

Meeting:	STRATEGIC ADVISORY BOARD
Date of meeting:	20 February 2020
Location:	Oak Room Priory Campus Lundwood Barnsley
Board members present:	Adrian England (AE) - Chair Margaret Lindquist(ML) Tony Alcock (TA) Wendy Hardcastle (WH) Mark Smith (MS)
Attendees:	Sue Womack (SW) - Healthwatch Manager Angela Andrews (AA) - Minutes
Apologies:	Ian Guest (IG) Margaret Baker (MB)
1.Welcome and Introductions	AE welcomed everyone to the meeting
2.Declarations	Nothing new to declare.
3.Minutes from the previous meeting	Approved as a true record
4.Matters Arising	To be covered in meeting feedback Action 1 SW followed up with Your Voice Partnership and asked for terms of reference, on receipt of TOR it was clear Healthwatch could not attend. SW thanked them and asked them to consider inviting Healthwatch on an ad-hoc basis. Action 2 Enter and View training has now taken place Action 3 Long term plan has been sent out to Board
5.Action log	<ol style="list-style-type: none"> 1. SW to meet with complaints team at Barnsley Hospital and send through any information relevant to them 2. SW to check through Decision making procedure
6.Meeting attendance feedback	
Sue Womack	<ol style="list-style-type: none"> 1. SW held a team meeting to review the annual engagement plan this is ongoing.

	<p>2. Meeting with Terri Milligan, Manager of Patient experience/voluntary Services at Hospital was very informative and open. They spoke about volunteer recruitment and the work they are involved in. They plan to set up end of life volunteers, SW will send information / patient experience reports relating to their work.</p> <p>3. SW was interviewed by the campaign company for scoping work in relation to patient experience and engagement. When the SYB ICS facilitated an Engagement Discovery Day with NHS England/ Improvement last year one of the elements on the action plan that NHSE/I agreed to fund taking forwards was a piece of work to better understand patient experience across SY&B and whether there's a model that could be put into place across SY&B to better integrate it with engagement. It is recognised that across the partnership within individual organisations there are a range of engagement, patient experience, equality and diversity staff. Where they sit within their organisation varies, as do their reporting mechanisms and their relationships with each other. It is recognised that committees that join experience and engagement do exist in some individual organisations, with some emerging across places but the full picture is unknown.</p>
Margaret L	<p>1. (Care Homes) ML sent skills presentation and oral healthcare report to SW, AE has not seen this report at the Health and Wellbeing board so has suggested it is put on the next agenda there. The meeting looked at Salford as an example as they have improved after working with CQC. SWYFT are looking at widening their range of equipment. Performance had improved. There was a need to improve ratings for 7 homes. Enhanced care in care homes had a new spec to include things such as GP visits</p> <p>2. Urgent and Emergency Care Board. No one from Barnsley Federation/SWYFT/Mental Health so there was a lack of update on previous meeting issues raised. YAS are now making more referrals to Barnsley Rightcare. BDGH Emergency Department has had its busiest ever month but the rate is settling down now. 310 patients visited daily at one point. Waiting targets were missed on several occasions but hit the target over the last weekend. The flow from Emergency Department to Acute Medical Unit has been problematic. Flu cases are now reducing along with national average. Generally, this is better than last year.</p>

	<p>Barnsley Rightcare is generally steady but hold-ups are occurring because of problems setting up packages of care. SWYFT is 40% over capacity across re-ablement and intensive care services.</p> <p>Neighbourhood teams very busy across all areas.</p> <p>BMBC face challenge for home care service, some one-off funding is available but this is not effective, as it needs long-term support.</p> <p>There are problems with staffing due to zero hour contracts and poor pay, especially in the run up to Christmas.</p> <p>Procurement Contracts need to change and this is under review. There are also problems with Residential care quality. "Excellence in Care" is underway to try to drive up standards.</p> <p>They hope to address pay, training and career pathways. ML queried how Barnsley's payments to homes and agencies compared with other neighbouring authorities such as Wakefield and was told that they compare favourably.</p> <p>Primary Care utilisation rates at iheart are up.</p> <p>Concerns around GP requirements to cover residential homes are under discussion.</p> <p>YAS activity was slightly down over the last month but had a peak in third week in December.</p> <p>Concerns were expressed about demands on staff missing meal breaks and finishing late on shifts.</p> <p>The Chair queried readmission figures. The figures used by the CCG don't reflect those prepared by BDGH there is a need to investigate discrepancies;</p> <p>Ongoing problems with Mental Health admissions.</p> <p>BDGH starting to plan from next week for the next two winters and Chair strongly advising other partners to do the same.</p> <p>Information was requested from all partners regarding Easter planning by next meeting.</p> <p>Richard Jenkins is to chair new Urgent and Emergency Care Commissioning Group, which will deal with all 5 Place, based groups across South Yorkshire and Bassetlaw.</p> <p>Intending to set up ways of sharing information, his deputy will now chair the Barnsley Board.</p>
Adrian England	<p>1. Integrated Wellbeing Team meetings.</p> <p>The North and North East areas still behind due to lead of North East leaving.</p> <p>AE showed the proposal for the next 12 months. Paper to be circulated to the Board.</p> <p>A Communications officer is to be employed by BMBC at Integrated Care level.</p> <p>The Providers Care Board agreed for a Project Manager to be employed for 12 months by SWYFT</p>

	<p>AE ran through the meeting levels shown in the pictogram given out in the board papers and reported that the facilitators for the development groups had been very good.</p>
<p>Wendy Hardcastle</p>	<ol style="list-style-type: none"> 1. Carers Strategy Group Training for carers was discussed. Concerns were raised about sending people out of area. Digital resources have been implemented. Carers week will take place on the 9th June; more information is due to come out about this. 2. The Learning disability team workshop is to go ahead to look at future plans to improve the lives of people with disabilities.
<p>Mark Smith</p>	<ol style="list-style-type: none"> 1. Safeguarding Adults Board Meeting MS is meeting with Barnsley CVS to discuss safeguarding in the sector. Following some incidents, it appeared that the multi-disciplinary approach was not working well, this included poor communication between agencies, especially general practice. An action plan had been put together. 2. Barnsley Mental Health Crisis Care Concordat Suicide Prevention Partnership(BMHCCCSPP) A good presentation was given about wellbeing cafés in Leeds. This is being considered as a service needed in Barnsley. The Samaritans gave a presentation on their outreach work. MS raised a governance issue, and when revised suicide contagion plan comes out it will be the owned by the BMHCCCSPP. MS ran through some of the statistics presented at the meeting. 3. A SWYFT patient experience meeting is due to be held, attendance at this will be looked at when details come out.
<p>7. Managers' Report</p>	<ol style="list-style-type: none"> 1. Decision Making Procedure - This was discussed and urgent decision-making to reflect decisions being made between AE, MS and SW if required, needed further consideration, to be reported at the next board. SW to look at HW England definition of a relevant decision. Procedure will be brought back to next meeting after it has been checked. 2. Intelligence update New monthly intelligence summary report presented to Board. These reports will combine to make quarterly reports. Board agreed this was useful information for them

	<p>to have. Nothing had been received relating to Social Care other than info from CQC about care homes. CQC information will be added to the social care section of the report when relevant. MS shared his concern about people having to purchase drugs online. AE stated the report was excellent.</p> <p>3. British Heart Foundation (BHF) Following conversations BHF have decided it will only run with phase two of their initial plans, Healthwatch will conduct interviews in clinics, there will be meetings in March and April to discuss and work will start in May. The revised cost was discussed and agreed.</p> <p>4. Declare Your Care LL and GD carried out a short piece of work; they spoke with 21 people, 20 of which had a learning disability.</p> <p>5. Healthwatch Website The new proposed website has very little information on the running of it, there is no feedback centre a form is being used instead, and MS proposed sticking with the current system due to the issues with this one, all agreed.</p> <p>6. Recruitment Advert to go out 24th Feb to replace staff member leaving.</p>
8. Any other business	<p>1. MS asked about young carers report, SW updated that they were waiting for one of the schools responses. If a reply was not received imminently, a comment will be added to the report to explain the delay.</p> <p>2. A Positive feedback and celebration day put forward</p> <p>3. MS will be consulted on patient safety work</p>
9. Date of Next Meeting	<ul style="list-style-type: none"> • March 2020