

**BIRMINGHAM LINK – HOB Working Group Meeting**  
**Minutes of meeting held Tuesday 26<sup>th</sup> October 2010(6.30pm – 8.30pm)**  
**at Aston Pride Community Health Centre, 74 Victoria Road, Aston,**  
**Birmingham, B6 5HA**

**PRESENT:**

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|----------------------|---------------------|-----------------------|
| ▪ Rehana Ahmed (RA)  | ▪ Elsie Gayle (EG)  | ▪ Michael Tye (MT)    |
| ▪ Noorin Akhtar (NA) | ▪ Raj Rattu (RR)    | ▪ Peter Colledge (PT) |
| ▪ John Barnabas (JB) | ▪ Lynda Scott (LS)  | ▪ Barry Abell (BA)    |
| ▪ Mango_____ ( )     | ▪ Manjit Singh (MS) | ▪ Kevin McGee (KM)    |
| ▪ Karen Scott (KS)   | ▪ Tafeel Saeed (TS) |                       |

**FACILITATORS PRESENT:**

- Nahida Kausar (NK) –Gateway Family Services
- Siobhan Garrattley (SG) - Gateway Family Services (Minute Taker)

**APOLOGIES RECEIVED:**

- Sushila Patel (SP)
- Gerry Moynihan (GM)

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**1. HOBPCT INPUT – MR KEVIN MCGEE**

RR suggested that Item 4 be moved to the start of the meeting to enable Mr McGee to leave on time for another meeting.

MS introduced Kevin McGee to the group and welcomed members to the meeting.

KM started by explaining that although PCT's are soon to be abolished, the role of the PCT's has never been more important. Firstly, the PCT is liaising with GPs to set up the Consortia's ready for 2013. HOB PCT are currently looking at setting up 4/5 consortia's and need to decide where services that do not fall under the consortia's will be placed. Secondly, due to the Spending Review, significant cost savings need to be in place and the PCT's will drive this through, as well as budgeting for building winter pressures. Thirdly, staff from HOB and BEN PCT will transfer to South Birmingham Community Health Services from 1<sup>st</sup> December.

Questions raised by the group:

***Concerns about TB outbreak in area and how poor communities are being made aware of this?***

KM informs Public Health Teams from all three PCTs are working together to look into this.

EG mentioned that TB was a topic of concern within LINK and the group would welcome an in depth look at this. KM informed that there is no 'epidemic', although HOB has had higher levels than would be accepted across the City and assured the group the matter is being taken very seriously.

***Why were the community not informed of GP consortia as soon as PCTs knew?***

We have been trying to cascade information to groups within the area. Will be setting up meetings as well as attending local groups. It is important for the public to respond to consultations that are running about the white paper, the PCT welcome ideas on how to cascade this information.

***Have the consortia been set up and who would keep us up to date about their progress?***

The consortia's are not fully formed as yet, GP's are starting to come together. 5 consortia will covers most areas in HOB, which range in size. The PCT will be keeping the public up to date and are looking at creating joint GP and PCT meetings in the future.

***Can GP's refuse to become part of a consortia?***

KM informs if a GP does not volunteer to be part of a consortia, they will be allocated into one.

**Sexual Health**

Some are going into UHB and some are going into HEFT.

**Who will be commissioning Maternity Services?**

Still not been defined on national basis, debate on where services will be commissioned from is ongoing. Should know more within 6 months.

**Merger of Provider Arms**

MS raised concerns regarding the transfer date, as the group had been granted a 2 month extension on the consultation by the Cooperation and Competition Panel. KM informed the move will be continuing on request from the Department of Health. KM stated that it has been agreed between DOH that the transfer can go ahead but the PCT will need to provide more evidence regarding the transfer.

RR thanked Kevin McGee for attending and for meeting with MS on separate occasions. RR mentioned that LINK will be transferred to Healthwatch and would like to work with Kevin McGree to get people to join Healthwatch.

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**2. NEW HOSPITAL AND THE RIGHT CARE RIGHT HERE PROGRAMME**

Item 5 was moved to enable Karen Scott to leave straight after due to being unwell.

KS introduced herself and thanked the group for inviting her to the meeting. KS then went through her presentation, which had been circulated to the group prior to the meeting.

RR asked about single sex wards. KS explained this was an issue which was discussed at HAOSC, but went for 50% best fit at moment. KS further explained issues regarding single sex ward and problems they are facing complying with this.

Questions raised:

- ***Have you invited any politicians to come and see the issues regarding single sex wards?***

KS explained that the Department of Health had visited the nightingale ward and could see the issues. KS mentioned that the fine for not complying would be around £55m a year. Cost would be around £1.5m to do building adjustments to comply.

- ***How can you be sure this outcome plan will be best and better for the community?***

KS explained that a number of benchmarks around aims. Bed numbers have been reduced at the hospital over the last few years. A lot more day cases are being done, which means better results, patients are recovering quicker and infections are reduced. Do need to change perception and using facilities better.

- ***Women delivering outside hospitals. How do you think communities are going to understand? Is there enough health education?***

KS said that yes there is work to be done regarding engaging with different communities and was willing to take advice from group on how better to engage. EG reported cultural safety issues are examined by independent midwives UK and a lack of understanding is high. Hospitals need to recognise lack of balance.

KS mentioned that they are looking at Hospice at Home initiative scheme also to enable patients to be at home rather than in hospital.

RR thanked LS and KS for attending

### **3. MATTERS ARISING FROM MINUTES OF TUESDAY 31<sup>ST</sup> AUGUST AND TUESDAY 28<sup>TH</sup> SEPTEMBER**

#### Accuracy:

August: Correction to spelling of RA's surname, otherwise minutes were approved by the Group. Once amendment has been corrected minutes to be uploaded to the website.

September: RA had given her apologies for this meeting, which were not recorded

#### Matters Arising from September Minutes

MS mentioned that Action 6b was still outstanding.

#### **Actions:**

- Host to make amendment to August and September minutes, these are then to be uploaded to the website.
- HOB PCT to ensure action 6b is completed and the Digbeth Trust and Health Exchange are invited to the next meeting.

### **4. NOTIFICATIONS OF MEETINGS FOR GROUPS/ORGANISATIONS**

MS raised concern over people not receiving notifications of meetings. Host explained that the current system used to inform people was currently being reviewed and is being looked to be changed urgently to ensure that all people on different groups are receiving emails or postal notifications.

RR commented on the poor turnout of members to the meeting, given that the Chief Executive was attending. MS urged people to attend the Tracy Taylor meeting on 10<sup>th</sup> November.

**Actions:**

- Host to review system and ensure notifications of meetings/papers are being sent to all individuals/organisations urgently.

## **5. WORKPLANS**

Due to the time constraint, this item was unable to be discussed. NK suggested to MS that they arrange to meet and discuss.

**Actions:**

- NK to meet with MS to discuss workplans.

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## **10. ANY OTHER BUSINESS**

### Appointment on Right Care Right Here Programme Board

2 nominations had been received prior to the meeting, MS and SP. SP had prepared a brief statement as she was unable to attend the meeting. It was agreed that MS would leave the room and the group to vote.

MT seconded SS nomination and BA seconded MS nomination

MS received 4 votes and SP received 2 votes with 1 abstention. It was agreed that MS would attend the board on behalf of the group and SP to be offered the role of a deputy.

**Actions:**

- Host to inform SS of decision of appointment to RCRH programme.

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## **DATE OF THE NEXT MEETING**

Tuesday 30<sup>th</sup> November, Soho Road Health Centre, 247 – 257 Soho Road, Handsworth, Birmingham, B21 9RY