

EAST SUSSEX LINK

The County's Local Involvement Network in Health and Social Care

Newsletter Edition 31 January 2012



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Transition Year Edition

New start date and more funding announced for local HealthWatch bodies

Further details on the establishment of local HealthWatch bodies, including a new start date and extra funding, have been set out by Health Minister Andrew Lansley

The main changes are:

Making the Bill clearer on the freedom for local areas to set up local HealthWatch in an organisational form that suits local circumstance

Giving more time to get ready for local HealthWatch, so putting back its starting date to April 2013 (HealthWatch England will still start in October 2012)

Making some money available directly to HealthWatch Pathfinders (there will still be some money used centrally to share learning)

To read the full article visit

<http://www.dh.gov.uk/health/2012/01/local-healthwatch/>

Details on support arrangements for existing Local Involvements Networks (LINKs) will be circulated when available.

HealthWatch users Forum

We have launched a short survey to gain feedback from you on some key messages about HealthWatch - about what we do, how we do it and why. These have been developed with a range of stakeholders, now we need your views to help us refine these messages and make sure that what we're focussing on resonates with you.

Below is the link to the survey. It will be available for one month. We do hope you will be able to find a few minutes to complete it.

https://www.surveymonkey.com/s/Healthwatch_OC

East Sussex
LINK

Alan Keys, Chair East Sussex LINK

The Christmas and New Year lull seems a long time ago! January has seen a lot of LINK activity, much of it on-going but culminating in the publication of the Dementia and Hospital Discharge reports. They are serious pieces of work, which are covered in detail elsewhere, but I must emphasise the quality of work by the Host team and the volunteers. If we want to change patient and carer services for the better it is essential that we have a high degree of credibility with health and social care providers. Recruiting the right people and training them thoroughly is fundamental and I think those who lead in this area have done a very good job.

Our 'enter and view' work includes informal visits to, care homes, district and community hospitals, often on an unannounced basis. Care homes alone represent a large scale task so please remember that we are always looking for more volunteers to assist in this and other activities. East Sussex LINK is seen as a leading performer nationally in 'enter and view' and we need to maintain our momentum.

The Clinical Strategy Review continues at East Sussex Healthcare Trust. This month we have contributed to the stroke work group, which is a key area for improvement, attended the Strategy Board and had four representatives at an important stakeholders meeting covering the major activities of the Trust. We have also contributed to the third and last Clinical Summit for Sussex. In simple terms, the objective of these initiatives is to improve the quality of patient services, whilst meeting the Government targets for large cost savings. One major plank is to reduce visits to hospital by better prevention and provision of services closer to home.

It is too early to guess what savings can be made and the nature or location of services but we are acutely conscious of the vulnerability of patients if community care is inadequate, especially in rural areas. Therefore, we shall continue to contribute to the recently formed re-design of community services and press our concerns at all commissioning levels in East Sussex and at NHS Sussex as well. Please keep us in the picture from the user perspective, so that we can represent you effectively in these forums.

We have held our regular informal meetings with the senior leadership of the Healthcare Trust, Adult Social Care and the local Primary Care Trust, where we address issues of immediate concern. We are also starting work with the Healthcare Trust on updating their policy and practices on patient engagement.

Alan Keys
Chair

Engaging and Responding to Communities

LINK announce start of new project:

Urban and Rural Health – Understanding the Impact of Primary Care Provision on Health Outcomes across Local Communities in East Sussex. To read the project plan click on the link below.

<http://www.thecountylink.net/upload/UrbanRuralHealthDec11.pdf>

We will be looking to recruit research participants (for which training will be offered) to undertake surveys. To request the full project plan or get involved contact:

catherine.herriott@thecountylink.net

If you are interested in training as an Authorised Representative please contact Elizabeth Mackie for an informal chat about the role or to request a copy of the Role Description telephone 01323 514510 or email elizabeth.mackie@thecountylink.net

Next training date: late February 2012. We would also welcome interest from/look to recruit members of the public aged 18—25years.

Enter and View

From Janet Colvert, Lead Role Enter and View

Last November the LINK undertook a series of hospital visits to look at policies, practices and in particular patient experiences on being discharged from hospital

The reason for undertaking this work was in response to the comments the LINK has received from patients, families and carers over the last year. A team of nine Authorised Representatives visited the Eastbourne District General Hospital, and our five Community Hospitals in Rye, Lewes, Uckfield, Crowborough and Bexhill. We did not plan to visit the Conquest Hospital as there were changes being made at that time, but will visit them this month, with the same agenda. All of the hospitals we visited made us welcome and gave us opportunities to speak with staff and patients to gather views. We were particularly pleased to visit the Community Hospitals as this was new ground for us.

Our review of Patient Experiences on Leaving Hospital has been sent to the East Sussex Healthcare Trust to check for any factual inaccuracies and the report should be published on week commencing 23rd January 2012. We will visit the Conquest Hospital, and pay another visit to the Eastbourne District General Hospital to visit areas which were not available to us on the day of our visit. The reports of these visits will be published as soon as possible.

We are now planning some unannounced visits to the Hospitals which will take place in January and February. These will be published before the end of March.

We think it important to run both announced and unannounced visits to reassure everyone that the same standards of care are in place at all times, and Hospital managers have responded positively to both kinds of visits.

Last year the LINK ran a pilot programme to test out visits to Care Homes to look primarily at nutrition. Six successful visits were carried out and we now intend to look at a much wider range of Care Homes across the County. Nationally there is a great interest and in some cases concern for the care of older people. As well as looking at nutrition and care at mealtimes, we will also look at the overall care shown to patients, the consideration for their dignity and the extent to which individual needs are respected and catered for. With an ageing population above the national average in East Sussex, we think that this area of work is of growing importance.

The Mental Health Sub-group has focussed on what it means to live at home with dementia. They have spoken to over 100 carers and sought their views and listened to their individual experiences and the problems and challenges they have and any support that they receive. Using direct quotations, the report clearly demonstrates the reality of their situations and makes compelling reading. The report will be published this month.

We are grateful to all those who have shared their views and experiences with us, to providers and staff who we met on our visits, the Host team and to all of our volunteer Authorised Representatives who give generously of their time and skills in undertaking training, making visits and contributing to the reports. We hope you and our commissioners and providers of services will read them and find them helpful as we all work together to raise understanding of need and standards of care.

It's easy to see why you **should** get involved
It's easy to see the **benefits** of getting involved



LINK News (continued)



Leading on Identifying Priorities — LINK Priorities Panel

From Maureen Lawrence. Lead, Priorities Panel

One of the most important functions of any Local Involvement Network (LINK) is to gather the views, experiences and insights of local people into the health and social care services they, their carers and families receive: East Sussex LINK is no exception and carries out this function in a variety of ways.

The opportunities for members of the public to influence services include public and themed meetings, all manner of communication including telephonic, electronic and simply one to one conversations with staff and members of LINK. All such input is taken very seriously to ensure people willing to share and trust their experiences with us can feel confident in doing so.

So you may well ask what happens to the many contacts LINK receives every day. When such communications are received by LINK they are noted and included in a process of prioritisation, and by this means a picture is built up indicating where current concerns lie and what impact they are, and could be, having on the East Sussex population. Where appropriate those involved in making the comments are helped to take their concerns to the most appropriate place, which may be to the hospital Patient Advice and Liaison Service, directly to the providers of the service commented upon. Where comments are not within the LINK remit they are passed back to the person voicing the concern and/or to the service concerned. LINK receives communications complimenting services and these are always passed on.

Every month the Priorities Panel, made up of Active Participants of LINK, with various experiences including hospital and primary care, mental health, residential care homes, ambulance services and the voluntary sector, meet to scrutinise feedback from the community and agree what the priority concerns are that the LINK should consider, based upon substantial concern. This may be based on one very serious experience or outcome of care received by an individual, or a number of concerns voiced over a specific issue. A scoring system has been devised to ensure a transparent, free from bias and equitable process is applied to each potential or emerging issue. The group also consider the best way to investigate the concerns, which may include visits to the service, seeking answers from the provider of the service or further researching the matter. If the panel agree the LINK need to undertake this work, they also look at existing working groups and whether there is sufficient time and volunteers available to carry out the work. All pieces of work undertaken by the LINK are required to be based on adequate and robust evidence and we aim to ensure this is always the case with the procedures we have in place.

The outcomes of the group are shared with Chair of the LINK to ratify.

Your LINK is most grateful to all who share their experiences of the health and social care services with us, often in challenging and sensitive times and situations. If you have any comments, questions or concerns about our manner of prioritising your concerns, do not hesitate to contact our staff or any LINK member/participant.

To see how the Priorities Process works and read the outcomes, scores and actions from the last meeting please contact the LINK office 01323 514510 or email info@thecountylink.net

Alternatively you can view the documents on line: <http://www.thecountylink.net/upload/PPM6D11.pdf>

The next priorities Panel meeting is 6th February 2012 so please do get in touch if you have any comments, views or experiences using health and care services you wish to share with the LINK.

LINK in Eastbourne

From Margaret Stanton, Community Leader

The transition local LINK/HealthWatch is continuing to flourish

2012 will see us in training, seeking new volunteers and resolving health and care issues for patients and public alike. April 2013 will be the new start date for HealthWatch East Sussex. With this in mind it is important that we create strong social networks that will give us a “head start”

I was heartened by the response from organisations that contacted LINK to ask me to visit. In conversations with members of the public I have established that you want to know more about HealthWatch. We will endeavour to be the new consumer Champions for everyone who uses the health and social care services. We want to listen to your views and experiences. We will make sure that we respond when things go wrong and recognise excellence at all levels.

During the month of December I have visited Care Homes and Community Hospitals across my area and have been delighted and privileged to talk to many elderly residents. After my experience I was relieved to find (that contrary to press reports) we still have so many caring Nurses and Owners dedicated to the happiness of the people in their care.

It was wonderful to talk to a lady nearing 100 who “loved” all the people in her care home. She was so alert and happy.

I will not be betraying a confidence if I tell you about an elderly resident who loved the hospital but wanted to go home because she missed her cat. The overworked Ward sister agreed to make enquiries about a possible visit from the cat (subject to health and safety rules)

I have met cats, budgies and parrots all important in making these places “home from home”
2012 is the year I shall look forward to meeting more people in their groups, clubs or individually.

Update on LINK Functions/Activities – January 2012

The Hospital Focus Group – looking at issues raised following the CQC findings from their visits to ESHT since February 2011. In November LINK representatives visited Eastbourne District General Hospital (EDGH) and all five community hospitals to talk to patients about their experiences leaving hospital.

To read the report: <http://www.thecountylink.net/upload/LeavingHospitalReportFinalJan2012.pdf>
To request a copy of the report contact 01323 514510 or email info@thecountylink.net

Dementia Sub Group – LINK participants have been talking to people with dementia and their carers about their experiences Living with dementia at home.

To read the reports: <http://www.thecountylink.net/upload/DementiaReportFINALJan12.pdf>
To request a copy of the report contact 01323 514510 or email info@thecountylink.net



LINK members send congratulations to Sussex Partnership NHS Foundation Trust on their achievement

Sussex Partnership is the first ever NHS organisation to make the top ten in the Stonewall Workplace Equality Index, announced today (11 January). In the 2012 index, Sussex Partnership has come fourth overall, and is the top NHS organisation in the index, ahead of many major commercial and public sector organisations. Chief Executive Lisa Rodrigues said, 'The Stonewall Index is nationally recognised. I am very proud that today Sussex Partnership is ranked as the best place to work in the NHS, and one of the top four places in the country, for people who are lesbian, gay or bisexual. 'This is an achievement of the highest order and a testament to our commitment to equality. We have earned this by the efforts of our front-line staff, our professional leaders and our in-house equality and human rights team.

Developing working relationships with other agencies and groups LINK and POhWER

At a recent meeting between staff members of LINK and POhWER, it was clear there are many benefits to be had from closer networking and developing working relationships with other agencies. One such benefit is around identifying trends and common issues within organisations. This helps the LINK when assessing emerging issues. Another is about telling communities what services are available to them. An important function of the LINK is to sign post people to other agencies when it is not in their remit to deal with.



POhWER Independent Advocacy provides a number of advocacy services to adults in East Sussex. They also facilitate a countywide advocacy network and would like to hear from advocacy providers who are interested in being involved. The network aims to keep abreast of current trends in advocacy, share good practice and training, and to promote advocacy services across the county. POhWER is keen to work collaboratively with existing organisations in East Sussex and will be working more closely with East Sussex LINK during its transition to HealthWatch.

PoHWER provides free, independent and confidential advocacy:

- Independent Advocacy - Adult Social Care
- Independent Mental Health Advocacy
- Self Advocacy for people with learning disabilities
- Citizen and Peer Advocacy - recruits, trains and supports volunteers

Please get in touch to find out more about POhWER and its services by contacting **Local Service Manager Lisa Gillette** on **07500700896** or by visiting the website <http://www.pohwer.net/>

NOROVIRUS - DON'T HELP PASS IT ON

There has been a lot of national media coverage about incidents of norovirus across the country affecting hospitals and nursing homes. It is not uncommon to experience this virus at this time of year. We are aware neighbouring Trusts are seeing cases and we are starting to see incidences here. Currently we have one ward at both Eastbourne DGH and the Conquest Hospital along with the Irvine Unit at Bexhill Hospital closed to new admissions. In total there are 25 symptomatic patients which includes five confirmed cases of norovirus.

If you experience symptoms of diarrhoea and vomiting and feel unwell with gastrointestinal symptoms - don't help pass them on. Stay at home and drink plenty of water. More importantly please DO NOT visit friends or relatives in hospital until you are free of symptoms for at least 48 hours. Failure to do this increases the risk of spreading the infection to patients and staff in hospital.

Norovirus is highly infectious and is the most common cause of infectious gastroenteritis (diarrhoea and vomiting) in England and Wales. It has been historically known as a 'winter vomiting bug' due to its seasonality and typical symptoms. The illness is generally mild and people usually recover fully within 2-3 days. There are no long term effects that result from being infected. Infections can occur at any age because immunity is not long lasting.

Dr Barry Phillips, Director of Infection Prevention and Control, said: "Norovirus is highly infectious. To help contain it we have restricted the movement of patients around the hospital and introduced stringent infection control measures. In particular attention to good hygiene measures should be observed. It is very important to wash your hands with soap and water after contact with someone who is ill and after using the toilet, especially if you are suffering from symptoms.

"The public can help contain the spread of this virus by not visiting friends or relatives in hospital if they are experiencing symptoms of diarrhoea and vomiting and feel unwell with gastrointestinal symptoms. Please don't help pass it on. This is highlighted by the fact that the incident at Conquest has been caused by a visitor who had previously been visiting an infected patient at Bexhill. Also, if you are visiting a relative or friend in hospital we do not recommend storing food in open containers in ward areas such as fruit bowls so bring food gifts for patients in sealable containers only.

"Thorough cleaning of hard surfaces with a bleach solution, paying particular attention to the toilet and toilet area and cleaning up vomit and the surrounding area quickly will help to reduce environmental contamination and reduce the risk of infection.

Your voice for health and social care in East Sussex

www.thecountylink.net

Public Health update

Latest Briefing paper is available from the office or view on line:

<http://www.thecountylink.net/upload/BriefingESussexPHupdate201112.pdf>

This update includes information about East Sussex Health & Well Being Board (H&WBB), A new Joint Strategic Needs Assessment (JSNA) Website and Children's Health & lifestyle survey due to take place Spring term 2012.

HealthWatch in East Sussex—the way forward**Shaping HealthWatch East Sussex**

Updates on the development of Local HealthWatch in East Sussex can be found on East Sussex Strategic Partnership website.

<http://www.essp.org.uk/What-we-do/Pride-of-Place/Health/NHS-Reforms/HealthWatch-East-Sussex.aspx> Next HealthWatch Development Group Meeting 16th February 2012

NHS Future Forum

NHS Future Forum

The Government has asked the NHS Future Forum to continue its conversations with patients, service users and professionals to provide independent advice on four important themes:

- ◆ how to make information improve health, care and wellbeing
- ◆ how to develop the healthcare workforce to deliver world-class healthcare
- ◆ how to ensure the modernisation programme leads to better integration of services around people's needs
- ◆ how to ensure the public's health remains at the heart of the NHS.

NHS Future Forum calls on healthcare professionals to lead way on patient-centred care

Integration

Integration should be defined around the patient, not the system – outcomes, incentives and system rules (ie. competition and choice) need to be aligned accordingly.

Health and wellbeing boards should drive local integration – through a whole-population, strategic approach that addresses local priorities.

Local commissioners and providers should be given freedom and flexibility to 'get on and do' – through flexing payment flows and enabling planning over a longer term.

Download Integration report http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_132023.pdf



Care Quality Commission (CQC) LINKs Bulletin

For the latest CQC Update on the Local Involvement Networks Bulletin, please go to: <http://cqcnnews.org.uk/?o5PutodDMQv2GAA8x72.H5DM5VwSV4YJo>

If you need a hard copy, please contact the LINK office.

This bulletin includes a number of interesting articles including:

The next meeting with LINK and the local compliance team is week commencing 13th February 2012. The LINK and CQC would like to hear your views about using local dental and private ambulance services. You may not know these services are registered with CQC and therefore subject to inspections and reviews. If you have any experiences you would like to share please contact Elizabeth Mackie 01323 514510 or email manager@thecountylink.net

Your LINK working with the Care Quality Commission to improve health and social care



Your views matter



Priorities Notes and Actions

Panel members: Maureen Lawrence (Lead) Sara Palmer, Sussex Oakleaf (Representing Voluntary and Community Sector), Marianne Colliard, John Curry and David Bold Active LINK Participants.

- ◆ To view the feedback template: click here: <http://files.thecountylink.net/prinotes0911.pdf>
- ◆ To receive a copy in alternate format contact: **01323 514510** Text: **07968 119 806**

Many contacted the LINK after reading the report on Mount Denys Home - asking "in terms of independence, how are ASC monitoring their own Directly Provided services?" This is the response received from:

Shane Heber, Head of Directly Provided Services, East Sussex County Council Adult Social Care

"The monitoring of services has always been in place but has been reviewed since the Mount Denys Care Quality Commission inspection.

An additional 13 staff have been recruited, and a programme of bespoke training is in progress for the team at Mount Denys. The service is monitored by the Registered Manager monthly and by an off-line Compliance Officer every 3 months and also by the Contracts & Purchasing Unit (Unit which monitors independent sector care homes and domiciliary care). As Head of Service I have to regularly report progress to our Departmental Management team.

Therefore more stringent monitoring systems have been introduced in line with the expectations and requirements of the Care Quality Commission. They have recently carried out a review Inspection relating specifically to quality monitoring and have been positive about the systems now in place. (I reported these details to scrutiny in November and the LINK lead was present so will have had various documents if needed)"

The panel also drafted some questions for Adult Social Care in response to comments received from people about Re-assessments, Self Directed Support Eligibility Criteria etc.

We have been receiving a number of concerns passed to us of cases from Older People who receive support in their own home. We have heard of cases where services have been withdrawn, where people have been asked to make a contribution, and a case where someone arranged their own care, facilitated by an agency where they are now being sued for loss of earnings by the support worker.

To see the questions and response from Adult Social Care please contact the LINK office telephone 01323 514510 email: info@thecountylink.net

To view on line click here: <http://www.thecountylink.net/upload/LINKSDSQandAfinal.pdf>

We are also hearing similar concerns from disabled people. If you have been affected by this issue, we would like to hear your views.

If you have any news or suggestions on how your organisation can get involved with the LINK please contact the LINK office on 01323 514510 or email info@thecountylink.net

We look forward to hearing from you.