



Healthwatch Stockport Work Programme Monthly Report September 2014

1st September - 30th September

Healthwatch Stockport is a Company Limited by Guarantee
Registered Company Number: 8442532



The Following Report is a summary of the issues raised and/or work undertaken by Healthwatch Stockport and its members with regard health and social care in Stockport.

Healthwatch Stockport Operational Team - Issues which have been highlighted by Healthwatch Stockport Representatives.

Section 1: Operational Team

Members: John Leach, David Kirk, Tony Stokes, Mary Foden, Maria Greenwood, Anand Dutta, Jon Burke, Roy Oliver, June Westley, Support: Gavin Owen

29th September 2014

To be verbally reported at October Core Group meeting.

1.1 Stockport Health & Wellbeing Board

Healthwatch Lead: Tony Stokes

16th September 2014

Three subjects were covered.

1. Healthier Together

Healthwatch Stockport contributed a Briefing to the Board outlining our concerns with the Healthier Together process. Our main concerns included:

- Lack of information or consultation on primary and community care.
- Preferences are predicted to be made on a geographical basis.
- Running a consultation over the summer holidays is not appropriate unless another 4 weeks is added to the consultation time.
- Issues with transport times
- The overall response rate (currently 6,000) is far below the 50,000 target
- Financial implications of the proposals are not clear.
- The only significant question in the Consultation which asks the public to indicate priority hospitals - could lead to consequences of an unpopular decision being blamed on the public.
- The Healthier Together Programme appears to have been developed without the significant public involvement required by legislation.
- In the terminology used we believe the use of the term Special Hospitals to be misleading and inappropriate. We suggested Lead Hospitals in its place.

We put forward the following as a recommendation to the Health & Wellbeing Board:

Healthwatch Stockport would like the Board to note the Briefing and would urge the Board to consider the points and to be satisfied that;



- the consultation has been carried out with full public involvement
- Healthwatch Stockport feels it has met its own statutory obligations
- the Healthier Together Programme and any decision making conforms to all legislative duties prior to making a response to the Healthier Together Consultation.

The Healthwatch contribution to the Healthier Together debate is available to read on the Healthwatch Stockport website: <http://tinyurl.com/HealthiertogetherHWS> I have agreed a press release that will be issued dealing with our contribution to the debate.

2. Better care fund submission sign off

The better care fund submission details are in the minutes. One item of note is that this submission includes a request for money to set up a community falls service.

3. Domestic Violence in Stockport

The domestic violence debate details are in the meeting minutes.

Tony Stokes

Date of next meeting: 5th November

1.2 Stockport Clinical Commissioning Group

Healthwatch Lead: Tony Stokes

10th September 2014

I am highlighting the following items:

The emergency department performance at Stepping Hill against the expectation that patients will be seen within 4 hours of presentation at the department. The agreed plan with Monitor is that this target will be achieved within 95% by September. The good news is that the target was achieved in August.

There has been a gap noted in the provision of psychological therapies which will be investigated further. Some patients do not meet the criteria for them to receive treatment at the primary care level and do not meet the criteria for an assessment by a psychiatrist. Thus they receive no help despite their need.

Tony Stokes

Date of next meeting: 8th October

17th September 2014

CCG Provider Quality Meeting Report.

The item worthy of special note:

The representative for the commissioners of the 111 service and the patient transport services (Arriva and NWAS) attended the meeting. We were able to make our views known.



Firstly that whilst the transport services were improving more improvement was needed. Secondly that the 111 listening events were badly planned. We were informed on the 11th September that this event was taking place on the 16th September.

Tony Stokes

Date of next meeting: 15th October 2014

1.3 Stockport NHS Foundation Trust

Healthwatch Lead: David Kirk

18th September 2014

Stockport NHS Foundation Trust (SFT) Subgroup

The group was updated on the last meeting with the Foundation Trust Board.

The group was informed about the Regulatory action that Monitor had taken in respect of the Trust.

A question was to be put to the Council of Governors asking them what they are doing to hold the Non-Executive Directors to account for the performance of the Board in respect of the recent regulatory action, as it is their statutory duty to do so and what Healthwatch Stockport could do to help.

Suggested that the Healthwatch Stockport SFT subgroup could meet prior to each board meeting (directors and governors) to reach common views and attend the boards as a group.

Healthwatch Stockport has also requested a copy of the Deloitte report (Independent review of Governance) under the Freedom of Information act. The first response is that this is being withheld. HWS to explore the appeals process.

David Kirk

10th September 2014

Patient Representative Group - Division of Medicine

Sara Shingler brought along and introduced members of her management team, some of whom will attend subsequent meetings. We had a presentation followed by a Q+A session on the new D. Block extension. The ground work has already started. A second trip to Spain to recruit more nurses is being planned. Winter planning for bed escalation has started,

Sheelagh Peel, Healthwatch Stockport Representative

Date of next meeting: 22nd October 2014

25th September 2014

Stockport NHS Foundation Trust Board Meeting

David Kirk and Sheelagh Peel attended the Stockport NHS Foundation Trust Board meeting on



Thursday 25th September.

A presentation was given by a consultant microbiologist about a new antibiotic resistant gut bacteria which has its highest prevalence in North West England and recently led to a small outbreak on M4 in June/July this year. It is called Carbapenemase- Producing Enterobacteriaceae (CPE). It is harmless for most of the population but can be harmful to vulnerable people. Treatments are available but they can be toxic. This has led to control measures being set up for this particular organism and highlighted again the necessity of very good hygiene control and monitoring within the hospital.

Nationwide information is still being collated.

Recommendation: That the Healthwatch Representatives for Public Health & the CCG ask if awareness of its existence has been passed to appropriate personnel, e.g. GPs.

The integrated performance report highlights the performance 'hot spots' and it is pleasing to note that after failing Q1 the Trust is now reporting that the 4 hour A & E target will be achieved in Q2.

The prevalence of pressure sores went up in August in the community setting.

Staff appraisals, training and attendance are a concern however the August holiday period may account for this.

The area I would highlight of serious concern is waiting time for both admitted and non-admitted treatment.

Recommendation: That Healthwatch Stockport seeks feedback from the public on their experience of waiting for treatment at the Trust, for consideration by the SFT sub-group.

Other key matters of note are;

1. That the Trust has produced a draft Quality Improvement Strategy 2014-19
2. That following a Nursing and Midwifery staffing review the Board has approved an investment of £1.45m.
 - i. This is to ensure that ratios comply with NICE Safe Staffing guidelines.
 - ii. The achievement of supervisory status for ward Sisters and Charge Nurses.
 - iii. The allocation of additional staff to wards identified as non-compliant according to evidence based acuity audit results.
3. In line with one of the compliance requirements of the recent regulatory action by Monitor the Trust is now 'buddied' with Kettering NHS Foundation Trust for support in relation to A & E.

Details of the Board papers can be found following the link below.

https://www.stockport.nhs.uk/webdocs/BoardMeetings/11AA_Public%20BoD%2025.09.14%20document%20pack.pdf

David Kirk



1.4 Stockport Council - Adult Social Care

Healthwatch Lead: June Westley

24th September 2014

Healthwatch Stockport Adult Social Care Subgroup

Representatives have attended the Adult Safeguarding Board and the Joint Strategic Learning Disability Management Group. Notes from the latter are included below.

The Care Act contains requirements for Safeguarding Boards and we need to clarify roles and accountability, especially for HWS.

The meeting between Terry Dafter, Director, June Westley and Gavin Owen has been postponed and is now scheduled for October 16th.

Agenda items will include Safeguarding Board responsibilities as above; implications of and plans for implementing the Care Act; new structures and responsible officers for the Adult Social Care Department and commissioning arrangements, following the retirement of a number of senior staff; the organization of services for young people in transition [18+ and/or 0-25]; obtaining evidence for the progress and outcomes of service developments [e.g. hospital discharges and integration with Health Services].

June Westley

Date of next meeting: 5th November 2014

15th September 2014

Joint Strategic Learning Disability Commissioning Group

This meeting was held in the format of 2 groups for discussion of strategy for future services.

The background is that Stockport Council will need to make £39 million savings over the next 2 years and the LD services will need to make £3million savings of this.

A report outlining plans to achieve the first tranche is being presented to the Scrutiny Committee on 15th September. The report can be seen on the Council website, Democratic Services section.

Discussions were held around four topics, which have been identified as priorities:-

- The Learning Disability SAF (Service Assessment Framework)
- The LD savings target and plan for achieving this
- Developing the housing with care market
- Winterbourne View plans

The discussions aimed to make concrete plans and allocate responsibilities in relation to these topics including timescales and required outcomes in the next 12 months; action so far; who needs to be involved; leads for actions and next steps.

Summary action plans will be circulated shortly and will be used as the programme for this Strategic



Group.

The need to work closely with service users and their carers/families, including children nearing transition was agreed.

June Westley

1.5 Children, Families & Young people

Healthwatch Lead: Maria Greenwood

30th September 2014

No report received

1.6 Pennine Care

Healthwatch Lead: Mary Foden

30th September 2014

No report received

1.7 Public Health

Healthwatch Lead: Roy Oliver

11th September 2014

Public Health Sub-group

Present: Roy Oliver, Sheelagh Peel, Alan Watt, Eve Brown, Anand Dutta, Mike Lappin

Apologies: Tony Stokes, David Atkinson, Peggy Hall.

1. There was no JSNA project leads meeting in September, there will be a full day on the 3rd October to discuss and review the data collected. Roy would obtain paper copies of the Pharmaceutical Needs Assessment consultation document.

2. Public health training, Roy will send out the Health chat flyer so that the group can book the training days through Kirsty.

3. Chlamydia: Sheelagh agreed to look at the answers received from the council and advised if we need some more clarification. We will also ask if there will be a reduction in screening due to cuts in youth services.

4. Flu jabs: After a discussion it was agreed to ask Laura Brown the take up of Flu jabs by GP practices.

Roy Oliver

Next meeting: 11th of September 2-4pm at Graylaw House.



3rd September 2014

Pharmacy Needs Assessment Project Group

The meeting reviewed the actions from the previous meeting which were all completed. We then reviewed version 3 of the needs assessment where we added 10 other pharmacies. Version 4 which will go out to consultation and put forward at Scrutiny committee on 21st October 2014 and the Health & Wellbeing Board on 5th November 2014.

The consultation is publically available, but is specifically targeting a number of stakeholders (which includes Healthwatch). The Public Health group will draft a response to the consultation on behalf of Healthwatch Stockport, which will then be circulated to the Core Group for input and agreement.

The next meeting will be on 19th November 2014 where we will review the consultation responses.

Mike Lappin, Healthwatch Stockport representative on Pharmacy Needs Assessment Project Group

Date of next meeting: 19th November 2014

1.8 Equality and Diversity

Healthwatch Lead: Jon Burke

30th September 2014

No report received

1.8 Discharge Subgroup

Healthwatch Lead: Peggy Hall

3rd September 2014

Discharge from Hospital Subgroup

Attendance remains good and some excellent progress has been made in respect of responses to our requests. We have received a great deal of information relating to hospital discharge, including homeless patients, from Stepping Hill Hospital; Pennine Care and Tameside General plus an item from the Healthwatch Stockport Patient Experience Group. A request has been circulated to other relevant Healthwatch Stockport sub-group leaders for any information they may already hold which would be helpful to us. Our response to the Healthwatch England Special Inquiry has been acknowledged but no response from Wythenshawe so far - a reminder will be sent shortly, together with an agreed letter to Stepping Hill Hospital, asking for information about re-admissions.

We have agreed that, due to the quantities of information sent via e-mail and requirements of printing out, Kirsty will arrange to keep Master Paper Copies at Graylaw House which will be available for any interested parties to read.

Until such time as we receive feedback from the community, our progress will be measured by the amount of information we gather from the providers and others, which will enable early monitoring action as necessary.

As a result our next steps will be agreed actions to acquire copies of a specific Enter & View report and a complaints report; a request for a specified Enter & View visit to Stepping Hill Hospital and a



copy of a procedure for residents' transfer to and from a local Care Home. The Home Instead protocol for supporting a client into a Care Home will also be obtained. NWAS are carrying out a patient experience survey during August and September and we have diarised to ask for the results in late October/November.

Invitations to speak to the Discharge Group will be made to Wendy Stewart and Dawn Mansfield, Age UK Stockport.

Peggy Hall

Date of next meeting: Wednesday 8th October 2014 at 2.00 - 3.30pm

An update on Healthwatch Development and on-going Subgroups

Section 2: Development Team

Support: Kirsty Bagnall

30th September 2014

No meeting held

2.1 Healthwatch Stockport Reading Sub-group

Healthwatch Lead: David Atkinson

29th September 2014

Nothing was sent to the reading group this month.

Shell Sheridan

2.2 Healthwatch Stockport Training Sub-group

Healthwatch Lead: Sue Carroll

9th September 2014

Attended Flag Training Session at their Offices. I would call it familiarisation rather than training.

Learned their interaction with the public particularly with outreach and what they can, will and cannot do. Went through some case studies. Very impressive.

Healthwatch as a whole is well aware of Flag's useful contribution to the people of Stockport, but I think individual members would benefit from these sessions. I am aware that others have attended, although not at mine. Only 3 people attended.

Eve Brown



2.3 Healthwatch Stockport Publicity and Communications Sub-group

Healthwatch Lead: David Atkinson (filling in for Joyce Drummond)

1st September - 30th September 2014

Twitter: 1,402 overall Tweets, 36 new Followers, 20 new mentions, 41 new retweets and 15 favourites. On twitter this month, we took a question for our Q+A Session, live tweeted a Healthier Together consultation and took part in many discussions about Healthier Together (including people such as Ann Barnes (Chief Executive of Stockport NHS Foundation Trust), Lisa Smart (prospective parliamentary candidate) and Mark Hunter MP).

Facebook: 538 Total Page Likes, 3 posts and monthly total post reach of 160.

Website:



- Overall, the website received 295 visits, 232 of these were unique visitors with 68.14% of visitors were visiting the website for the first time.
- There were 833 page views with people visiting 2.82 pages per visit. The average time spent on the website was 2m 30s.
- After the home page, the most visited page was the *about* page. This was followed by the *news* page, *reports* page, *meet the team* page and the *Healthwatch Stockport Criticises "Flawed" Healthier Together Consultation Process* news item.

Positive Press Articles:

- *Chance to ask Health Questions*, Stockport Express, 3rd September 2014 about the Mental Health Q+A Session
- *Swappers Swarm for Football Stickers*, Stockport Independent, September 2014 about the JSNA sticker swap market stall
- *Your chance to quiz health bosses over proposed changes to NHS*, Stockport Express, 10th September 2014 about the Mental Health Q+A Session
- *Watchdog Voices its concerns*, Stockport Express, 24th September 2014 about our briefing to the Health & Wellbeing Board about Healthier Together

Kirsty Bagnall



4th September 2014

Wai Yin Women's' Group

I visited Wai Yin Women's' Group in Manchester on September 4th. Louise Wong welcomed me. Of the 50/60 people there most could not speak English. Louise interpreted when necessary. Most members had GPs and managed with interpreters. Hardly any of the group had hospital experience. Quite a lot of the Healthwatch Stockport literature was taken. Louise plans to get feedback from the members and pass it on to us.

Margaret McCausland, Healthwatch Stockport Community Champion

18th September 2014

Headway

There were about 11 people there, less than expected. Of those two were from outside Stockport (across the road). I spoke about Healthier Together and Healthwatch Stockport. I was asked one question which I did not know the answer to:

What was talked about was:

The difficulty of accessing the Epilepsy service at Salford Royal and the general 'non integrated care' for example a Stockport patient in a non-Stockport Hospital does not have support services as they would if they lived for example in Manchester.

I handed out the individual membership and feedback forms. Rachel asked patients to return them to her at a Wednesday session

As a first meeting I found it interesting and hope that all people there thought so too. As I meet with other neurological groups a common thread might develop. I am waiting to hear from the Parkinsons group.

Mike Cain, Healthwatch Stockport Community Champion

17th September 2014

Briefly spoke at Marple Bridge & Mellor U3A by invitation of Chairman. Particularly recommended members to get involved with Healthier Together Consultation but, of course referred to role of Healthwatch Stockport. Some 25 HT Consultation Documents taken together with a few Healthwatch - some 5 or 6, I estimate.

Alan Watt, Healthwatch Stockport Community Champion

2.4 Healthwatch Stockport Enter & View Functions

Healthwatch Lead: Gerry Wright

30th September 2014

Reports on Arriva (Stepping Hill Hospital), Cale Green Nursing Home and Manor Medical Practices



currently being fact-checked.

Kirsty Bagnall

2.5 Patient Experience and Feedback/Evidence Gathering

Healthwatch Lead: Tony Stokes

30th September 2014

No meeting held

Section 3: An update on Healthwatch Representatives on other committees

3.1 Equality & Diversity Board - Pennine Care

Healthwatch Representative: Tony Stokes

30th September 2014

No meeting held

3.2 Stockport Area Medicines Panel

Healthwatch Representative: Mike Lappin

9th September 2014

Mike had previously asked how many people in Stockport were suffering from Rickets. Dr Heather Proctor indicated she would let him know when she had obtained the information. Healthwatch Reading Group have reviewed the patient information on Rivaroxban.

Current Performance

Cost growth and item growth are both high compared with Greater Manchester and England.

Waste Proposal

Practices had been questioned on what action they were taking to reduce waste. Jan Gruise (Prescribing Advisor) had prepared a paper based on a process deployed by Bury, Wigan, Middleton, Heywood, Rochdale, Tameside and Glossop CCG's. The meeting supported the policy.

Mike Lappin

3.3 Stockport Cancer Programme Board

Healthwatch Representative: Anand Dutta

30th September 2014

No report received



3.4 Stockport Care Home Forum

Healthwatch Representative: Gerry Wright

30th September 2014

No report received

3.5 Stockport Care Record

Healthwatch Representative: Joyce Drummond

30th September 2014

No report received

3.6 Stockport Children's Trust Board

Healthwatch Representative: to be arranged

30th September 2014

No report received

3.7 Stockport Clinical Policy Committee

Healthwatch Representative: Mike Lappin

27th August 2014

Gina Evans is to be asked what the waiting times are for IAPT, the meeting understanding is that there are no other problems. **Recommendation : Healthwatch check with the users to see if this is the case**

Most of the meeting was taken up discussing statins. New guidance says CG181 we should change from SIMVASTATIN to ATORVASTATINE if the money can be found from savings.

Also at the moment statins are initiated on patients with a 20% risk of CVD (cardiovascular), the new guidance is for a reduction of the treatment threshold to 10% at an increased prescribing cost of £408.838. Savings of £179.170 will be made from the management of cardiovascular events. We voted to follow NICE guidance but to look to close any non-effective services.

I asked about the apparent move of neurological services from the FT to Salford, as requested by Epilepsy Action. I was informed that it was a technical change. At the moment we pay the Foundation Trust who pay Salford. Now Salford counts activity and charges NHS England, the new commissioner. I asked that the questions still go to the quality committee.

Recommendation: Healthwatch asks NHS England if they plan to make any changes to neurological services.

Mike Lappin



17th September 2014

This meeting was not attended as the late change of date made it inconvenient.

Mike Lappin

3.8 Stockport Dementia Champion Committee

Healthwatch Representative: Tony Johnson

30th September 2014

No report received

3.9 Disability Stockport Forum

Healthwatch Representative: Tony Johnson

10th September 2014

- 1) Introductions and apologies.
- 2) Lucie Newsam talked at the last meeting about being a Dementia Champion. The meeting thanked Lucie for her informative talk.
- 3) A wheelchair issue had been resolved by Sue Clark. The Stockport Foundation Trust policy followed DVLA (Driver and Vehicle Licensing Agency) guidelines by not allowing people who had had a seizure to be given a wheelchair. This was incorrect. A lady who used a wheelchair and suffered a seizure, had her wheelchair taken off her. The policy was looked into, corrected and the situation has been resolved in a suitable manner.
- 4) There was discussion about taxi firms and their sometimes incorrect approach to disability. Disability Stockport had carried out some disability awareness training and the uptake had been really good. The interaction on the day was good and the training well received. It was stated that some taxi drivers refuse to take guide dogs and thus their owners! The police advised that this could be perceived as a “hate crime” and should be reported to the hate crime unit. However, the vast majority of drivers are very good. There was talk of a taxi rank at Stepping Hill Hospital. The position is unsure at this time and negotiations are on-going at present.
- 5) It was mentioned that there is a company called Brighter Futures who collect used aids and adaptations and re-cycle them as a not-for-profit organisation.
- 6) It was stated that there are not enough adapted homes in Stockport. There are literally 1 or 2 in every 150 homes made with adaptations. It was agreed that this was not enough and that more should be built.
- 7) Hate Crime week is the 3rd week of January. More information will follow at the next meeting or be circulated beforehand.
- 8) There will be the usual buffet in December at Disability Stockport and all are welcome. Speakers have been invited.
- 9) It was stated that there have been 9 cases of hate crime brought to the attention of the police.



It was agreed that people are starting to take this type of crime seriously. If a case it to be brought successfully, the CPS need as much information as possible to stand a chance of succeeding.

Contact: david.moore@homeinstead.co.uk

Date of next meeting: Wednesday 10th December 2014

David Moore

3.10 Stockport EPAC (End of Life Portal for Anticipatory Care) [previously Stockport Electronic Palliative Care Co-ordination System Project Board]

Healthwatch Representative: David Moore

30th September 2014

No report received

3.11 Stockport Electronic Prescribing Board

Healthwatch Representative: Joyce Drummond (Mike Lappin deputy)

30th September 2014

No report received

3.12 Stockport End of Life Care Programme Board

Healthwatch Representative: Gerry Wright

30th September 2014

No report received

3.13 Stockport (Community) Falls Prevention Group

Healthwatch Representative: Sheelagh Peel

30th September 2014

This group are re-convening after a long period on Tuesday 20th September.

Recommendation: A Healthwatch Stockport member to take over from Sheelagh as representative on this group.

3.14 Stockport Health & Wellbeing Scrutiny Committee

Healthwatch Representative: John Leach

9th September 2014

The main item on the agenda was Update On Unscheduled Care at Stepping Hill Hospital

An update was provided by Ann Barnes (Chief Executive) and James Sumner (Director of



Operations). Details of the previous meeting at which this matter was considered can be found at <http://democracy.stockport.gov.uk/ielssueDetails.aspx?lId=13559&Opt=3>

Item Agenda 5 Investing in Stockport - Executive Proposals

A Report was considered from the Leader of the Council and the Executive Councillor (Corporate, Customer and Community Services)

Item Agenda 6 Portfolio Performance and Resources - first update report 2014/2015

A report was considered from the Corporate Director for People

Both the above reports were regarding a recent meeting on 12th August when the Executive brought forward a set of proposals designed to address the budget reduction requirement.

John Leach

3.15 Stockport Local Pharmacy Committee

Healthwatch Representative: Joyce Drummond

30th September 2014

No report received

3.16 Stockport Maternity Programme Board

Healthwatch Representative: Loretta Alao

30th September 2014

No report received

3.17 Stockport NHS 111 and Out of Hours

Healthwatch Representative: Tony Stokes

30th September 2014

No report received

3.18 Stockport Older People's Committee Meeting

Healthwatch Representative: Joyce Drummond (Sheelagh Peel filling in)

2nd September 2014

The group are struggling with membership and a large advertisement was placed in Stockport Age magazine.

Sheelagh Peel

Date of next meeting: 7th October 2014

3.19 Stockport Pharmacy Application Requests



Healthwatch Representative: Mike Lappin

30th September 2014

No application requests received

3.20 Medicines Management Committee - NHS Foundation Trust

Healthwatch Representative: Anand Dutta

30th September 2014

No report received

3.21 Stockport Quality & Provider Management Board - [Sub-group of the NHS CCG]

Healthwatch Representative: Tony Stokes

30th September 2014

No report received

3.22 Stockport Safeguarding Adults Board

Healthwatch Representative: June Westley

30th September 2014

No report received

3.23 System Resilience Group (Formally Urgent Care Working Group)

Healthwatch Representative: David Kirk

12th September 2014

I attended what was the Urgent Care Working Group (formerly the Unscheduled Care Board) meeting on Friday 12th September. Following guidance from NHS England this group has now been reformed as the 'System Resilience Group' (SRG).

NHS England has outlined the process for the development and submission of operational resilience and capacity plans for 2014/15. This also includes the formation of 'System Resilience Groups' which will be the forum where capacity planning and operational delivery across the whole health and social care system will be coordinated

The purpose of the Stockport System Resilience Group is to bring together both urgent and elective care within one accountability process; underlining the importance of whole - system resilience and recognising that both parts will impact simultaneously on the effectiveness and efficiency of our health and social care system. The SRG will be the forum where capacity planning and operational delivery across the whole health and social care system will be coordinated.

The SRG will be sighted on but will not directly lead:-



- Better Care Fund
- The four Stockport Strategic Reform Programmes.

This was an inaugural meeting and I am delighted that the CCG is still inviting the participation of Healthwatch Stockport (continuing their commitment and culture of openness and transparency).

There are two major items to report;

1. Stockport Foundation Trust is reporting a significant improvement in the A & E 4 hour target. Q1 achieved the target and at the time of writing Q2 was on track to be achieved.
2. NWAS are experiencing significant operational pressures.

David Kirk

3.24 Greater Manchester Chair and Chief Officer Meeting

Healthwatch Representative: John Leach and Maria Kildunne

30th September 2014

No report received

3.25 Stockport CCG Locality Meetings

Healthwatch Representative: Gerry Wright

30th September 2014

No report received

3.26 Health & Social Care Informatics (HSCI) Group

Healthwatch Representative: David Moore

30th September 2014

No report received

3.27 Stockport Safeguarding Vulnerable Children

Healthwatch Representative: Helen McDonald

30th September 2014

No report received

3.28 Strengthening of GP Services

Healthwatch Representative: David Kirk

17th September 2014

Strengthening GP services



I attended this meeting on the 17th September 2014. I felt that our contribution could only be one of observing and commenting. I felt that the CCG's decision to provide additional funding to GP's (bids subject to specific audited outcomes) to reduce the numbers of avoidable admissions, attendances, referrals and the cost of prescribing together with some other core requirements of improved access to GP's, was a series of 'pilots' and a starting point in the transfer of monies from one part of the health economy to another.

In terms of the process I felt that the CCG finance department should perhaps have been involved earlier so that the bids were standardised to enable greater transparency and evaluation of value for money.

I have no reason to doubt that properly controlled additional funding will enhance the services for a significant number of patients but there is a risk of delivering the strategic objective of this investment.

David Kirk

Section 4: Reports from Healthwatch Stockport Task & Finish Groups.

4.1 Complaints Task & Finish group

Healthwatch Lead: Gerry Wright/Tony Stokes

30th September 2014

Report currently being written up.

4.2 Diabetes & Podiatry Task & Finish Group

Healthwatch Lead: David Moore

30th September 2014

No report received

4.3 Discharge from Hospital back to nursing/residential homes

Healthwatch Lead: John Leach

30th September 2014

No report received

4.4 District Nurse Service User Group

Healthwatch Lead: Tony Stokes/Carol Stokes

30th September 2014

No report received



4.5 Healthier Together

Healthwatch Lead: Mike Lappin

28th August 2014

External Reference Group

We reviewed the interim meeting. The question had been asked as to whether the ERG had the power of sign off of the Healthier Together Consultation. It was decided that the meeting minutes would be looked up to see what the terms of reference were. We looked at what consultation events still needed volunteers to observe them. Volunteers were forthcoming. We discussed the Healthier Together programme. We were reminded that it was not a vote and we must make sure the majority of people have been informed. The cost difference between groups 4 and 5 is very small but the quality will go up.

Recommendation: Suggest to the committee in common that a review is carried out in five years' time to see what has actually been put in place.

Mike Lappin

19th September 2014

Healthier Together Transport

I attended the Healthier Together Transport event at The Heatons Centre Friday 19th Sept 2014

Some points were clarified and these may be useful to Healthwatch Stockport and answer some points raised at CCG Patient Panel last week;

Each Hospital chosen to be a specialist hospital in the Healthier Together consultation will offer all current services PLUS each of the three specialist services, Enhanced A&E, Acute Medicine, Major General surgery

Currently in Greater Manchester there are enough staff only to staff three specialist hospitals. It is proposed to increase the numbers of appropriate staff by training and recruiting. All current services will remain in place

An increased demand on North West Ambulance Service resources will be made in Greater Manchester. Similarly increased demand on surrounding ambulance services that are required to transport patients greater distances. Currently there are also contractual definitions that mean they will transport patients to the nearest hospital and the patient will be transferred to NWS for transport to the appropriate hospital. This is not in the patients' interest and only a contractual negotiation needed.

Thinking is that a single point of contact for appropriate transport needs to be established to enable those unfamiliar with the route at the stressful times when patients are treated in remote hospitals.

Hospitals are increasingly large, and consideration to bus routes passing through hospital campus (egg at present some buses travel through Stepping Hill, whilst Manchester Royal is served by adjacent bus routes along the front, back and one side as well as the dedicated service from Manchester



Piccadilly Railway station.) People need to be made aware of the correct bus stop and then hospital signage should clearly direct those unfamiliar with the site

Consideration should be given to the need for carers to be present where appropriate and to provide on site accommodation for carers (this is currently routine in children's hospitals, and I know we built an accommodation for those adults accompanying patients for major surgery at our NHS hospital in Liverpool)

The need for familiar faces and surroundings is recognised in many cases - for example, dementia, mental health.

If Stepping Hill is not chosen then Manchester Royal would be an alternative for residents of Stockport

Mike Cain, Member of the Healthier Together Task & Finish Group

4.6 It's in the Drawer

Healthwatch Lead: Clem Beaumont

30th September 2014

Letter drafted to request GP Masterclass. More information about referral process being collected prior to sending.

Clem Beaumont

4.7 Redevelopment of A&E

Healthwatch Representative: Mike Lappin

30th September 2014

No report received

If you are a representative on any of the above boards/committees please ensure you submit your reports back to the Healthwatch Office to be included in the Core monthly reports. If there is nothing to report please let us know so we do not report 'no report received'

30th September 2014
[Ends]