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| Notes from Citizens’ Assembly Meeting |  |
| Held on Thursday 6th April 2017 |
| In Taunton Conference Centre at Somerset and Bridgewater College |
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Meeting Notes

**Present Apologies**

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| Kevin Dixon, Healthwatch Torbay - Chair | Lance Allen, Healthwatch North Somerset |
| Jacqueline Briggs, Healthwatch Somerset Project Coordinator, Guest | Joanna Parker, Healthwatch South Gloucestershire |
| Ellie Devine, South West Senate Manager | Jayne Pye, BaNES |
| Pat Eagle, Healthwatch Gloucestershire | Amanda Stevens, CEO Healthwatch Cornwall |
| Pat Foster, The Care Forum Volunnteer Coordinator | Tess Trappes-Lomax, Healthwatch Devon |
| Trish Godfrey, Healthwatch North Somerset | Paula Williams, Bristol |
| Gilly Gotch, Healthwatch Devon |  |
| Cliff Puddy, Healthwatch Somerset |  |
| Sarah Redka, South West Senate Support Officer |  |
| Graham Taylor, Healthwatch Cornwall |  |
| Malcolm Watson, Healthwatch South Gloucestershire |  |
| Phil Yates, South West Senate Chair |  |

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|  |  | **Action** |
| **1** | **Welcome and introductions**  |  |
|  | Round table introductions – attendance and apologies listed above. |  |
| **2** | **Senate and CA Business Session** |  |
| **2.1** | **Terms of Reference** |  |
|  | The Citizens’ Assembly (CA) Terms of Reference (ToR) are reviewed annually. SRedka reviewed and made minor amendments to the ToR and these were circulated prior to the meeting for information. |  |
| **2.2** | **Senate and CA work plans** |  |
|  | The Senate and the CA work plans were circulated prior to the meeting for information. The CA work plan mirrors the upcoming work of the Senate. This is a rolling programme and is updated throughout the year.Caroline Gamlin the South West Medical Director has suggested the CA work on developing a one page guidance for Clinical Commissioning Groups (CCGs) about the key points from the CA perspective that need to be taken into account within STPs and proposals for large scale service change. This would include a checklist of what CCGs need to think about and include in their clinical review documentation (pre-consultation business case (PCBC)) in order to ensure their plans are well prepared and suitable for review by citizen representatives in order that they ‘get it right’ from the start. The CA members present agreed this was a worthy piece of work and the Senate team will liaise with KDixon with regards to the brief and taking this forward.**SR to prepare a project brief and confirm a date for the CA to work on this.** | **SR** |
| **2.3** | **Clinical Reviews** |  |
|  | The Senate will be required to provide clinical review of the following:* North Somerset Sustainability
* Devon Acute Services
* Gloucestershire Acute Services

It is likely that the Senate will also review: Cornwall STP; Somerset Outcome Based Commissioning; and Bristol, North Somerset and South Gloucestershire (BNNSG) Stroke services.Input form the CA will be required for each review that the Senate undertakes and CA members will be invited to join review panels according to areas of expertise and knowledge as well as geographic location. Panel members are usually chosen from out of area to ensure there are no conflicts of interest.PYates confirmed that CA involvement to clinical reviews was essential in order to provide a well-rounded review and that asking ‘non expert’ questions could be very revealing in picking up the finer details of the proposals and in ensuring the CCG develops clear options and proposals. It was noted that the contribution from the CA to the clinical reviews is particularly important as the outputs form part of the NHS England wider assurance process.The Senate team aim to ensure that CA members who are part of clinical review panels are given the review documentation in plenty of time in order that they can prepare for the panel session. |  |
| **2.4** | **Senate Assembly** |  |
|  | The Senate Assembly annual conference was held on 30th March as a Clinical Review Masterclass. The day involved presentations and workshops and delegates gained a lot of information and insight in to the review process. The slides and outputs from the day are available from the Senate website here: <http://www.swsenate.org.uk/senate-assembly/meeting-archive/> . CA members reported the public consultation workshop was not very interactive and there was little chance to discuss and highlight examples and experience and was generally below the level of knowledge in the room.The CA members present today agreed that until they had been involved in a clinical review panel it was difficult to know if they required further training in relation to contributing to clinical reviews.  |  |
| **2.5** | **Senate Council Meeting – 18th May 2017** |  |
|  | The next Senate Council meeting will be 18th May. There is currently no topic agreed for this meeting although there is a possibility this meeting will be used to look at Public Health England (PHE) logic modelling. As usual, a CA member will attend the 18th May Senate Council with KDixon and if any CA input is required to be fed in to this meeting, the Senate team will contact the CA via email.The Senate team discussed that in general, the topic for the Senate Council meetings is not confirmed in time for the CA to prepare and discuss the topic at the CA meetings which are scheduled for around one month prior to each council meeting.There was further discussion around the fact that the majority of the Senate’s work is providing clinical reviews and that therefore the use of the Senate Council meeting dates to debate topics is likely to reduce. |  |
| **2.6** | **CA Membership** |  |
|  | In order for the CA to maximise its ability to provide a broad perspective and input to the Senate’s work, it is important that the CA membership is maintained and that each geographical region is represented and given the chance to contribute.At the last CA meeting, it was highlighted that it appears more difficult to recruit new members to the CA from the Healthwatch organisations which are managed by the Care Forum, which are Bristol, BaNES, South Gloucestershire, Swindon and Somerset. In light of this, Morgan Daly the CEO of the Care Forum was invited to attend the CA or send a representative to this meeting to discuss how the Care Forum operates and what we can do to help ensure we have enough representatives from these regions. Jacqueline Briggs the new Project Coordinator for Healthwatch Somerset and Pat Foster the Volunteer Coordinator for the Care Forum attended the meeting to discuss this.PFoster gave an update confirming that the Care Forum are contracted for the following: Healthwatch Bristol and Healthwatch BaNEs for 1 more year, Healthwatch South Gloucestershire and Heathwatch Swindon for 2 more years; and they have just put in their tender for a further contract for Healthwatch Somerset. The Care Forum is a charity and has an infrastructure based around supporting health and social care. Part of their remit is to recruit and train volunteers who they also encourage when appropriate to be involved with the CA. PFoster confirmed that the distance required for CA members to travel to attend meetings is often off-putting to prospective members – in particular those from Swindon.The Care Forum is running a ‘volunteers week’ in May and KDixon has agreed to attend this to promote the CA and to talk to volunteers about the opportunity to become a CA member.It was also confirmed that any prospective CA members are welcome to attend a CA meeting to get a feel for the type of contribution and involvement required as well as the chance to discuss membership with KDixon or SRedka prior to joining.Finally, PFoster was invited to attend the CA meetings regularly to maintain continuity with the Care Forum Healthwatch regions.Thanks to the Care Forum for their input to this discussion. | KD to attend volunteers weekSR to continue to engage HW re membership gaps |
| **3** | **Discussion Topic: How is your Healthwatch ensuring patient involvement in the STP process?** |  |
|  | Each regional representative gave an update about their Healthwatch.* Devon – in general appears to be ahead nationally with their public engagement. In particular South Devon and Torbay CCG partnership working with Healthwatch Torbay for a series of public engagement events has been held as an example of good practice.
* Healthwatch Devon – held engagement events as lectures. Would have been better as facilitated round table discussions.
* Gloucestershire – members of the Trust and CCGs attended, answers were guarded. Nothing further planned.
* Somerset – engagement relating to the STP was started last year. Documentation needs to be written in plain English.
* BaNES, Swindon and Wiltshire STP – Healthwatch Swindon representative Mark Edwards is attending engagement events and Healthwatch is involved in how the STP is being set up.
* North Somerset – no engagement as yet but is working with BNSSG STP. STP summary available from Healthwatch website.
* Cornwall – so far the Overview and Scrutiny Committee has rejected plans.

In general Healthwatch is involved but needs to maintain some distance in order to act as the critical friend.NHS England has just published ‘Next Steps on the Five Year Forward View’. The summary of this would provide a useful update for those interested in the current state of play.Following the Senate’s review of emergency general surgery, inclusion of these recommendations will be assessed as the Senate picks up the review of STPs.PYates confirmed that the current versions of the STP frameworks for change are draft. STPs are currently engaging with the public about specific plans that are part of the framework for change. Where large scale change is planned the Senate will be requested to review and inform the assurance of these plans. |  |
| **4** | **Healthwatch Update Session** |  |
|  | Each CA member gave an update about what is happening within their Healthwatch area. |  |
| **5** | **Next Meeting** |  |
|  | The next meeting will be 8th June at Taunton Rugby Football Club |  |