



TRAFFORD
COUNCIL

**AGENDA PAPERS MARKED 'TO FOLLOW' FOR
HEALTH AND WELLBEING BOARD**

Date: Tuesday, 4 November 2014

Time: 6.30 pm

**Place: Committee Room 2 and 3, Trafford Town Hall, Talbot Road, Stretford M32
0TH**

A G E N D A	PART I	Pages
6.	UPDATE ON HEALTH & SOCIAL CARE INTEGRATION To receive a presentation from the Corporate Director of Children, Families and Wellbeing.	1 - 8
10.	CCG UPDATE To receive an update from the Chairman.	9 - 18
11.	HEALTHWATCH UPDATE To receive an update from the Chair of Healthwatch Trafford.	19 - 22

THERESA GRANT

Chief Executive

Membership of the Committee

Dr. N. Guest (Chairman), Cllr M. Young (Vice-Chairman), D. Banks, Cllr J. Bennett, D. Brownlee, Cllr M. Cornes, A. Day, B. Humphrey, G. Lawrence, Supt Liggett, M. McCourt, A. Razzaq, A. Vegh, S. Webster and C. Yarwood.

Further Information

For help, advice and information about this meeting please contact:

Rhys Hughes

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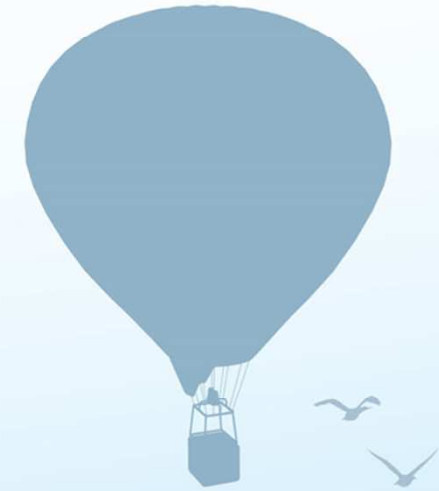
Health and Wellbeing Board - Tuesday, 4 November 2014

This agenda was issued on **Thursday 30th October 2014** by the Legal and Democratic Services Section, Trafford Council, Trafford Town Hall; Talbot Road, Stretford, Manchester, M32 0TH

Integrated Care: Trafford's Journey

Tuesday 4th November 2014
Health and Wellbeing Board

Carol Baker-Longshaw



Timeline

February 2009

Trafford PCT approves strategy to develop integrated care

Autumn 2009

PCT invites expressions of interest around providers around delivering integrated care

2007

CYP integrated area model established

April 2009

Provider/commissioner separation between Trafford PCT and community health services

April 2010

£2million from PCT to fund "proof of concept year" around vertical integration of community health, acute services and "vanguard" GP practices

April 2011

Trafford community health services goes into custody of Bridgewater

October 2011

Unscheduled Care Business Case submitted, ultimately resulting in the commissioning of the Community Enhanced Care Service

December 2010

Trafford Healthcare Trust announces it is seeking acquisition; community health services can no longer be integrated

Focus shifts to adult health and social care integration

March 2012

Health and Social Care Act receives royal assent

April 2012

Trafford Healthcare Trust subsumed into Central Manchester Foundation Trust

November 2013

Community Enhanced Care service launched - aim to reduce admission to acute services

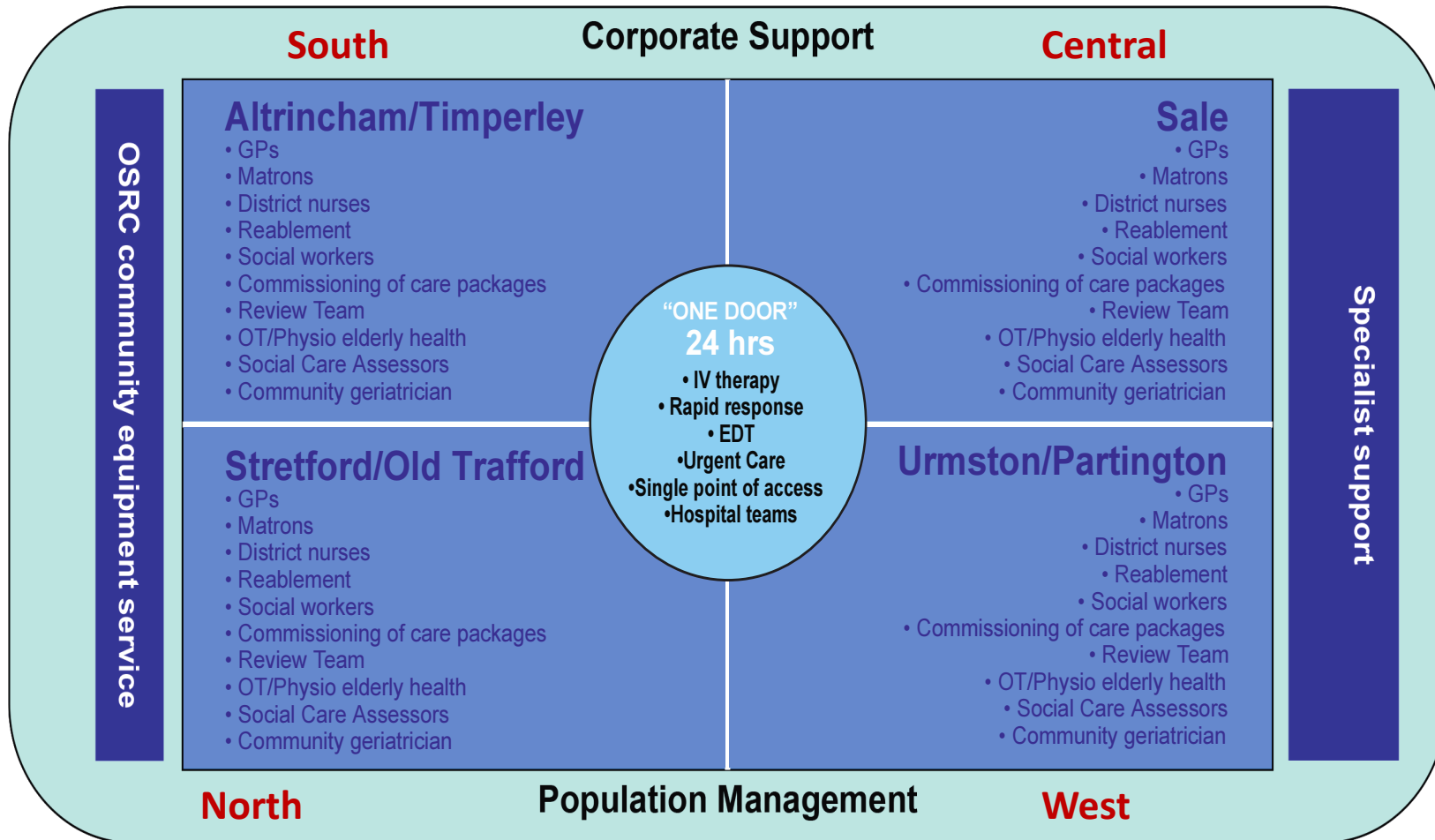
April 2013

PCFT takes over operation of Trafford community health

April 2014

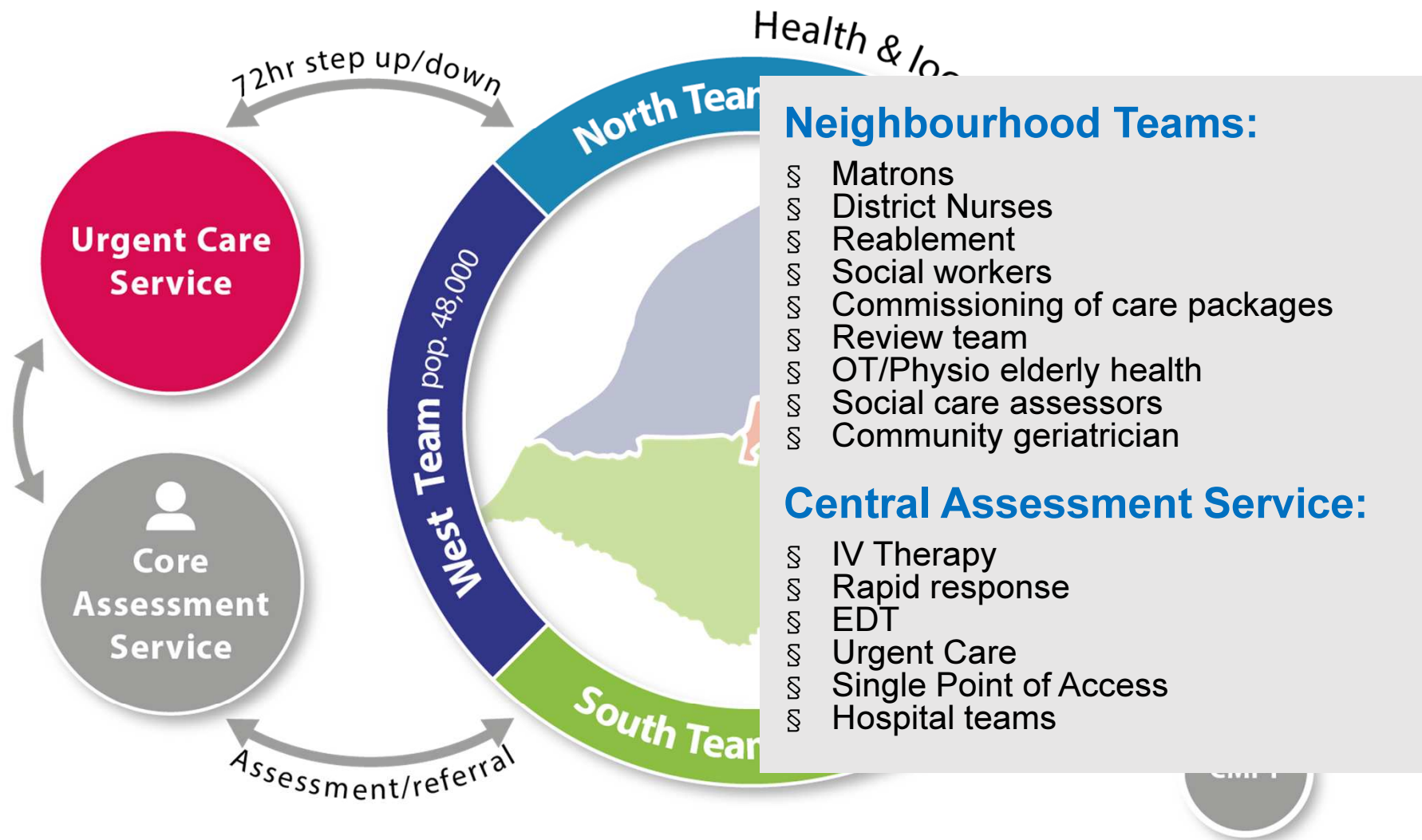
Adult Integrated Health and Social Care Model phase 1 initiated

The Service Delivery Model



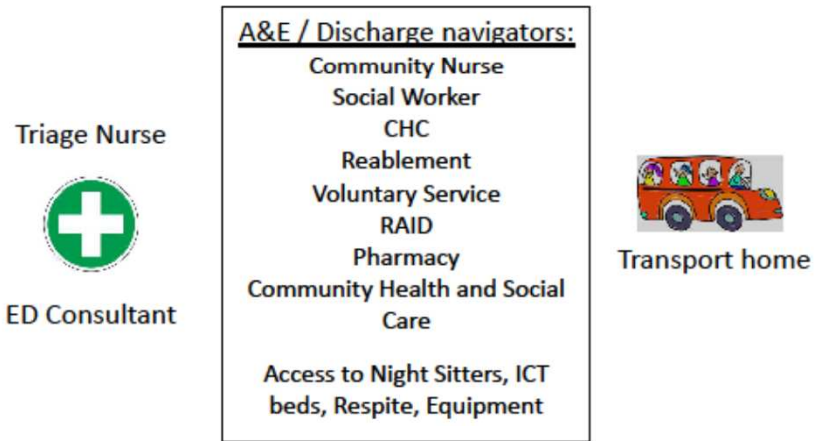
Adult IHSC model, 2014-

Page 4



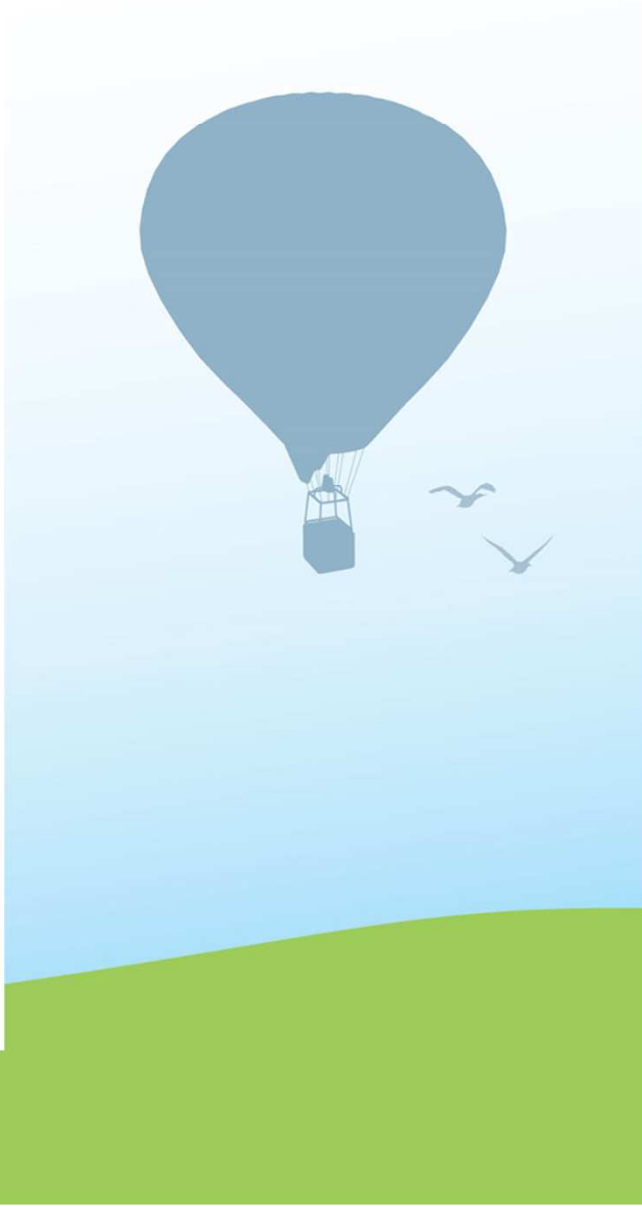
Hospital – “Not a day more”

Front Door Team – Triage Team 8am - midnight



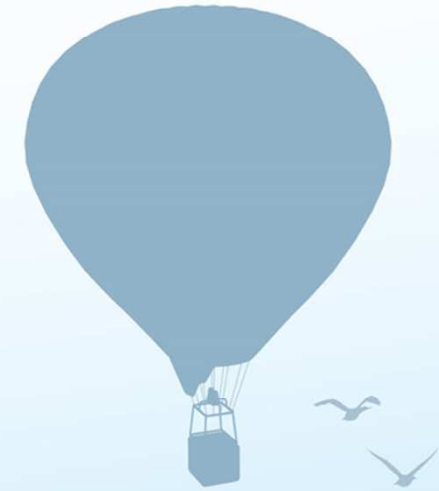
Triage Nurse 
ED Consultant

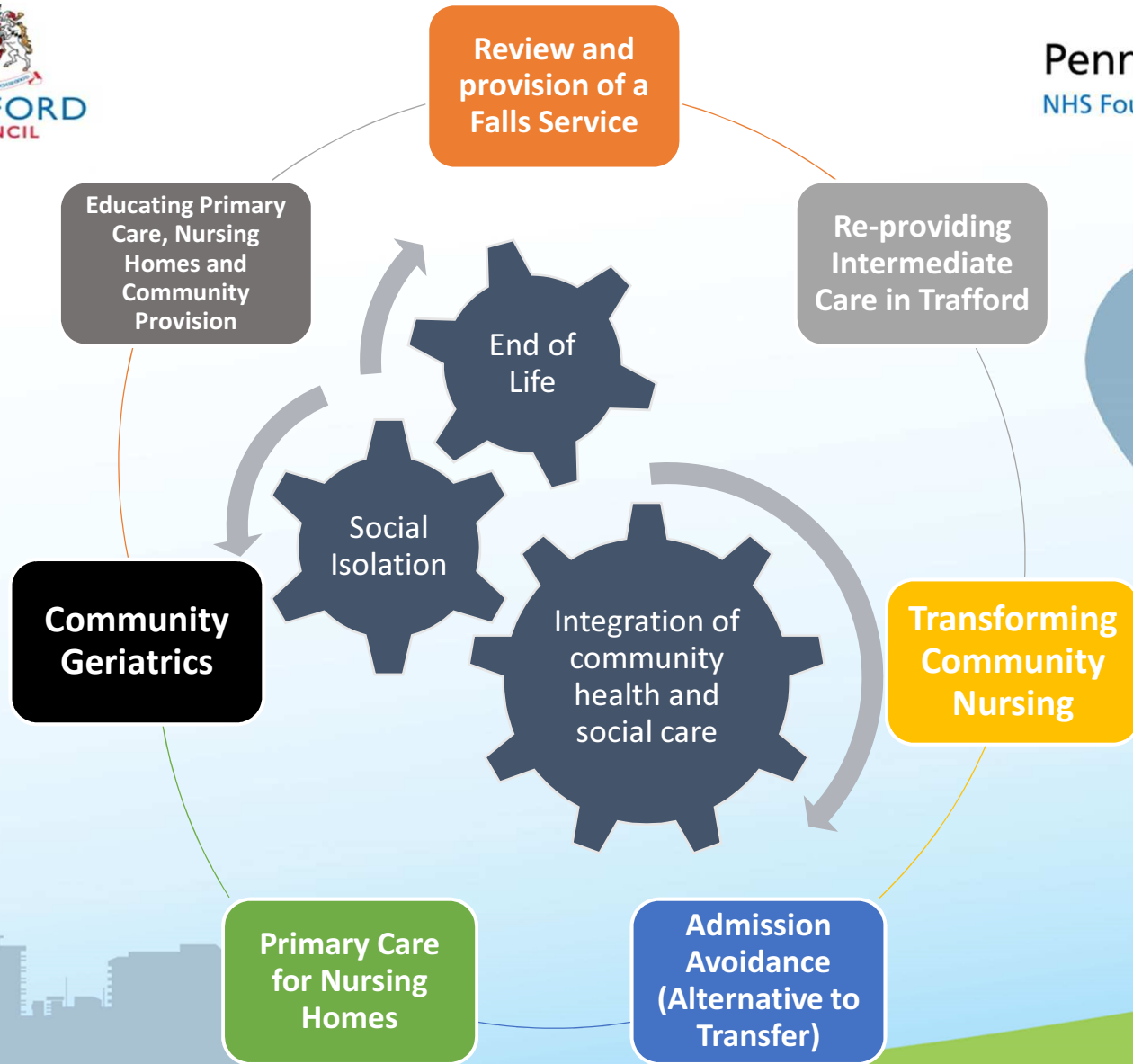
ONE RECORD – ONE PLAN



Progress:

- Staff Consultation *completed*
- Joint Heads of Service *appointed*
- Joint Operational Managers *appointed*
- New Working Model:
Pathways/Protocols/ Information Sharing in progress
- Training in Development Events *in progress*





Any Questions?



TRAFFORD COUNCIL

Report to: Health and Wellbeing Board
Date: 4 November 2014
Report for: Information
Report of: Dr Nigel Guest, Chief Clinical Officer, NHS Trafford Clinical Commissioning Group

Report Title

NHS Trafford Clinical Commissioning Group Update

Summary

The report provides an update on the work of the NHS Trafford Clinical Commissioning Group and provides information and progress on key commissioning activities. It considers locality specific issues and references links to Greater Manchester and national issues where relevant.

Recommendation(s)

The Health and Wellbeing Board is asked to note the update report.

Contact person for access to background papers and further information:

Name: Gina Lawrence, Chief Operating Officer, NHS Trafford Clinical Commissioning Group

Extension: 0161 873 9692

NHS TRAFFORD CLINICAL COMMISSIONING GROUP UPDATE

1.0 INTRODUCTION

1.1 This report will be in 2 parts.

Part 1: is an update on key commissioning activities undertaken since the update provided at the last Health and Wellbeing Board meeting. This section considers locality specific issues referencing links to Greater Manchester and national issues where relevant.

Part 2: is an update to the Clinical Commissioning Group Governing Body of the progress of Integrated Care and delivery of CCG's 5 Year Strategic Plan. Updated following the internal meeting of the Transformation Steering Group (formally the Commissioning and Operations Steering Group) this report is to inform both the Governing Body and the Health and Wellbeing Board of relevant progress and to provide reassurance of ongoing internal monitoring. Provided by the Programme Office, it provides a position statement for the entire Integrated Care Programme on a project specific basis.

2.0 PART 1: COMMISSIONING ACTIVITIES UPDATE

2.1 South Sector Work

The South Sector Meetings are currently suspended during the Healthier Together Consultation. A meeting of locality CCG Leads will take place in the next month to consider how this work is taken forward.

2.2 NHS England Operational and Resilience Guidance

Trafford CCG has submitted its Operational and Resilience plan for 2014/15. The assessment by NHS England of Trafford's Health economy plan is that this is a medium risk and the plan was 'assured with support'. This is due to Trafford's plan being linked to 3 health economies; Salford, South and Central Manchester, and the support is in relation to A&E performance. Trafford CCG will receive the £1.4 m for the resilience plan. The key performance indicators which will measure the impact and performance of the schemes are being finalised with the provider organisations.

Trafford Resilience Group which is chaired by the Clinical Director for Quality and Performance has been established. This group has representatives from the Council and all Health provider organisations. This group is responsible for monitoring the performance of the schemes which have been funded from the resilience monies.

2.3 Primary Care

Trafford CCG has completed a self-assessment in readiness for co-commissioning which has been shared and discussed with NHS England. The CCG is working with the Area Team to ensure readiness and is awaiting further national guidance.

3.0 NHS GREATER MANCHESTER UPDATES

3.1 Commissioning Support Unit (CSU)

North West Commissioning Support Unit (NWCSU) was created in October 2014, through the coming together of the commissioning support units in Greater Manchester and Cheshire and Merseyside, and was launched on 1 October 2014. The purpose of creating the new organisation was to take the expertise, experience and learning from each CSU to create an organisation that provides high-quality services designed around the needs of their clients.

3.2 Healthier Together

An update on the Healthier Together consultation is provided in a separate paper for discussion at agenda item 18.

4.0 ESTATES STRATEGY

4.1 Shrewsbury Street

The CCG is working closely with NHS England and Trafford Housing Trust in progressing the plans for this centre.

The CCG's Primary Care team have been working with two GP practices from the North Locality who have expressed an interest in moving into this centre. The CCG is now working with NHS England and Trafford Housing Trust to review the space allocation available within the centre to ensure it can accommodate up to two GP practices and other community health services.

A Project Initiation Document (PID) has been presented to NHS England in October 2014, which will be followed by an outline business case in December, then a full business case to be completed for submission in January 2015.

NHS England is now working with both GP Practices to undertake a formal consultation with patients which will continue for the next 12 weeks.

4.2 Community Hub (Altrincham Site)

The CCG is progressing this planned development with NHS England and NHS Property Services. An assessment of space required is being finalised. The CCG has commenced consultation with GPs in the South Locality and are progressing a series of meetings with individual practices who may wish to relocate in the Hub.

A position paper has been presented to NHS England which outlines the development along with recommendations for the CCG to continue to work with NHS Property Services.

4.3 Better Care Fund

Trafford CCG working in partnership with Trafford Council has submitted a revised Better Care Fund template in September. This submission required sign off by the two acute Trusts, the University Hospital of South Manchester (UHSM) and Central Manchester Foundation Trust (CMFT). All Better Care Fund submissions have been assessed by an external team. Trafford Health and Social Care economy has received feedback and are awaiting the next phase of the assessment process which is outlined below:

- Announcement of Nationally Consistent Assurance results.-30/10/14
- Action plans agreed with those in areas 'approved subject to conditions' or 'not approved'. 14/11/14
- Majority of plans 'approved subject to conditions' moved to 'fully approved' or 'approved with support' assurance categories. 31/12/14
- Areas with plans that are 'not approved' submit plans for a further Nationally consistent Assurance Review.2/1/15
- Results of 'not approved' plans further Nationally Consistent Assurance Review 31/1/15.

Trafford CCG has used an extra- ordinary Integrated Care Redesign Board to share the details of Trafford's Better Care Fund with its Stakeholders. This was an opportunity for health providers to seek further clarification on all the schemes and understand the timescales and implications on their organisations going forward. This was well received by all stakeholders.

5.0 NATIONAL UPDATES

5.1 Publication by NHS England of annual summary of CCG assurance and 360 summary report

NHS England has published its year-end summaries of authorisation and assurance for CCGs in England, up to end March 2014. The figures demonstrate the significant progress that CCGs have made since being established and their continued commitment to fulfilling their commissioning role and improving health outcomes for their local communities. All 211 CCGs are authorised and 210 are assured, with mutually agreed support plans in place for those CCGs that require further development. The annual reports are available on NHS England's website along with a national summary of the CCG 360 stakeholder survey findings that informed year-end discussions.

5.2 Publication of Staff Friends and Family Test data

The first quarterly results of the Staff FFT have been published on NHS Choices and the NHS England website. The data is from 241 NHS acute, community, ambulance and mental health trusts in England. There were 163,686 responses from April to June.

- 76% of staff would recommend their organisation to friends and family in need of care or treatment; 8% would not.
- 62% of staff would recommend their organisation to friends and family as a place to work; 19% would not.

The results will be published three times a year and demonstrate commitment to transparency and openness in the NHS.

5.3 Confirmation of new start date for out of area registration

NHS England has confirmed that the extension of choice of GP practice through the introduction of out of area patient registration will now be launched 5 January 2015 rather than 1 October 2014. This change in date is to ensure that the new arrangements are fully operational across England. NHS England area teams will be ensuring that their arrangements for securing urgent care for out of area patients who live in their area are now in place by January, if not already. Final guidance will be published in October.

5.4 NHS England consultation on plans for a sustainable Cancer Drugs Fund

NHS England has launched a four-week public consultation on proposed changes to the way its Cancer Drug Fund (CDF) operates. Clinicians and cancer specialists believe that the changes, if adopted, would improve patient access to the most clinically effective drugs available through the fund; encourage pricing that delivers value for money for patients and the public; and put the fund on a more sustainable footing for the future, as it faces increasing demand and growing financial pressure. Further details are available on the NHS England website, <http://www.england.nhs.uk/2014/10/03/cdf-consultation/>

5.5 Achieving Better Access to Mental Health Services by 2020

NHS England and the government have published Achieving Better Access to Mental Health Services by 2020, a five-year ambition to put mental health on a par with physical health services. NHS England will invest a further £120 million over the next two years on improving mental health services, including a £40 million investment this year to build capacity to meet new access and waiting time standards from next year. NHS England will be working closely with CCGs to identify the areas of most need to specifically address improvements in early intervention and mental health crisis services, including liaison psychiatry.

6.0 RECOMMENDATIONS

The Health and Wellbeing Board is asked to note the contents of the update.

7.0 PART 2: INTEGRATED CARE PROGRAMME UPDATE

The next section provides an update on the progression of Integrated Care and delivery against the CCG's 5 Year Strategic Plan. Written in the form of a highlight report it provides a position statement for the entire Integrated Care Programme. The highlight report breaks down each of the work stream detailing the progress made over the previous reporting period, and highlights any issues and informs of details the planned next steps.

Operational Lead: Debbie Dell
Management Lead: Adrian Hackney
Clinical Lead: Michael Gregory

1. Introduction & Background

This highlight report provides an update to the Governing Body on the progress of Trafford's Transformation Programme and the delivery against the CCG's 5 year Strategic Plan. The report summarises the progress of each work stream, highlights any issues and details the planned next steps in line with the project management process.

The Programme Office, as part of the Commissioning Directorate, monitors the overall programme plan, ensuring all projects follow a formal project management process in which both patient engagement and benefits realisation are central. This process ensures the delivery of relevant documentation to the appropriate governance level and clearly demonstrates the alignment of projects to the 7 Outcome Ambitions. Timescales for completion and key milestones are contained within the programme plan and are aligned to the CCG's governance reporting and financial investment plan

The work programmes described in this section of the report are referenced in Trafford CCG's Strategic Plan, including their contribution to the overall 10% reduction in planned activity and 15% reduction in unplanned activity across the 5 years of the plan. It will also highlight key schemes and initiatives developed by the CCG in partnership with key stakeholders within Trafford's Health Economy.

2. Programme Highlights

2.1 Scheduled Care

2.1.1 MSK Service Review & Commissioning Proposals

- The Project Initiation Document (PID) was presented at the Clinical Commissioning and Finance Committee on 16th September where agreement was given for the procurement of a Community Musculoskeletal Clinical Assessment, Triage and Treatment Service.
- The Clinical Lead post, Dr John Tose, has been extended for 3 months in order to support the delivery of the PID.
- A draft specification has been written and procurement will commence no later than August 2015.
- MSK procurement is within the work plan of Trafford CCG's Procurement Team and it is anticipated that the Team will have the capacity to manage the procurement.

2.1.2 Community Nursing

- This project was originally a standalone review of the current district nursing service, however as 75% of the activity undertaken by this service is for patients over the age of 75 years; the review has now been included in the scope of the Frail & Older People Programme. The scope of the project has been revised to produce a specification for a comprehensive community service, developed in partnership with Pennine Care, Trafford Division.
- The Community Nursing Steering Group is leading the project and is accountable to the ICRB. (Integrated Care Redesign Board). Dr Jon Tose, Clinical Lead commenced work with the project team on the 16th October 2014. As part of the Better Care Fund (BCF) planning document, a detailed scheme description will be developed. The first draft will be presented to the Community Nursing Steering Group on the 31st October 2014.
- An engagement plan will also be submitted to the Community Nursing Steering Group, detailing the process for engagement with stakeholders on the new model and service specification.
- The Pennine Service Development Group will continue to be updated as to the progress of this project.
- The Greater Manchester District Nursing Review was presented to Chief Officers in August 2014. This was inconclusive and a final report was expected in September 2014. This report remains outstanding.
- Community Therapies The services currently under review are: Community Rehab, Neuro Rehab, Adult SALT and Pulmonary Rehab. On completion of the review a presentation of service options / proposals for the future state provision will be delivered by Pennine Care, Trafford Division by the end of October/November 2014.
- The BCF plan identifies a 3.5% reduction in A&E attendance, which equates to 238 episodes. Of these, 74 are attached to community nursing and discussion as to how this will be measured will be addressed by the CN Steering Group.
- The date of the next CN Steering Group is 31st October 2014.

2.1.3 Integrated Diabetes Care

- The Diabetes Network and Advisory Groups have had their first meeting. The network comprises 65 individual members from 10 different organisations. Outcomes from the initial meetings include options for reducing the prescribing spend per person with diabetes, priorities for prevention work and agreement that care should be delivered based on clinical need with secondary care providers focusing on specialist care.
- The Scheduled Care team has disseminated the Communications and Engagement Report to all Network members.
- The National Diabetes Audit 2012/13 has been published and a summary has been disseminated to all members.
- Network meetings are scheduled for 27th November and 15th January 2015.

2.1.4 Community Dermatology

- The business case for this project, A Community Dermatology Service across Trafford, South and Central Manchester CCGs - was approved by the CCG Management Team in December 2013. The procurement - led by South Manchester (supported by the CSU) – was paused for a period while South CCG resolved some difficulties with another CSU supported procurement.
- All 3 CCGs wanted a single provider to deliver the service across all three CCGs (delivered from 2 locations within each CCG) in order to get best-value.
- Despite a large number of providers who expressed an interest, only three bidders responded to the PQQ
- Formal notice has now been served on all current providers. TUPE information is being sought.
- The PQQ has now been evaluated and only two bidders will progress to the ITT stage.
- The Project Group meeting on 20th October will finalise the ITT documentation.
- The ITT will request bidders to identify their selected locations.
- ITT evaluation is planned for 19th December with the contract award in January and contract commencement in May 2015.
- Trafford evaluators are: Dr Chris Tower, Tim Weedall, Tracy Clarke and Karl Taylor.
- Central Manchester and South CCGs pathway includes for clinical triage of all referrals via their Gateway. Trafford CCG needs to consider dermatology referrals going through the PCCC for decision support.

2.1.5 Community Minor Eye Condition Service

- A number of CCGs across GM, including Trafford, had shown an interest in wanting to commission a Minor Eye Conditions Service. In the interest of multi-lateral contracting and collaborative commissioning, the Heads of Commissioning asked for CCGs to confirm interest by 2nd September in taking this forward jointly on a GM basis.
- However, only 3 CCGs have expressed an interest in the developing this service – Trafford, Salford & North Manchester.
- The Scheduled Care Team is working with Dr Liz Clarke and Dr Chris Tower (in his role as chair of the Locally Commissioned Services group) to develop this project. The project group now includes finance and primary care.
- The CCG will develop a business case for the December Transformation Steering Group.

2.1.6 Macular Services Intra-Ocular Injections

- The CCG continues to monitor activity at CMFT with regard to intra-ocular injections. At M3, spend is £128k over budget based on activity plan but only £14k over based on 3/12ths budget.

- We have identified independent ophthalmology consultant, Robert Johnston (consultant ophthalmologist at Gloucestershire Foundation Trust) to carry out a clinical audit on RMEH and a meeting to scope the audit was undertaken on the 7th October 2014. The outcome of the meeting and the proposed costs of a full review will be presented to the SMT on the 21st October 2014.
- We continue to monitor two procurements being carried out by Stockport and East Cheshire CCGs to see if better value is available to Trafford through serving notice on RMEH and re-procuring the service.

2.2 PRIMARY CARE

2.2.1 Primary Care Localities Central, West, South and North

- The Terms of Reference have been updated and will be agreed at the first meeting of Locality Facilitation Group, planned for the 11th November. This followed successful funding request to develop localities.
- The overarching primary care strategy steering group is now in place.

2.2.2 Enhanced Out of Hours Access and Continuity

- APMS contract meeting has been undertaken with GM Local Area Team.
- The enhanced access pilot is to commence in January 2015.

2.2.3 Primary Care Estates

- Brooks Bar submitted a letter of intent to move into Shrewsbury Street.
- Ayres Road is in negotiations to do the same.
- PID to be submitted to GM LAT in December.
- Discussions on service portfolio and lease arrangements for Altrincham "Vitality" Hub are ongoing.

2.3 UNSCHEDULED CARE

2.3.1 Alternative to Transfer Plus

- Trafford CCG and Mastercall have agreed that data will be reported on a weekly basis for the duration of the scheme allowing for the early identification of any issues. The CCG will continue dialogue with nursing home providers to understand the effectiveness of the service and swiftly resolve any identified issues

2.3.2 Intermediate Care Review

- TGH Ward 2 was closed on the 10th October 2014. Whilst provision will be provided across UHSM and CMFT through resilience planning, discussions with SFRT are still ongoing as to provision over winter 2014/15. The discharge to assess model at UHSM plans to admit patients from the end of

October and this will be monitored by the Unscheduled Care Team as well as through Resilience Groups.

- A series of meetings between the CCG, Council and other stakeholders are planned in the coming weeks. This will assist in driving forward the progression to business case. Alongside this, the CCG is also working to better understand the demand for such a model and the capacity required to deliver this.

2.3.3 Falls Service Review

- Better Care Fund measures will be used to monitor the success of the project. A number of measures are being developed alongside the Falls and Bone Health Strategy which will be used alongside these.

2.3.4 Primary Care for Nursing Homes

- An Initial meeting held with Clinical Director Team was held in October where the Salford model was explored in more detail. A further meeting is planned to explore this concept in more detail.

2.3.5 Community Geriatrics

- The CCG has now quantified the activity and associated cost of the current delivery model which will be used to underpin the review. The current provision is to continue for the remainder of the financial year with an enhanced service over the winter period.
- A series of stakeholder meetings will be held to understand the required geriatrician input into the schemes which make up the BCF.

2.3.6 End of Life Care

- The project scope has been determined and the successful outcomes of the mapping day on the 17th October 2014 will now inform the formulation of individual schemes within this programme of work.
- Full details will be reported in the next Governing Body update.

Healthwatch Trafford Update October/ November 2014

The staff and Board of Healthwatch Trafford (HWT) continue to meet with local groups and residents of Trafford as well as having our scheduled meetings with stakeholders, local commissioners and providers of services.

We continue our regular, monthly drop-ins at

- Broomwood Wellbeing & Community Centre
- Trafford Centre for Independent Living
- LMCP drop in (Trafford Community Centre, Shrewsbury St)

We also continue our Face to Face Engagement with young people to promote Healthwatch Trafford and gain young people's experiences of using services by working with members of Trafford Youth Cabinet (consulted for guidance on engaging young people as young volunteers) and the young women attending Sale Moor Young Women's Project

Healthwatch staff and volunteers have attended the following events, meetings and forums:

Ongoing Events

- CCG Locally Commissioned Services Review Group (Previously Enhanced Services Review Group)
- CMFT Liaison Meeting
- Moorside MH Unit liaison meetings
- Safeguarding Adults Operational Board
- Safeguarding Adults Strategic Board
- CCG Public Reference and Advisory Panel (PRAP)
- HW Information & Signposting Group
- Personalisation Co-Production Group
- Locality Partnership Board (North)
- Greater Manchester Healthwatch Meeting
- North West Healthwatch Meeting
- External Reference Group of Healthier Together
- Youth Cabinet meeting
- Integrated Care Redesign Board
- PCCC Project Group
- Citizens Reference Board
- Trafford Information network
- Diabetes Network
- Health & Well Being Board
- Integrated Patient Reference Group
- Information & Signposting Meeting

- Market Management, CQC & Safeguarding Trafford Meeting
- Trafford Signposting and Accessibility Delivery Group
- Diverse Communities Board
- Health Overview & Scrutiny Meeting
- Ageing Well Partnership Board
- Sale West Health Group Meeting
- Quality Surveillance Group (NHS England LAT)

Below is an update on specific areas of work and involvement since the last Health and Wellbeing Board update in September 2014.

Healthier Together

We continue our involvement with the Healthier Together Program. We continue to attend the External Reference Group meetings.

We are continually promoting the Healthier Together Consultation and have distributed over 1500 consultation documents during the consultation period. We have a HT briefing on our website and “Tweet “regularly.

We have attended all public meetings that have taken place in Trafford.

We also promote at our drop-ins and have attended several community and voluntary groups.

The Chair has also attended public and staff meetings in other areas of Greater Manchester for the External Reference Group.

CMFT/Trafford General

Chief Officer met with Head of Nursing and the Clinical Effectiveness and Patient Experience Lead at Trafford General Hospital to discuss how best to create a continual flow of information from the public that use Trafford General. This was an extremely productive meeting that resulted in the following outcomes:

- HWT were invited to conduct Enter & View visits on the Orthopaedic Centre, Day Surgery & Acute Medical Unit initially with a view to an ongoing programme of visits.
- HWT could host regular (monthly) drop in sessions in communal area such as the restaurant.
- Trafford General will have new out patients standards from April 2015. HWT have been invited to mystery shop outpatients after that date to report on how the hospital is adhering to the new standards.
- It was agreed to give HWT a dedicated notice board in corridor (exact location to be determined) and to display other HWT publicity materials (including banner) where appropriate/possible.
- Discussed possible joint Enter &View visits with Manchester Healthwatch at other CMFT locations.

Care Quality Commission

- Chair and Development Officer attended the September CQC and LHW Advisory Group meeting in Birmingham. Subject of meeting was joint working and GP Inspection program commencing in October.
- Chief Officer and staff met with Inspection Manager for Social Care and agreed for HWT Enter & View teams to conduct joint visits/inspections of social care providers with CQC

inspection teams. We have arranged a meeting in November with HWT volunteers and the CQC Social Care inspectors to progress this.

- We are also in discussion with the Local Authority Market Relationship Officers (MROs) with a view to establishing a similar arrangement (which has already been agreed in principal).

Patient Experience Platform (PEP)

- We are nearing the end of the implementation stage and expect to have a test site launched in the next 2-3 weeks.
- There remains significant interest from external partners.
- We have identified a potential funding bid through North West Interactive Healthcare Fund for the sentiment analysis part of the Patient Experience Platform.

Greater Manchester West NHS Mental Health Foundation Trust

- A meeting was held with GMW to discuss how we could share complaints and concerns data. This was a useful meeting and we have agreed to undertake follow up work with the GMW Customer Care Team. For example how we might work with them to capture and share the experiences of Trafford residents that are referred to their secure units in Prestwich.

LGBT Project

- We were approached by a non-Executive Director at Trafford Housing Trust about the possibility of taking part in a research project on accessing health and wellbeing services for older members (over 50) of the LGBT community in Trafford. With the support of the Lesbian & Gay Foundation we submitted a joint bid to Trafford Voluntary Sector Grants Scheme. This bid was successful and the project was awarded £3000 of the £5000 requested. We are now in the planning stage of what is intended to be a 6 month project initially and are looking at the detail of how this will be conducted. For example it includes mapping existing support services and groups within Trafford and HWT facilitating focus groups for members of the LGBT community to share their experiences. We feel that this is an important piece of work that will provide valuable information with the potential for further ongoing work.

General Medical Council

- HWT met with the General Medical Council Regional Liaison Adviser for the North West to look at how best to work together and to share information. They are particularly interested in any data that we capture that may highlight potential problems and act as an early warning system. We have agreed to share complaints data where appropriate and at the appropriate level.

Arriva (non emergency patient transport)

- Chief Officer recently met with the Patient Experience Lead from Arriva to discuss what changes had been made since the publication of the GM Healthwatch report. A number of patient information leaflets have been produced. We are encouraged by the measures implemented thus far. We have agreed to share complaints and concerns about Arriva directly with them (where appropriate) and they have agreed to share their own data on complaints with us in future.

Pennine Care

- Those Healthwatch that operate in areas where Pennine Care deliver services met with the Director of Service Development & Partnerships to discuss a joint working protocol & to look at how to work more closely with each other. This was a fruitful meeting and we have now met twice with a draft protocol produced.

Healthwatch England

- Special report by Healthwatch England "Suffering in Silence" on listening to consumer experiences of the health and social care complaints system was launched at a Houses of Parliament event on the 14th October.

Information and Signposting Function

- Since the last update there have been 802 contacts with the public.
- There have been 44 instances of signposting or information requests from the public.
- There have been 58 concerns / complaints logged with us in this time 6 of these are ongoing.
- 180 volunteer hours ,

Ann Day

Chair Healthwatch Trafford

October 2014