

Somerset CCG Engagement Advisory Group (SEAG) held at **Somerset CCG**,
Wynford House, Lufton Way,
 on Monday 15 January 2018

Present:

Karen	Ball	Healthwatch Somerset
Chelsea	Bennett	Homegroup
Rosie	Benneyworth	Somerset CCG
Claire	David	Somerset Parent Carer Forum
Jill	Downey	Somerset CCG
Tina	Emery	Somerset Parent Carer Forum
Nigel	Engert	Wincanton PPG
James	Gorman	Kooth
Susan	Hartnell-Beavis	Queens Camel PPG
David	Heath	Somerset CCG
Debbie	Hicks	Stokehill
John	Keep	SPARK
Sue	Lilley	Somerset CCG
Alison	Male	Yeovil District Hospital
Jo	McDonagh	Somerset County Council
Virginia	Membrey	Bruton Surgery PPG
Allison	Nation	Somerset CCG
Annie	Paddock	Somerset CCG
Sue	Place	Balsam Centre, Wincanton
Brenda	Prentice	Somerset Community Care Matters
Alex	Priest	MIND South Somerset
Cliff	Puddy	Healthwatch
Lee	Reed	Somerset CCG
Paull	Robathan	South Petherton Hospital League of Friends
Janet	Royston	Bridgwater Senior Citizens Forum
Mandy	Seaman	Compass Disability Services
Steve	Sharples	South Petherton and Martock PPG
Haley	Skipp	Yeovil District Hospital
Jackie	Sopwith	Somerset Sight
Annie	Shillabeer	South Somerset MIND
Vicky	Sullivan	SPARK
Eileen	Tipper	North Petherton Surgery, PPG
Margaret	Twidale	Springmead PPG

1.0 **WELCOME AND APOLOGIES**

David Heath, Non-Executive Director at Somerset CCG introduced himself to the group and welcomed the attendees to the first meeting of SEAG for 2018. David explained that he was chairing in place of Nick Robinson, the new Chief Executive of Somerset CCG who had recently broken his ankle.

Apologies were received from:-

Pat Barthram, Peter Berman, Mary Clarke, Simon Clifford, Elaine Cox, Sue Creighton, Matt Day, David Dix, Angela Farmer, James Gorman, Louise Hawkins, Michael Hope, Andy Kendall, Mary Kelly, Caroline Mead, Leila Middlehurst-Evans, Lucy Nicholls, Debbie Penny, Gaynor Price, Helena Sturridge and Caroline Toll.

2.0 **MINUTES OF MEETING HELD ON MONDAY 16 OCTOBER 2017**

The minutes of the last meeting from Monday 16 October 2017 were approved with the exception of:-

Karen Ball – change from “Evolving Communities” to “Healthwatch Somerset”.

3.0 **MATTERS ARISING**

A successful JSNA Workshop was held in December with the Health and Wellbeing Board (H&WB) and a broader audience. A draft framework for the H&WB Strategy will be taken to the H&WB on 18th January and therefore there will not be a conference in January. This is very much still a work in progress; an engagement and consultation plan is being put together for activity planned for March – June 2018. This will involve all SEAG members who wish to contribute.

JD thanked those who attended the brainstorming meeting which has led to several potential models to use for the SEAG open day later in 2018.

Action: JD to circulate the options to the brainstorming group for their comments.

4.0 **SOMERSET PARENT CARER FORUM (SPCF) UPDATE**

Help@somersetparentcarerforum.org.uk

<https://www.dropbox.com/s/0kxf9j51kb6uf39/Tina%20Emery%20-%20SEAG%20-%20TE%20Version.pptx?dl=0>

Tina Emery, South West regional representative for SPCF gave a short overview of the organisation which is run by parent carers for parent carers in Somerset. She explained that everyone involved at SPCF has a special educational need or disability. SPCF signpost parents, grandparents and extended families to services available in their area. There are currently 151

parent carer forums in the UK covering each local authority.

Each PCF includes parent carers with a full range of experiences in Health, Education and Social Care as their children have a wide range of conditions. Parents in the network total over 80,000 who contribute to local, regional and national consultation. Parent Carer Forums continue to develop closer working relationships with local authorities and health authorities at all levels, including local working with Clinical Commissioning Groups (CCGs).

TE explained that SPCF use social media to reach 22000 monthly using Twitter, LinkedIn and Facebook. (The support group on Facebook has over 577 people in a closed secure group which has strict rules to ensure there is no “name and shame”.)

Paediatricians frequently recommend SPCF as a support group due to the lengthy time it can take to diagnose autism (it can take an average of 4 years).

SPCF work closely with other organisations including Healthwatch Somerset and a young group (13 years +) called “The Unstoppables”, to gather their views on what they are currently working on.

JD asked TE about the SPCF health and social care survey /autism strategy and confirmed that SEAG would be happy to become involved.

Actions:

- **TE to send link for survey to SEAG when live.**
- **SEAG to feedback to TE with their observations on what would benefit service users at different stages of the autism diagnosis pathway.**

5.0 **ITEMS TO TAKE TO SERVICE USERS ENGAGEMENT GROUP (SUEG) MEETING IN FEBRUARY 2018**

Mandy Seaman confirmed that the SUEG dates have been set for 2018 and confirmed that they will be going out to the wider network to encourage new members to join this year.

Items for SUEG include:-

- Accessibility of new housing
- Independent living model
- Dementia day support
- Non-emergency patient transport survey (Lee Reed)

JD asked to reopen the conversation on what SEAG thinks about social care as members have asked to broaden the scope to include this on the agenda.

Somerset Mental Wellbeing Service (SMWS) has been commissioned, working with various groups including Somerset MIND. SMWS will hold self-management workshops in the area to improve individual's mental wellbeing.

Action: JD to invite a commissioner for Social Services to attend SEAG for a discussion on how social care services are commissioned.

6.0

AN OVERVIEW OF THE FUTURE CCG DIRECTION AND PRIORITIES

<https://www.dropbox.com/s/dv3wnogphyf8807/Rosie%20Benneyworth%20-%20SEAG%20presentation%2015.1.18.pptx?dl=0>

Rosie Benneyworth, Director of Strategic Clinical Services Transformation at Somerset CCG explained how she is leading the work on developing a system wide strategy to ensure high quality and sustainable health services for the people of Somerset. She acknowledged that CCG had been rated inadequate over the past 12 months and that Nick Robinson the new Chief Executive was casting fresh eyes over the organisation. RB went onto explain that NR was undertaking an internal view of Somerset CCG's governance arrangements.

RB described the significant winter pressures felt across the NHS at the moment and described how:-

- Significant planning with hospitals, communities, GPs and social care had helped to keep patients well cared for
- The CCG continues to work with Public Health to ensure everyone possible has had their flu vaccines.
- There are daily reporting exercises across the system to identify where everyone is, how many beds available, and how many patients are waiting to be discharged.

Exploration work on where joint commissioning could work continues. RB stated that this was not about merging organisations but understanding how we work together more appropriately to improve the service.

7.0

STP UPDATE

RB acknowledged the torturous process of the STP over the last couple of years and referred to the changes of leadership at Somerset CCG, Yeovil District Hospital, Sompar and Musgrove Park Hospital. These Chief Executives now meet regularly and are now much more positive about the STP.

The STP is now responsible for the following three areas:-

1. The Clinical Services Review, covered later on the agenda;
2. Managing the pressures on services over the winter period; and
3. System turnaround and addressing our financial situation, including:

- In Somerset there is a deficit of £12m, which regulators have agreed, and an additional gap of 18m, giving a total £30m adrift from where we should be.
- Workforce situation is very difficult with a shortage of GPs and nurses.
- Reducing Clinical Variation and 'Getting It Right First Time': Benchmarking ourselves against similar areas in the country and looking at different models.
- Business as usual: Good care in hospitals, ensuring everyone who needs it gets it.

An alliance board between Taunton and Somerset Trust and Somerset Partnership and Yeovil District Hospital are going to explore how the three organisations can work together.

RB confirmed that the turnaround work is going through Project Initiation Document (PID) stage and there will then be discussions regarding the clinical variations work. RB confirmed she wanted the public to get involved in each of the different work programmes.

Action: RB and JD to look at SEAG involvement in the clinical variation aspect of the turnaround programme.

SHB suggested it was sometimes easier to have a proposal we can comment on or criticise, rather than 2 years of saying what we want. DH acknowledged that there had been a lot of consulting at low level and that it was crucial for SEAG to be part of this. Rosie confirmed the need for significant engagement from SEAG in the future.

RB acknowledged that Somerset is well behind in terms of our thinking and overall STP progress. She has been working with Dorset and Devon CCGs to identify where the pitfalls are. Dorset CCG took 3-4 years to go through this process and we have learned a lot from them.

RB is ensuring that patient centred care is at the centre of everything and has spent some time with NHS England to ensure we meet all legal requirements to get approval to proceed.

CLINICAL SERVICES REVIEW

8.0 RB announced that she was now looking at clinical services, including hospitals, GP services, mental health, maternity and primary care services. She would like to seek SEAG's views on:

- What are the big priorities?
- How many hospital beds do we need?
- What will the workforce look like?
- What should services look like?
- Unmet needs

RB will be liaising with analysts to understand what beds we have got, what demand, how many people need help. Models of care workgroups will be

set up, in which SEAG and other patient groups will be involved with. There will be difficult decisions to be made about resources.

People who have been waiting to engage with the STP have had a frustrating experience. Rosie reassured the meeting that the work that has already been done would continue to be used and would not be wasted.

Engagement will commence once we have been through the NHSE sense-checking process and formal consultation will commence in 2019.

JD referenced the SEAG terms of reference. SEAG was asked 15 months ago to change its terms of reference to reflect the groups's key role in the STP public engagement process. Jill asked the group to confirm if they were happy to be involved with the Clinical Services Review as described by RB. The meeting confirmed that it wished to retain its role, as described in the terms of reference.

9.0 **ANY OTHER BUSINESS**

None

10.0 **DATES OF SEAG MEETINGS 2018**

Monday 16 April	1.30pm registration/networking and refreshments for 2pm start	Taunton Vale Sports Club, Gipsy Lane, Staplegrove, Taunton TA2 6LL
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