lifestyle choices are very much personal we have a duty to enable our citizens to make informed decisions.

Healthwatch Nottingham must be able to affect change through evidence-based reporting underpinned by effective community engagement.

## Our priorities

Healthwatch Nottingham is an independent organization which aims to make sure that local people's views on health and social care services in Nottingham are heard. We identify individual issues and trends that indicate where services may be failing local people, acknowledge good practice and enable their views and experiences to influence how services are planned and delivered.

On page 28 we explain how we prioritise the work we undertake.

During 2015/16 we prioritised the following areas of work:

- Young persons mental health services
- Access to urgent and weekend GP appointments
- Patients views of Nottingham University Hospitals Trust (with Care Quality Commission)
- Merger of Nottingham University Hospitals Trust and Sherwood Forest Hospitals Trust
- Access to information and advice about the Care Act
- Working with Scrutiny Committee and Health and Well Being Board
- Working with Greater Nottingham Transformation Board
- Advice and Information on local dental services.

In addition to these specific areas of work we also undertook 'Question of the Month' surveys. You can find more about these on page 10.

## How we work

Every voice counts when it comes to improving health and social care both for today and shaping it for the future. Everything that Healthwatch Nottingham does will bring the voice and influence of local people to the development and delivery of local services.

People need to feel that their local Healthwatch belongs to and reflects them and their local community. It needs to be approachable, practical and dynamic and to act on behalf of local people.

- We're helping you to shape and improve the services you use
- We're engaging with people in your community and if you haven't met us yet, please get in touch!
- We're an open organisation and strive to make it easy for you to talk to us
- We're inclusive and we want people from every part of your community to join us
- Ask us what we're doing and we'll always tell you what's happening.

# Listening to people who use health and care services



## Gathering experiences and understanding people's needs

During 2015-16 **1682** general experiences and views on care services in the city were collected.

### How we gathered experiences



- Directly engaging with local people
- Other online monitoring
- Patient Opinion website

Note: we also received a small number of experiences (less than 1%) from other sources

On average, **43%** of our activities were specifically targeted at the following seldom heard groups:

- Children & Young People
- Older people
- From disadvantaged and vulnerable groups, which includes people with disabilities or those with long term illnesses including mental health.
- Seldom heard people, including Carers, Black and Minority Ethnicities, Lesbian, Gay, Bisexual & Transgender people and Refugees or Asylum Seekers.

### Healthwatch Nottingham directly engaging with local people

We collect experiences directly through the feedback centre on our website, telephone Information Line, email and social media channels. We also have a Community Engagement Officer to talk to people face to face in local communities. Throughout 2015/16 have:

- Delivered **81** activities in local communities.
- Directly engaged with **1057** people through these activities.

### Healthwatch Nottingham in Action: Talk to Us Points

We frequently run Talk to Us Points across the City to gather experiences from the citizens of Nottingham. This helps to raise our public profile, gather evidence to inform our more focused projects and build partnerships with local support groups and organisations. Citizens are able to talk to us face to face about their experiences and know that we're listening. During 2015-16 we delivered **40** Talk to Us Points, in community venues including the Indian Community Centre Association, Mellors Lodge Housing Association Facility and the Disability Living Centre.

### Healthwatch Nottingham in Action: Question of the Month

In 2015 we launched our Question of the Month feature. This is where we ask a focused question on a particular service or issue, gathering feedback over a two month period. We ask the question through an online survey and a paper postcard question. The latter helps ensure that we're listening to people who may not use online communication. We use the postcards at all of our face to face community activities and some of our volunteers also assist us to get the postcards completed at the activities they undertake on our behalf.

## Healthwatch Nottingham in Action: Insight projects

We also collect detailed patient and service user experience through focused pieces of work called 'Insight Projects'. These are determined by our intelligence and the experiences we gather from local people. Projects take place over a number of months to gather as many experiences as possible. We ask questions to understand specific issues and where possible compare our local service experiences to any national guidelines and benchmarks.

## Engaging with children and young people

419 experiences were collected from or about Children and Young People's services in 2015-16.

## Healthwatch Nottingham in Action: Children and young people's well-being

In early 2015 we started a project to understand young people's experiences of seeking help and support for mental health issues, identify the well-being of young people in the city and their awareness of where to get help if they needed it. Through activities delivered in local colleges, community venues and by working with a group of students from the University of Nottingham, who gathered experiences on our behalf, we collected over 400 experiences to contribute to the project. This included a number of young people who identified they were also from other disadvantaged and seldom heard groups.

## Listening to older people

Healthwatch Nottingham know that many older people have regular contact with both health and social care services and we are keen to promote our role to all organisations working with older people.

This year Healthwatch Nottingham has collaborated with Healthwatch Nottinghamshire to gather citizens' experiences of the quality of information and support for individuals receiving a diagnosis of dementia. Our conclusions and recommendations have been submitted to those responsible for planning and delivery of dementia services at the point of diagnosis, to help ensure that patients have the best possible experience.

Age Friendly Nottingham (AFN) has produced an action plan to meet the World Health Organisation expectations of an age friendly city. Healthwatch Nottingham is an active member of the AFN Steering Group, which is responsible for the implementation of the action plan.

Older citizens are at the heart of AFN and successful implementation relies on their involvement and the contribution of statutory bodies and cross sector partners across the city. Emphasis is placed on opportunities for early intervention that improve health and wellbeing.

Healthwatch Nottingham contributes to and helps promote the regular AFN on line newsletter - StayConnected.

## Healthwatch Nottingham in Action: Exploring experiences of dementia diagnosis

In November 2015 in partnership with Healthwatch Nottinghamshire we launched an Insight Project to gather patient and carer experiences of being diagnosed with dementia, following poor experiences received earlier in the year. As part of this project we worked with the Alzheimer's Society to gather experiences of diagnosis from the people they support. Evidence was collected through:

- A survey including measures based on NICE guidelines for dementia diagnosis
- In-depth interviews focused on the diagnosis process to gather details around the process and impact of diagnosis and establish whether NICE guidelines had been followed.

The report detailing our findings and recommendations will be published in 2016.

## Listening to people who are disadvantaged, seldom heard or vulnerable

221 experiences of health and social care services were collected from people we know were from disadvantaged, seldom heard or vulnerable groups.

But it's likely we've collected many more experiences from people within these groups as people don't always tell us their personal circumstances.

## Healthwatch Nottingham in Action: Collecting experiences from those with physical and/or sensory impairments.

During 2015-16 we started a project to gather experiences from Nottingham citizens living with a physical disability and/or sensory impairments. We wanted to know about their access to health and social care services, their experiences of these services and if they could be improved in any way. As part of this work we gathered detailed experiences through face to face conversations with:

- 18 people attending the Acorns Disability Living Centre
- 21 people with a sensory impairment who attended one of three focus groups.

The findings will contribute to the Joint Strategic Needs Assessment for this group of people, and a report will be published in early 2016/17.

## Black and Minority Ethnic communities

In a city as diverse as Nottingham, work with BME people and communities is integral to all of our activities. We seek to ensure engagement with BME communities is core business by ensuring that, as far as possible, our Board, staff group and volunteers reflect our local population and that we monitor the extent to which we are working with BME groups and individuals to enable us to undertake targeted work to address any gaps.

We have undertaken targeted activities to engage with people across the city from the BME community to promote Healthwatch Nottingham and to gather individuals' experiences of local services.

This work has included:

- Working with the local Indian Community Centre Association (ICCA) to develop a succession of Talk to Us points
- Attending 2 BAME ‘Road Shows’, organised by Self Help UK, sharing information and health related interactive activities to promote good health for BAME communities specifically.
- Attending the BME Cancer Service Awareness event at the African Caribbean National Arts Centre, jointly organised by Nottingham University Hospitals NHS Trust and BME Cancer Communities, the event highlighted work being done to reduce cancer inequalities around screening services and to reduce mortality rates.

We also gather many experiences where people have not told us about their ethnicity.

### Asylum Seekers and Refugees

We have developed good links with the local Refugee Forum and in particular, the ‘Into the Mainstream project’ which is specifically funded by Public Health to work with Asylum Seekers and Refugees to help them to get access to mainstream primary health care services. The organisation works with the City Council and Nottingham City Clinical Commissioning Group (CCG) to try to remove the barriers to accessing health services for this particularly vulnerable group.

Healthwatch Nottingham have attended meetings between the Refugee Forum and the local Nottinghamshire Local Medical Committee in order to help successfully resolve some specific access difficulties. Subsequently, we have started to work with them on issues around access to dental and optical services for people who do not speak English as their first language. This work is ongoing.

“The Refugee Forum is naturally very keen to see the views of refugees and asylum seekers represented accurately we are confident that our working relationship with Healthwatch will help to ensure this”

Kinsi Clarke, Refugee Forum

### Engaging with people who use health and social care services

We know that gathering the experience of users of health and care services provides a rich seam of data. When explored further, it can offer health and social care commissioners, providers and regulators with a significant pool of evidence to help improve the quality and effectiveness of the health and social care system. We use a range of mechanisms to capture these experiences.

### Talk to Us (T2U) points

Pop up ‘Talk to Us’ points were originally established in Clifton Cornerstone and the Mary Potter Health Centre in Hyson

Green, but have now been held in many parts of the city:

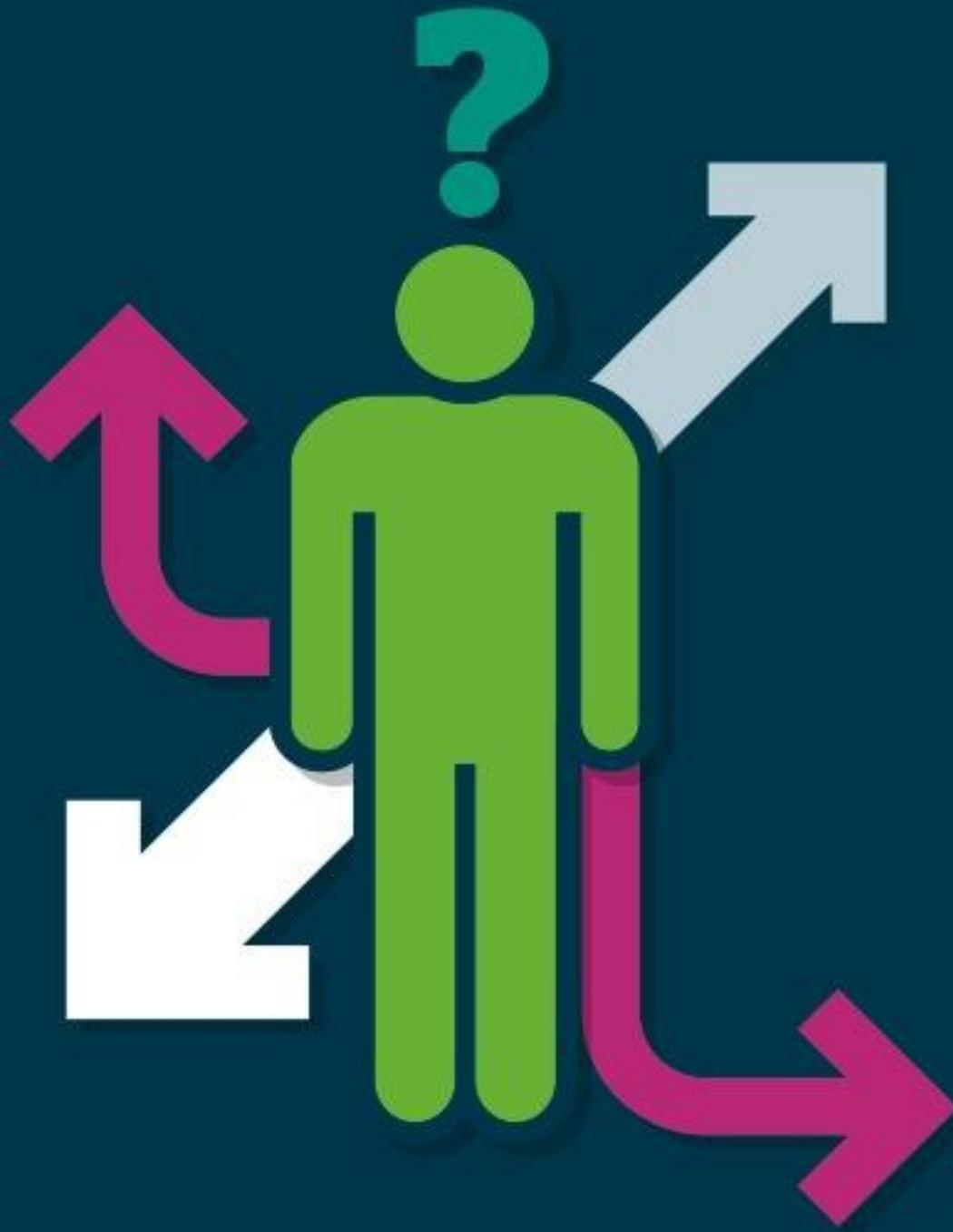
- Bulwell Riverside Joint Service Centre
- Central Library, Angel Row, Nottingham
- Asda Supermarket, Hyson Green
- Clifton Cornerstone
- The Mary Potter Centre, Hyson Green

These access points will continue to ‘pop up’ across the city. We are looking to hold them in busy places in Nottingham, in places where people are likely to have recently accessed services such as the joint services centres, hospitals and primary care services.

We also aim to use the same T2U model to seek out the views of people from specific communities through hosting sessions at particular community venues.



# Giving people advice and information

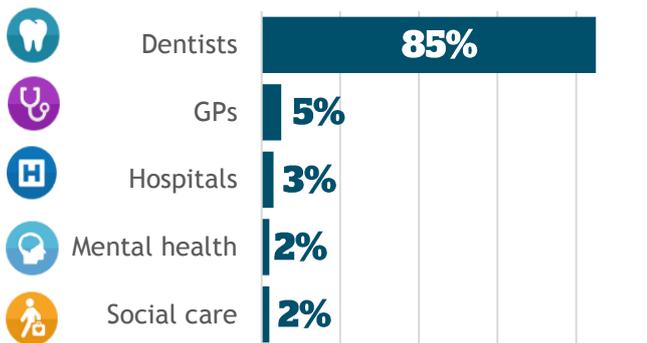


## Helping people get what they need from local health and care services

During 2015-16 we've provided information and advice about health and social care services **573** times. We do this through:

- Our information line telephone service
- Our face to face activities in local communities including our Talk 2 Us points
- Our website, which has a directory of local services

### Top five service types we provided information and advice about



The majority of people are supported with information about how to access these services and advice around how to make a complaint and who to contact if they feel they need additional support to do this.

Our website continues to be valuable source of information for the citizens of Nottingham. With information on local services accessed **15,887** times. Over the 2015/16 period there were **34,161** page views in total.



### Healthwatch Nottingham in Action: Providing information about NHS dental services

As more people become aware of our role, Healthwatch has become an important source of information concerning health and care developments locally.

In 2015 we agreed with NHS England that we would provide information and signposting for people across the city who needed access to an NHS dentist. We have been regularly receiving up to date information from them, as commissioners, and passing this on to local people who have been signposted to us by the 111 service or local dentists. We have continued throughout this year to receive a high volume of calls on our Information Line from local people, helping them to find an NHS dentist or signposting them towards services which can provide urgent dental treatment.

## Healthwatch Nottingham Information Line

We used our Information Line to both provide information about local services and to gather people's experiences of services. For example, we have provided information on how to access services, make a complaint and to whom. The Information Line was advertised on all our written literature. This is widely distributed - to GP practices, pharmacies, care homes and other public access points - across the city.

## Healthwatch Nottingham Wellbeing Event

In January 2016 we held an event for citizens from across the city to come find out about Healthwatch Nottingham and the work we have been involved in over the past twelve months.

Attendees were able to access information from a range of local services including:

- Carers Federation
- MacMillan Cancer Support
- British Heart Foundation
- Stroke Association
- Women's Aid
- St Anns Advice Centre
- YMCA
- Refugee Forum.

As part of the event, pupils from Sneinton Church of England School encouraged city residents to take care of their health and showed off the best way to get your teeth bright and white with a fantastic pirate themed display.

The event was also a great opportunity for residents in the city to learn how sharing experiences of local health and care services with Healthwatch Nottingham helps to improve the care people receive across Nottingham.



# How we have made a difference



## Our reports and recommendations

Healthwatch Nottingham meets routinely with most of its larger providers and, in line with an agreed information sharing protocol, the experiences we have gathered from local people are discussed at these meetings. We also meet routinely with complaints officers across health and social care providers and commissioners and have a very constructive relationship with these staff.

Healthwatch has not encountered a situation where an organisation has been asked to consider and account for a particular incident. There have been occasions where we have been unable to provide sufficient information for a provider to investigate an issue due to confidentiality concerns. We are still able to hold this information and would use it to identify emerging patterns and trends.

The following two examples highlight some of the more significant pieces of work undertaken during the year:

### GP Mystery Shopping Exercise

Nottingham City Clinical Commissioning Group (CCG) commissioned Healthwatch Nottingham to deliver a mystery shopper exercise across all of the 57 GP practices they commission across Nottingham city. The aim of this exercise was explore the processes and access times for getting an appointment with a GP. Our objectives were:

- To explore the patient experience of GP appointment booking processes across all Nottingham City GP practices.

- To identify the availability of GP appointments, including whether appointments are offered during evenings and weekends.
- To review the information openly visible in GP practices regarding the availability of appointments at weekends.

The mystery shopper exercise was developed in response to a new responsiveness contract issued by the CCG. Practices that had signed up to the contract sent their receptionist staff on some communication training and displayed weekend opening posters (if they have a practice nearby open on a Saturday and/or Sunday) and work towards offering urgent appointments on the same day and routine appointments within three days. Not all city practices signed up to this contract but all were involved within this exercise.

The research highlighted for example, the availability of same day appointments:

### Availability of same day appointment



The provision of information about weekend appointments was low. Only 6 practices signposted our callers to the Clinical Assessment Service (CAS) who administer these appointments. 19 practices - which do have practices nearby and which are open at weekends -

failed to provide any information on CAS over the phone. This was despite 13 of them displaying posters in their practices.

While the majority of the comments made by our mystery shoppers were positive:

“Very pleasant and helpful receptionist. Impressed with polite friendly attitude.”

“Member of staff helpful. Tried to find me alternative dates and times.”

“Extremely professional and friendly receptionist. Impressive!”

Some were not so positive :

“Very rude receptionist.”

“The woman who took the call was abrupt, monotonal and sounded very unfriendly. When I said I would check to see if I could get a list and ring back she said ok and put the phone down without saying goodbye.”

## Nottingham University Hospitals Trust

In September 2015 in partnership with Healthwatch Nottinghamshire we prepared a report to inform the Care Quality Commission (CQC) inspectors planning meeting for the inspection of Nottingham University Hospitals NHS Trust. The report was based on experiences of over 500 local people, was

aligned to the CQC core services and identified the key issues people talked about. We also included data for the Trust as a whole and include separate reports for each of the three services being inspected.

The report was presented to the inspectors during their planning meeting and we answered questions about our evidence and relationship with the Trust. Feedback from the team of inspectors was positive.

“I thought it was an excellent report and a good example of what can be achieved if CQC and Healthwatch worked closer together to share intelligence prior to key inspections.”

CQC Inspector

“Two comments in the report about poor patient experience on a surgical ward led us to include that ward in our inspection. Although we didn’t find any concerns similar to the comments, we did note this ward had more staffing issues and was not as well managed as other surgical wards.”

CQC Inspector

## Working with other organisations

### Health and Wellbeing Board (HWB)

The work of the Nottingham Health and Wellbeing Board brings together the key commissioning organisations across the city’s health and care system and Healthwatch Nottingham with non-voting representation from key health provider

organisations and voluntary sector representatives. The Board is required to have oversight of the whole system and to ensure individual organisations' plans accord with an overarching Health & Wellbeing Strategy and the Joint Strategic Needs Assessment.

Our Chair's role on the Board is to ensure there is an independent voice representing the interests of local people. We provide this by feeding any evidence and insight we have relevant to the Board's deliberations into the debate- but we also provide a written report to each meeting, and have delivered themed presentations, on the insight we have gathered and how we are using this.

### **Greater Nottingham Transformation Board**

The local NHS is tasked with redesigning the health and care system, ensuring people are at the heart of it. The Greater Nottingham (previously the South Nottinghamshire ) Transformation Board was set up with a vision to create “... a sustainable, high quality health and social care system for everyone through new ways of working together, improving communication and using our resources better”. Healthwatch Nottinghamshire and Healthwatch Nottingham sit on the Board and Citizen Advisory Group as participating observers, to ensure this change does consider the views of the people the system is designed for. See our plans for 2016/17 for more about this Board and its work.

### **Working with Healthwatch England (HWE)**

Healthwatch Nottingham has sought to support HWE's work through regular attendance by both the Chair and Chief Executive at the regional meetings convened by HWE. We have sought to engage in the collective work of this regional group wherever possible. We also ensure that all of the Evidence and Insight reports that Healthwatch produce are sent through to HWE so that they can help to form a wider picture of patient experience across the country.

### **Networking with voluntary and community sector**

As a small scale organisation we are reliant on links with other organisations to maximise our reach into all parts of and all communities within the city. To this end much of our engagement activity is focussed on linking with existing voluntary sector networks who, in turn, can put us in touch with individuals to discuss their experience of health and care services. Examples include:

- HWB3: This forum (although no longer in operation) sought to ensure the involvement of Third Sector Health and Social Care Providers in the planning, development and delivery of service provision through effective partnership working. The forum was an inclusive mechanism to help improve the channels of communication between the Third Sector and the work of the Health and Well Being Board, as well as other strategic partnerships.
- Vulnerable Adults/Children and Young People's Providers Network

(VAPN/CYPPN) are city-based forums (organised by NCVS) for community and voluntary organisations that provide services or support to vulnerable adults/children and young people in Nottingham. We attend both forums by invitation and regard them as a vital networking vehicle.

- Refugee Health Forum - this regular meeting of organisations concerned with the health issues that confront the refugee and newly arrived communities of Nottingham is convened by Public Health and has provided an opportunity for Healthwatch to link with other voluntary sector organisations working in this field e.g. 'Into the Mainstream'.

### Working with Health Scrutiny Committees

Healthwatch Nottingham has a seat on both the City Council Health Scrutiny Committee and also the City and County Council Joint Scrutiny Committee. Meetings are attended by the Board Chair or, in his absence, the Chief Executive. We ensure that we are always present as we regard these meetings as a vital opportunity to work with City Council partners looking at health issues relevant to Nottingham. During the year the agenda has included issues as diverse as changes being made in local mental health services, the local 111 Telephone service, East Midlands Ambulance Service, Urgent Care and the (now reec

recently agreed) merger of Nottingham University Hospital Trust and Sherwood Forest Trust. On all of these and more issues, Healthwatch was able to add information where it had been gathered or to assist the Committee in asking the questions that enable service providers to be held to account in this forum.

### Working with the Care Quality Commission

The changed inspection regime and restructuring of the CQC has led to new mechanisms for working together. These provide a really helpful opportunity for us to feed our information about local services - GP practices, care home provision, community health and hospital care particularly - into inspections.

Healthwatch Nottingham is now routinely sharing information with the CQC in a timely manner, although as last year, has had no reason to seek special reviews or investigations in relation to services, based on information received. We attend cross-Directorate meetings on a regular basis and have a constructive dialogue on issues of common concern.

# Our plans for next year



## Future priorities

Our work programme is driven by local people's experiences of health and social care services in Nottingham city, so we cannot predict all of our priorities for the whole year. However, we do know we'll be working on these focused pieces of work:

- Understanding experiences of mental health crisis services
- Implementing our 'Enter and View' programme in residential care facilities
- Exploring access to GP services
- Joint Strategic Needs Assessment (JSNA) Chapter on long term neurological conditions
- Working with seldom heard communities
- Strategic Engagement

We will also continue to deliver our 'Question of the Month' feature to identify issues across different services to inform service change and system transformation. Central to this will be using the evidence we collect to influence the decisions of providers, commissioners and regulators of services, with the long term aspiration of improving people's experiences of health and social care services in Nottingham city.

## Understanding experiences of mental health crisis services

In partnership with Healthwatch Nottinghamshire we have been commissioned by Nottingham City Clinical Commissioning Group to undertake some focused engagement to support the development of the Nottingham and Nottinghamshire Crisis Concordat Action Plan. We'll be collecting experiences from anyone across Nottingham City and Nottinghamshire County, but we'll also be focusing our attention on gathering experiences from people within specified seldom heard and disadvantaged groups of our community. Our evidence will help inform actions for all local crisis service providers and support people experiencing a mental health crisis to get the type of help and the help they need, when they need it.

Our report will be published in summer 2016.

## Implementing our Enter and View programme

Every local Healthwatch has a statutory power to visit health and social care services to see how they are run - under The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2012. This 'Enter & View' power enables us to see how services are working, to collect the views of service users and carers, talk to staff and observe service delivery. 'Enter and View' is not an inspection but instead an opportunity for lay people to engage with service users and their families, in order to gain a better view of how they feel about their services.

In January 2016 we attended our first meeting of the Quality Assurance Information Sharing Meeting (QUIF), a local interagency intelligence group that monitors the quality of care provided by residential care facilities and domiciliary care services. Run by the Nottingham City Council Early Intervention Team-members include the CQC, Adult Safeguarding teams, Procurement teams and Healthwatch which share their intelligence to identify providers which may need additional support to ensure that the safety and quality of care improves. To support our role on this group we are raising awareness of Healthwatch Nottingham in residential care services across the city by ensuring they all have information about us which can be made available to residents and their relatives.

Our decision to undertake an ‘Enter and View’ visit will be by recommendation from this group, informed by the intelligence it receives from all partners. This ensures that there will be no duplication of any regulatory or contractual activity. Where possible we’ll actively work with the service providers to gain their support for our work in advance of our visit to secure their ‘buy in’ if needing to implement our recommendations and to maximise our opportunities to engage with residents and their relatives.

Our visits will have three stages as identified below:



All our reports will also be published on our website, shared with the residents and relatives involved and taken back to the QUIF meeting for sharing with all members. We’ll also discuss the findings in any appropriate quality and scrutiny meetings, escalating any issues identified through the appropriate channels.

### Exploring access to GP services

We have become increasingly concerned by the mounting evidence of problems with access to GP services for people in Nottingham, especially in the inner city. While the most visible indication of this problem is the difficulty that people tell us they have in trying to get an appointment with their doctor, we know that the causes run deeper than simply pressure on services caused by high demand. We therefore intend to undertake an Evidence and Insight project to identify what is happening across the City and plan to report in the autumn.

## JSNA Chapter on Long Term Neurological Conditions

For the first 6 months of this year we intend to contribute to the JSNA for the City by finding out what services are available for people with long term neurological conditions and what people who use those services think about them. We have already undertaken one focus group and have more planned, planned going forward.

## Working with seldom heard communities

As outlined there is an expectation that Healthwatch works closely with seldom heard communities and in the forthcoming years we plan to work with refugees and asylum seekers, people in the LGBT community and those on low income. Our engagement with these communities' is cross-cutting with our other priorities, particularly our exploration of access to GPs and our work on mental health services.

## Strategic Engagement

As described on page 20, Healthwatch has worked closely with both the Health and Wellbeing Board and the Health Scrutiny Committee since its inception. During 2016/17 we intend to continue to give this joint working a high priority and commit not only to attendance and active participation in all of this years meetings but also to ensuring that relevant issues derived from the evidence we gather are placed on the agendas of these meetings for discussion and action.

We will also continue to engage with the Greater Nottingham Transformation Board and specifically, contribute to the development of the Sustainability and Transformation Plan. This Plan is due to be 'signed off' in July by the NHS Chief Executive but further elaboration of the plan will continue throughout the year. Our role will be to work alongside and as part of the Citizens Advisory Group to ensure that users of health and social care services are able to play a role in the implementation of the plan - and that their interests are safeguarded.

# Our people



## Decision making

Every local Healthwatch is required to have a procedure to make decisions and involve local people in making decisions. These are our local arrangements:

### The Healthwatch Nottingham Board

The Healthwatch Nottingham Interim Board was selected following a widely advertised application process. Collectively the Board brings a wealth of experience across health, social care and housing as well as the statutory and voluntary sector.

Each member also brings knowledge, enthusiasm and experience of engaging with Nottingham citizens as well as a strong commitment to ensure the diversity of our local population is represented, and its views are reflected in our work. The Board meets every two months and makes decisions about how we prioritise and plan our work.

You can find out more about our board members here:

[www.healthwatchnottingham.co.uk/content/meet-board](http://www.healthwatchnottingham.co.uk/content/meet-board)

### Prioritising our work

To help the Board to make decisions about the services and other areas our activities should focus on, we look at three types of priority. Decisions about when and how work is undertaken in respect of these are taken by the Healthwatch Nottingham Board:

- 1) Identifying priority areas based on concerns or issues raised through engagement activities and other

information received from local people.

How this works: An Evidence & Insight report goes to a Board meeting. This report provides an overview of the comments, concerns and compliments raised by the public and highlights any trends or any significant issues. Initially these experiences were gathered largely through our Information Line but have subsequently been expanded with comments from our new website, from social media and 'Talk to Us' points.

- 2) Looking at the work programmes of partner organisations, and gathering the views of local people to feed into relevant strategic developments and consultations.

How this works: Following discussions with the chairs of Nottingham City Health Scrutiny Committee and the Health & Wellbeing Boards, a protocol was agreed between the Healthwatch Nottingham Board, Scrutiny and the Health & Wellbeing Board. This protocol aims to ensure that issues raised in one place are appropriately considered elsewhere and that each of the three bodies:

- Have a shared understanding of each other's roles, responsibilities and priorities
- Work in an open and constructive way
- Work in a climate of mutual respect and courtesy
- Respect each other's independence and autonomy.

On major pieces of work requiring engagement, involvement or consultation of services users, carers and the public,

the bodies will work collaboratively to agree roles and responsibilities.

Where possible, the three bodies will seek to agree joint responses to consultation. For example, during 2015/16 the Health and Well Being Board consulted on a new strategy and Healthwatch Nottingham were able to convene a focus group and help Council officers collect views on their draft.

- 3) Identifying other areas of interest, such as work with specific seldom heard groups whose views may be underrepresented in decision making regarding health and social care services.

How this works: This third prioritising route allows for a horizon scan and a broad view of the local health and care system to be taken into account when setting priorities. It seeks to utilise the knowledge and experience of Board members in ‘surfacing the undercurrents’ and guard against key issues being missed or not being given due priority because individuals have not come forward to raise concerns in sufficient numbers. To also raise issues that may not appear serious enough or because the user group is small or would not wish to raise a complaint or concern.

## How we involve the public and volunteers

Healthwatch Nottingham values the contribution of volunteers in the delivery of its work and in being able to

## reach and engage with all of the communities in Nottingham.

We are committed to providing a supportive environment for volunteers to work from with support from all levels of Healthwatch Nottingham’s organisational structure. To date we have used volunteers to undertake a range of roles from administrative duties, to drafting reports for consideration by commissioners.

Our Volunteer training programme has seen the following courses delivered this year:

- Mystery Shopper training July 15
- Mystery Shopper support August 15
- Mystery Shopper Evaluation and feedback September 15
- HWB Policy Refresh - volunteers leading November 15
- Dementia Awareness training Feb 16
- Dementia project briefing March 1

We also provided 2 sessions of group induction and several individual inductions. There have been several sessions of training and advice given on specific work that volunteers undertook for us, e.g. our Information bank and information line.

Work undertaken by volunteers has varied, with many volunteers taking on multiples roles and in total 39 volunteers have worked with Healthwatch during the year, undertaking a variety of tasks. Almost 350 hours of time has been volunteered in our office helping with administration and our Information Line. A special thanks goes to our office volunteers who have been regular

supporters of our office based staff throughout the year.

We have also had assistance from volunteers to help run our 'Talk to Us' sessions and other various outreach events.

For a list of our other regular volunteers, some of whom have now moved on, see page 31.

In addition, we have worked with a much broader range of people who volunteer their time to work towards system improvements as members of the network of Patient and Public Participation (PPG) groups and service user groups attached to services and organisations across the city. Some of these volunteers work across more than one group. Irrespective, we try and ensure that we support the work of these groups and in turn look to them to help us in our work

39 activities were either led or supported by volunteers in 2015-16.

162 hours of volunteer time was donated to Healthwatch Nottingham

Further details on our volunteer roles can be found on our website

[www.healthwatchnottingham.co.uk](http://www.healthwatchnottingham.co.uk)

Our Events Volunteers promote Healthwatch Nottingham at local events and talk to the public about their experience of using health and social care services.

13 events in community venues across the city were led or supported by events volunteers during 2015-16.

Our Champion volunteers are members of existing groups and forums. They work to raise awareness of our work within local communities and seek people's views and represented us at 11 health and social care focused forums and working groups across the city during 2015-16.

Our Information Line Volunteers provide information and signpost the public to relevant services and advocacy organisations through our information telephone line.

Our Office volunteers answered 135 phone calls during 2015-16 providing information to citizens and professionals about health and social care services across the city.

*"I feel that volunteering with Healthwatch is a great way to help service improvement... Being a part of it rather than just observing it from the outside is a highlight for me"*

*Mark O'Reilly - Volunteer*



## Our Team

### Board members 2015/16

**Chair:** Martin Gawith

**Vice Chair:** Adele Cresswell

Judith Bullimore

Lucy Cooper

Rob Gardiner (until February 2016)

### Staff team

**CEOs:** Ruth Rigby (until July 2015) Pete McGavin\* (from September 2015) Phil Teal\* (from February 2016).

**Community Engagement Officer:** Tracy Lack\* (from January 2016)

**Evidence and Insight Manager:** Donna Clarke\*

**Evidence and Insight Officer:** Prema Nirgude\* (from June 2016)

**Information and Administration Officer:** Karen Emery

**PR & Communications Officer:** Nathan Hutchinson\*

**Project Officer:** Richard Mayer\*

**Volunteer Co-ordinator:** Vacant\* (Haleema Aslam until March 2016)

[\*Denotes less than full time or part time]

### Volunteer team

Ajanta Biswas

Andrea Barker

Charlotte McDonough

Christianah Olagunju

Delietha 'Cherry' Mills

Dora Kostiuk

Fadumo Yosuf

Heather Duckworth

Irsha Tariq

Julie West

Marie Claire Agius

Mark O'Reilly

Matas Sutkus

Ogochukwu Iheama

Olech Kostiuk

Oluwafunbi Ogunleye

Rob Murphy

Shaguftah Ahmed

Susan Jones

Vanessa Owen

Wiam Garod

# Our finances

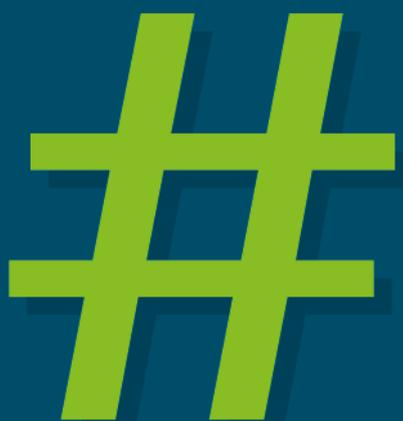


A key challenge for Healthwatch Nottingham during 2015/16 has been balancing its organisational aspirations with its ability to deliver in line with the service specification on a challenging budget. Below is a breakdown of the key elements of our expenditure against our income from the city council for delivery of the Healthwatch contract.

INCOME		£
Nottingham City Council grant funding		160,000
Commissioned income		8,950
Total income		168,950
EXPENDITURE		£
People costs - staff, volunteers and Board		123,992
Premises costs - rent, utilities, maintenance		9,669
Organisational costs -insurance, professional fees		5,747
Office costs - IT, phones, printing, stationery		10,426
Publicity and marketing		2,846
Events and activities		2,898
Events and activities		1,063
Sundries		28
Total expenditure		156,599

Because of staff vacancies during the year the staffing budget originally planned was underspent, leaving an amount of £12,351 to be carried forward into 2016/17

# Contact us



## Get in touch

Registered company address:

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Information line: 0115 859 9511

Email: [info@healthwatchnottingham.co.uk](mailto:info@healthwatchnottingham.co.uk)

Twitter: @HWNNottingham

Facebook: HealthwatchNottingham

Company number: 08525544

We will be making the content of this document publicly available by 30th June 2016 by publishing it on our website and circulating to Healthwatch England. A fully formatted version will be published and circulated to Healthwatch England, CQC, NHS England, Clinical Commissioning Group/s, Overview and Scrutiny Committee/s, and our local authority shortly after.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

If you require this report in an alternative format please contact us at the address above.

Any enquiries regarding this publication should be sent to us at [info@healthwatchnottingham.co.uk](mailto:info@healthwatchnottingham.co.uk) You can download this publication from [www.healthwatchnottingham.co.uk](http://www.healthwatchnottingham.co.uk)

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<b>HEALTH SCRUTINY COMMITTEE</b>
<b>21 JULY 2016</b>
<b>WORK PROGRAMME 2016/17</b>
<b>REPORT OF CORPORATE DIRECTOR FOR RESILIENCE</b>

## **1. Purpose**

- 1.1 To consider the Committee's work programme for 2016/17 based on areas of work identified by the Committee at previous meetings and any further suggestions raised at this meeting.

## **2. Action required**

- 2.1 The Committee is asked to note the work that is currently planned for the municipal year 2016/17 and make amendments to this programme as appropriate.

## **3. Background information**

- 3.1 The Health Scrutiny Committee is responsible for carrying out the overview and scrutiny role and responsibilities for health and social care matters and for exercising the Council's statutory role in scrutinising health services for the City.
- 3.2 The Committee is responsible for setting and managing its own work programme to fulfil this role.
- 3.3 In setting a programme for scrutiny activity, the Committee should aim for an outcome-focused work programme that has clear priorities and a clear link to its roles and responsibilities. The work programme needs to be flexible so that issues which arise as the year progresses can be considered appropriately. This is likely to include consultations from health service commissioners and providers about substantial variations and developments in health services that the Committee has statutory responsibilities in relation to.
- 3.4 Where there are a number of potential items that could be scrutinised in a given year, consideration of what represents the highest priority or area of risk will assist with work programme planning. Changes and/or additions to the work programme will need to take account of the resources available to the Committee.
- 3.5 The work programme for the remainder of the municipal year is attached at Appendix 1.
- 3.6 Nottingham City and Nottinghamshire County Councils have established a Joint Health Scrutiny Committee which is responsible for scrutinising the commissioning and delivery of local health services accessed by both City and County residents.

**4. List of attached information**

4.1 Appendix 1 – Health Scrutiny Committee 2016/17 Work Programme

**5. Background papers, other than published works or those disclosing exempt or confidential information**

5.1 None

**6. Published documents referred to in compiling this report**

6.1 Reports to and minutes of the Health Scrutiny Committee during 2016/17

**7. Wards affected**

7.1 All

**8. Contact information**

8.1 Jane Garrard, Senior Governance Officer  
Tel: 0115 8764315  
Email: [jane.garrard@nottinghamcity.gov.uk](mailto:jane.garrard@nottinghamcity.gov.uk)



Date	Items
21 July 2016	<ul style="list-style-type: none"> <li data-bbox="479 268 2002 368"> <p>• <b>Scrutiny of Portfolio Holder for Adults and Health</b> To scrutinise the performance of the Portfolio Holder for Adults and Health against relevant Council Plan priorities (Nottingham City Council)</p> </li> <li data-bbox="479 405 2002 505"> <p>• <b>Healthwatch Nottingham Annual Report</b> To receive and give consideration to the Healthwatch Nottingham Annual Report (Healthwatch Nottingham)</p> </li> <li data-bbox="479 542 887 572"> <p>• <b>Work Programme 2016/17</b></p> </li> </ul>
22 September 2016	<ul style="list-style-type: none"> <li data-bbox="479 646 2002 780"> <p>• <b>Adult Integrated Care Programme</b> To review progress in delivery of the Adult Integrated Care Programme and the impact for service users; and to look at the Equality Impact Assessment for Assistive Technology (Nottingham City CCG)</p> </li> <li data-bbox="479 817 2002 917"> <p>• <b>Nottingham City CCG Strategic Priorities</b> To hear about the CCG's future strategic priorities (Nottingham City Clinical Commissioning Group)</p> </li> <li data-bbox="479 954 2002 1088"> <p>• <b>Homecare Quality – Adult social care and safeguarding perspective</b> To review the role of adult social care and safeguarding teams in ensuring the quality of homecare services meets the needs of service users (Nottingham City Council)</p> </li> <li data-bbox="479 1125 2002 1259"> <p>• <b>Seasonal flu vaccination programme</b> To review the uptake of the seasonal flu vaccination programme during 2015/16; and how effective action to improve uptake has been (NHS England, NCC Public Health)</p> </li> <li data-bbox="479 1295 887 1326"> <p>• <b>Work Programme 2016/17</b></p> </li> </ul>

Date	Items
20 October 2016	<ul style="list-style-type: none"> <li>• <b>Access to services for people with ME (myalgic encephalopathy/ encephalomyelitis) – follow up (tbc)</b> To review progress in improving the access to services for people with ME since the Committee considered this issue in March 2015</li> <li>• <b>Implementation of ‘Wellness in Mind’ Nottingham City Mental Health and Wellbeing Strategy 2014-17 (tbc)</b> To scrutinise how outcomes for local people have improved as a result of the Strategy.</li> <li>• <b>Tackling health inequalities – pre-conceptual and ante-natal care (tbc)</b> To review the impact that access to, and uptake of pre-conceptual and ante-natal care is having on health inequalities in the City <p style="text-align: right;">(NCC Public Health, Nottingham City CCG)</p></li> <li>• <b>Work Programme 2016/17</b></li> </ul>
24 November 2016	<ul style="list-style-type: none"> <li>• <b>Availability and quality of GP services in Nottingham City</b> To review the current and future provision of GP services <p style="text-align: right;">(Nottingham City CCG)</p></li> <li>• <b>End of Life/ Palliative Care Review – Implementation of Recommendations</b> To scrutinise implementation of agreed recommendations</li> <li>• <b>Work Programme 2016/17</b></li> </ul>
22 December 2016	<ul style="list-style-type: none"> <li>• <b>Joint Health and Wellbeing Strategy Actions Plans (or briefing paper?)</b> For information</li> <li>• <b>Work Programme 2016/17</b></li> </ul>
19 January 2017	<ul style="list-style-type: none"> <li>• <b>Work Programme 2016/17</b></li> </ul>

Date	Items
23 February 2017	<ul style="list-style-type: none"> <li>• <b>Nottingham CityCare Partnership Quality Account 2016/17</b> To consider performance against priorities for 2016/17 and development of priorities for 2017/18 (Nottingham CityCare Partnership)</li> <li>• <b>Work Programme 2016/17</b></li> </ul>
23 March 2017	<ul style="list-style-type: none"> <li>• <b>Work Programme 2016/17</b></li> </ul>
20 April 2017	<ul style="list-style-type: none"> <li>• <b>Work Programme 2017/18</b> To develop the Committee's work programme for 2017/18</li> </ul>

#### To schedule

- **Childhood immunisation programme**  
To review the reasons for lower uptake of the childhood immunisation programme in the City (compared to the County) and how these reasons are being addressed (NHS England/ NCC Public Health)
- **End of Life/ Palliative Care Review**  
To scrutinise implementation of agreed recommendations (date to be determined depending on response)
- **Diagnosis of terminal and/or life altering conditions**  
To identify what follow up and support is provided to people diagnosed with terminal and/or life altering conditions and their carers; and how this can be improved.
- **Teenage pregnancy rates**  
To review whether the focus and investment in reducing teenage pregnancy over the last 10 years has resulted in a sustainable reduction in teenage pregnancy rates
- **Current and future capacity within the care home sector**
- **Access to dental care**

To review whether access to, take up and quality of NHS dental services has improved since scrutiny's review of dental care in 2009

- **Cardio-vascular disease/ stroke**

To review how effective work to reduce levels of CVD/ stroke is in the City

- **Tackling isolation and loneliness**

- **Role of adult social care and safeguarding teams in ensuring the quality of homecare services meets the needs of service users**

- **Lupus/ sickle cell**

To review the support available to people with lupus/ sickle cell

### **Visits**

- Urgent Care Centre – prior to Urgent Care Centre item at June Committee meeting. 15 June 10am
- Connect House
- CityCare Partnership Clinic, Boots Victoria Centre

### **Study Groups**

- The role of health literacy in tackling health inequalities (autumn 2016 tbc)
- End of life/ palliative care services for children and young people (spring/ summer 2017)

### **Items to be scheduled for 2017/18**

- **Urgent Care Centre**

To review performance of the Urgent Care Centre against expected outcomes

- **Integrated Urgent Care Pathway**

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