

Devon LINK Interim Steering Group

Minutes of the meeting held at Cardinal Newman House, Exeter
10.30am – 1pm, Thursday 19th March 2009

Present: Derrick Roach
Rosemary Whitehurst
George – Alfred Husband
Marjorie Brace
Jean Waldron
Kate Fenton (Host)
Lynne Robertson (Host)
Jill Perry (Host)
Laura Pledger (Host – minute taking)

Apologies: Debbie Avery
Sue Howell-Richardson

	ACTION
<p>1. <u>Minutes of last meeting</u></p> <p>1.1. Accepted as accurate.</p> <p>2. <u>Action Tracker</u></p> <p>2.1. Progress to date was reported.</p>	
<p>3. <u>Work Plan</u></p> <p>Externalisation of Services</p> <p>3.1. Shaw Healthcare has withdrawn and DCC¹ is looking for another provider. DCC is holding a number of focus groups to collect the views of those who were invited to take part. There was concern that this was the only consultation that would take place.</p> <p>3.2. Letter to be sent to Senior Council asking for an update on their next steps as the LINK is supporting them in this issue.</p> <p>Dentistry</p> <p>3.3. The LINK has been communicating with PCT on the issue of access to dentistry in Sidmouth. The PCT is aware of the problems and is awaiting confirmation of further funding to increase the service. LR suggested that a presence at Trust Board meetings might benefit the LINK in terms of</p>	Host

¹ Devon County Council

<p>getting a better understanding of the issues as they are discussed.</p> <p>3.4. Representation at Board meeting referred to the new steering group.</p>	<p>SG²</p>
<p>Visiting Wardens Scheme</p> <p>3.5. At a previous meeting SHR offered to provide more information on the policy on the visiting wardens scheme and whether this is a local or national policy.</p> <p>3.6. SHR to provide information.</p> <p>3.7. KF reminded the group that the LINK should not take on single issues. There has been no response to requests for information from other participants about their experiences or volunteers to take this forward to a task group. The LINK is also not getting any other feedback that this is an issue. Therefore, the Host recommends that there is insufficient evidence to progress the issue.</p> <p>3.8. The ISG felt more information should be sought on the issue before it is removed from the work plan. LR responded that it was very difficult to get individual clients' views on this subject and suggested the Steering Group might want to get in touch with Supporting People as a way of getting clients views.</p>	<p>SHR</p>
<p>3.9. Await information from SHR, obtain policy and review at next meeting.</p>	<p>SG</p>
<p><u>Out of County Placements</u></p> <p>3.10. Devon Partnership Trust has failed to respond within 20 working days. A further request for information has been made.</p>	
<p><u>Lack of Care Workers in local areas</u></p> <p>3.11. The response for information has been received from DCC. The letter does not refer to recruitment.</p> <p>3.12. People are often uncomfortable or afraid to complain, so it is difficult to elicit their views. How should this be taken forward?</p> <p>3.13. Publicise the need for a task group again, targeting people who work with carers.</p> <p>3.14. All agreed that the task group could then take the issue forward, e.g. invite other service providers, for whom this has a knock on effect (e.g. ambulance service) to give their view and relevant statistical data, and organise targeted consultations in a sample of day centres around Devon.</p>	<p>Host</p>
<p><u>Patient Transport</u></p> <p>3.15. The Host has mapped organisations and groups in Devon who are working on patient transport, as requested.</p>	
<p>3.16. Find out what the exact issues are and what the groups are working on.</p>	<p>Host</p>

² LINK Steering Group

Visual Impairment

- 3.17. LR attended the first task group meeting which had 6 participants, all experienced and knowledgeable about this issue. The group agreed that they would meet monthly for six months.
- 3.18. Three issues were prioritised:
- Support *Action for Blind People* in developing a Point of Diagnosis (POD) scheme for people who are diagnosed with sight problems.
 - More staff awareness training in GP surgeries and hospitals.
 - Focus on training a team of volunteers to meet and greet at hospitals to help people to appointments.
- 3.19. Correspondence is being sent to all the major hospitals to find out what help and facilities they already have in place and what training they provide. Letters have also gone to volunteers schemes in Devon to find out about training.
- 3.20. LR raised issues of adequate volunteer support for task groups. This will be monitored. The role of the Host in terms of supporting task groups does not include dedicated secretarial support. However, additional staffing has been agreed to help coordinate the task groups and help to drive the work forward.

4. Governance

- 4.1. The group was satisfied that responses to the governance review had been dealt with.
- 4.2. RW referred to the concerns received about the Code of Conduct policy and thought that a response letter explaining that they were adopted on the recommendation of PPI Forum members should be sent to those participants who raised concerns. RW thought that responses should be sent to all who contributed their views.

5. Election

- 5.1. KF stated that 9 people put themselves forward for 7 of the roles (this level of response was similar to other LINKs). The roles of Diversity and Community Engagement are contested.
- 5.2. The individual role of finance and organisational roles that represent young people, carers and mental health did not receive any nominations. The new steering group will need to consider how they fill these roles to ensure that the groups are represented.
- 5.3. Feedback has been received by one of the Interim Steering Group that the meetings have been a barrier to those who work full time. Other suggestions for improvement were made, which will be passed onto the new group. LR thought that evening meetings might encourage a more diverse range of people to participate.
- 5.4. The group discussed how to satisfy the LINK governance requirements and wishes of the LINK given the outcome of the nominations process.

<p>5.5. Nominees in uncontested role are elected; all contested roles must go to an election.</p> <p>5.6. There was some concern that carers and young people are unrepresented on the new steering group. However, a considerable amount of work has been undertaken to ensure these groups are able to participate.</p> <p>5.7. MB proposed that, given the delay caused by the poor response, the Interim Steering group's tenure should be extended to the AGM. This would enable a smoother transition in support of the new Steering Group. The proposal was carried.</p>	
<p>6. <u>Finance</u></p> <p>6.1. The Host outlined proposals for community engagement events and detailed the estimated costs for each event:</p> <ul style="list-style-type: none"> • A series of six health fairs over the coming year to enable the LINK to go to local communities and invite local participants an opportunity to share their views and experiences; total estimated cost of £1,600. Associated advertising would be approximately £350 per event. • Further details were given on the youth event, which is attracting a lot of interest; estimated maximum cost of £765. • Devon County Show: estimated cost of £1,500 would allow for the booking/pitch fee, entrance and activities to draw people in. <p>6.2. None of the above includes an estimate of participant travel expenses that may be claimed as this will depend on the participants who attend.</p> <p>6.3. All the proposals were approved.</p> <p>6.4. The Host then outlined some other ideas for events and promotion that might attract groups of people that the LINK would not normally come across, e.g. Ten Tors and the Beautiful Days festival. One of the community engagement workers would like to pursue the idea of offering mole checks to people on the North Devon beaches. This had been done successfully by a PPI Forum. JW suggested carers events and open days at the RD&E³. G-AH added Sidmouth folk festival.</p> <p>6.5. The group then discussed the confusion over the term Treasurer. Accountability rests with the group as a whole and not just one person; therefore, the term Treasurer was felt to be misleading. This has been changed to Finance.</p>	
<p>7. <u>National LINKs Conference</u></p> <p>7.1. SHR and G-AH attended and the conference report is now available on the LINKs Exchange (www.lx.nhs.uk).</p>	

³ Royal Devon and Exeter Hospital