

Healthwatch Sheffield: VCF FORUM Notes

Held at Quaker Meeting House 13th October 2016 10:30 - 13:00

Chaired by Judy Robinson (Healthwatch Chair)

Facilitated by: Sue James (Interim Healthwatch Manager); Hardeep Pabla (Healthwatch Engagement Coordinator)

Numbers in Attendance: 23

This was the first Connecting for Change VCF forum meeting held and led by Healthwatch. Judy introduced the meeting by saying that the Forum is intended to act as a place for the VCF to network on health and social care, and opportunity to develop a joint voice and an additional set of eyes and ears to help inform HWS about current concerns drawn from members' experience and contacts.

It will add value not add work.

Key Issues for Organisations re: Health and Social Care (whole group)

- Cohesion: people becoming isolated in communities (impact on mental health)
- Allocation of resources: services in VCS and community are struggling
- People withholding information (hierarchies). People in communities where views are not seen as valuable
- Lack of awareness: of a range of services/rights (e.g. personalisation and direct payments)
- Earlier intervention of palliative care or illness
- Early years /children's health and wellbeing - is this addressed effectively
- Not seeing joined up approach to H&SC
- Health not on the agenda in devolution
- Mental health pathway and connection to services
- Addiction
- People not being aware of mental health (e.g. district nurses) - need a holistic approach
- Inequalities
- More acceptance of the professional status of all workers especially around assessments.
- Timeliness in all aspects - prevention

Presentation on Sustainability and Transformation Plan and/or Shaping Sheffield Plan delivered by Helen Stevens, CCG

Introduction: Every health and care system across England has been asked to come together, to create its own ambitious local blueprint for accelerating implementation of

the Five Year Forward View. 44 STPs have now been established. The South Yorkshire and Bassetlaw STP covers populations covering Sheffield, Barnsley, Rotherham, Doncaster and Bassetlaw and will serve as an umbrella plan under which constituent plans will sit. STPs will cover the period between October 2016 and March 2021, and will be subject to formal assessment in July 2016 following submission in June 2016.

National context and priorities: Following publication of the NHS Five Year Forward View (5YFV) and the challenges identified, there has been broad agreement that in order to create a better future for NHS, all those with a stake in health and care must make changes to how we live, how we access care and how care is delivered.

This means that as providers and commissioners of health and care, we need much more focus on preventative care; working together to find new ways of meeting people's needs and identifying ways to do things more effectively and efficiently. It is recognised and accepted that we need to work collaboratively to close the gaps in health, finance and quality of care if we are to meet the future needs of our patients in a sustainable way.

In December 2015, the NHS Shared Planning Guidance asked every local health and care system to come together to create their own ambitious local blueprint for implementing the priorities as laid out in the 5YFV. These are place-based, multi-year plans built on the needs of local populations - Sustainability and Transformation Plans (STPs).

STPs will build and strengthen local relationships across health and care and will work together to deliver genuine and sustainable transformation in patient experience and health outcomes for the future.

Following the presentation Helen took some questions and agreed to feedback following the meeting. Below are the responses received from Helen.

Diabetes. Although it isn't a priority outlined in the plan, it is embedded within it - mainly because it is already a national priority and has been for some time. The plan outlines the importance of prevention and also how we intend to support people more in their local communities and it is in these areas where we will focus on people with diabetes (as well as other long term conditions).

Mental health. We absolutely recognise mental health and learning disabilities as areas where we need to focus. I recall the question being about how will we pick up those people who aren't known to health and care. I think the answer to this is that we are saying we will be looking at people's whole needs - as in both their physical and mental wellbeing. So, those people who are seen locally for health issues (which are likely to be a result of their mental health) will be treated for both. By developing services in local communities, which will include social prescribing as well, we will be able to care for people with mental health and learning disabilities near to where they live.

Diversity and consultation. Work to date on areas that are priorities in the plan has included local conversations with people in Barnsley, Bassetlaw, Doncaster, Rotherham

and Sheffield. Each of these has taken account of the local population. We're now getting ready to have conversations about the STP strategy and our ask of Healthwatch and voluntary sector partners - with who we want to work closely to have local conversations - will be that we connect with the many different communities in our region. We will measure this too. And we are keen to hear from people who want to shape how we connect widely - so please get in touch with me helen.stevens11@nhs.net

Helen agreed for the presentation to be put onto Healthwatch website.

Key Issues (individuals)

- The fact that Health and the council are withdrawing financial support from small voluntary organisations mean that families health and wellbeing are undermined as services are reduced or withdrawn (Celia Jackson-Chambers)
- There is a general reluctance to 'make a complaint' but perhaps more willing or acceptable to give feedback - could this be made easier. AND - suicide prevention in Sheffield - no obvious promotion/education. Group for this seems to have a low priority - last met May2016 - next due 1.11.16 - too long (Dorothy Cook)
- Funding, isolation in communities, delay in referrals to children's mental health, resources, hierarchy, lack of information re: direct payments, respect for PA's as professionals
- There are individuals from hard to reach and ignored demographic groups or communities who are disconnected from the services they desperately need - excluded on both a bottom - up and top - down process, the worst affected is mental health. (Martin)
- There is an urgent need for community advocates with appropriate capacity to help those in need, supported by an infrastructure designed to provide a pathway to the services needed. Both volume and intensity of voluntary engagement has tripled since 'austerity' with every indication that the need will continue to increase.(Martin)
- Mental health is a priority. Both volunteers and practitioners would benefit from attending a Mental Health First Aid Course (2 days) which in turn need financing - more courses needed (Martin)
- One significant barrier is the lack of trust of those in need and what is perceived as 'the establishment'. Add in gender, culture, race, money, religion, language issues - those trapped by multiple barriers are condemned to a short and miserable life. Cultural change is needed at all levels.
- Example 1: mums and perinatal care will not tell of their illness out of fear that social services will take their children away, or that they will be seen as a failure and ostracised from their community.
- Example 2: Men from some societies/cultures cannot admit to mental illness because of massive shame and expulsion from heir peer group.

- Example 3: A long term service user became suicidal when told that her service would be discontinued because of funding cuts - advocate 'negotiated' treatment

Terms of Reference

TOR agreed with following amendments:

- 4 quarterly forums with the 4th being an annual event for all members
- Promoting culture change in health systems and in the VCF Sector

Who to Meet for Future Forums

Chair of Scrutiny Committee; Director of Public Health; Head of Social Services and Commissioner (someone) from Health together on same platform; Andrew Cash; Mental Health - Clive Clarke - deputy CEO @ SHSCT regarding access, barriers etc. in MH; young people's attitudes to health (wanting immediate action and go to A&E instead of GP - getting something on-line as opposed to going to a shop)

Themes for Future Forums

Inequity; mental health; neighbourhoods - social prescribing/people keeping well; children and families well - being

Spotlight on a Service for Future Forums

Age Better, CQC, Snowdrop Project, other voluntary and community groups.

Evaluation

What has been Helpful?

Helen Stevens (CCG) presentation on Sustainability and Transformation Plan; opportunity and time to discuss; good turnout, focussed agenda, links to other forums, interactive

What to Do Differently

More time for discussion, set the dates for the next 4 meetings