

NOTES OF TITLE OF THE
WORKING TOGETHER STEERING GROUP
Thursday 22 June 2017, 18.00
Meeting Room, United Reformed Church, Market Place,
Whitehaven

In Attendance: Richard Pratt (RP) (**Chair**)
Christine Atkinson (CA)
Eve Atkinson (EA)
William Atkinson (WA)
Jan den Bak (JdB)
Kieron Bradshaw (KB) (Minutes)
Julie Clayton (JC)
Stephen Childs (SC)
Liz Clegg (LC)
Ella Cullen (EC)
Stephen Eames (SE)
Yvonne Fairbairn (YF)
Anne Glazebrook (AG)
Les Hanley (LH)
Christine Harrison (CH)
Ian Hinde (IH)
Eleanor Hodgson (EH)
Bernadette Bowness (BB)
Christine Kitchen (CK)
Ged McGrath (GM)
Heather Naylor (HN)
David Rogers (DR)
Sue Stevenson (SS)
Viv Stucke (VS)
Gillian Troughton (GT)
Eileen Turner (ET)
John Ward (JW)
Mary Watters (MW)

WTG001 **AGENDA ITEM 01: WELCOME**

The Chair gave a welcome and thanked everybody for attending the meeting.

WTG002 **AGENDA ITEM 02: INTRODUCTIONS AND APOLOGIES**

The members of the meeting introduced themselves.

Apologies were received from Mahesh Dhebar; Rebecca Hanson; Sandra Guise; Celia Heasman and Carolyn Otley.

WTG003 **AGENDA ITEM 03: TERMS OF REFERENCE**

The group read through the notes for discussion around Terms of Reference and then conversation was held.

SC and SE gave further clarification of the paediatric services that the group would be working on, and it was noted that it would be helpful to include a section to have a written explanation of the paediatric services that the group would be carrying out work on to make it clearer, as the changes to paediatric services go beyond maternity services.

It was suggested that there could be a line about co-production in the first paragraph of the Terms.

Following discussion, SC advised that there are other co-production groups, but the Working Together Steering Group was the most formal one. It was noted that the terms of reference from this group would be of interest and could help others.

Discussion took place about the behaviours of the group and it was noted that members of the group needed to feel comfortable to express their thoughts without them being reported widely. It was advised that the group would need to remain open and honest, which included producing notes of meetings. However, it was noted that points could be redacted from notes following agreement and the importance of respecting confidentiality.

LH raised a concern that key players in West Cumbria are industries, such as NuGen and Sellafield, and so partnerships with these needed to be formed.

Following discussion it was agreed that rather than one Steering Group there would be smaller sub-groups that would focus on specific areas, with a general meeting to catch up. SC gave an explanation of a proposed structure diagram which had been circulated to the members of group. EH explained which sub-groups could form part of maternity and paediatrics section of the diagram, and noted that the group would need to link with work to develop maternity hubs, part of a national programme.

SE advised that it would be sensible to have input from other groups and organisations, such as Cumbria County Council, for understanding of particular areas. It was also noted that NWAS will need to be involved in discussions about transfers.

GT advised that there may be a need to have a sub-group that focused on Carlisle, so

that CIC was thought about as well as WCH.

Following a question from JW regarding how much input this group would have into overall decisions about services, SC gave an overview of the governance process and explained that a commitment would be made for this group's views on the success criteria would be fed back to the NHS North Cumbria Clinical Commissioning Group Governing Body.

Short conversation took place regarding the membership of the System Leadership Board, and whether there would be room for Lay Members on it. SC advised that the membership was currently being reviewed.

JC encouraged any advice and criticism about the way the Steering Group was working, as it would help ensure it was on the right tracks, noting that the members were all learning as they were going along.

Following discussion it was suggested that Healthwatch may be able to lead the creation of a catalogue of each sub-group, including information on who leads each one, and links to other groups looking at connected issues.

ACTION: Conversation was held regarding who would administrate the group, to ensure information was disseminated, questions were directed to the appropriate people, and notes were taken at meetings. It was agreed that an administrative system would be in place.

Conversation took place regarding the frequency of the group meetings and it was agreed there should be further meetings in July and September, and that timings for these would be confirmed.

WTG004 **AGENDA ITEM 04: SUCCESS CRITERIA**

The members of the meeting split into groups to have discussions around what they felt the success criteria would be for Option 1 to continue. Following these discussions the main group reconvened and members fed back what they had discussed.

YF gave clarity regarding when and how patients would be moved from the Alongside Midwife Led Unit to the Consultant Led Obstetric Unit at WCH. It was noted that the process was still in discussion. Concerns were raised that the transfer from room to room could cause anxiety. Regarding the location of the Midwife Led Unit, EH advised that it would need to feel separate from the Consultant Led Obstetric Unit, but would be as close as possible to it and most likely in the same area of the hospital.

Conversation took place around when feedback would be gathered from patients who were using the Midwife Led Unit.

GT raised a concern that having lots of sub-groups may be too much of a strain on managers' time and noted that the group would need to ensure staff of an appropriate

level were involved in each group. Following short discussion it was advised that NHS leaders had the capacity to cope with what had been set so far, but that training would also be needed to involve other staff in the groups.

Discussion took place regarding the information available to members of the group about the services that the group were focussing on. It was noted that the NHS should take responsibility to ensure the group had all the information that it needed to understand the services and what the services would be like. In particular, EA requested information regarding the staffing needed for Option 1 to be successful. It was agreed that a presentation would be made at the next meeting and that information produced for the group would be in plain English, avoiding acronyms and jargon where possible, as people who were newly involved struggled to understand it.

Conversation took place regarding the particular areas that should be measured and how they would highlight success. It was advised that it would be important to look at what the outcomes would have been for patients if they had not gone through the Alongside Midwife Led Unit. This could determine which other options were possible if Option 1 could not be continued. It was also highlighted that one measure of success would be the work done by the Steering Group itself, as it could be a model for the future and not just a one off project. It was noted that to achieve this there needed to be culture shift amongst both the health system and the community.

It was noted that a positive point about measuring success was that it could help to remove cynicism, and may result in people recommending the services to others, and also promote the area as a positive place to live.

Positive news was announced that a new consultant had been interviewed to work at North Cumbria University Hospitals NHS Trust earlier in the day.

It was agreed that future meetings would be scheduled as two hours in duration, rather than one and a half hours.

WTG005 AGENDA ITEM 05: IDENTIFY PRIORITY AREAS

Item 5 was deferred due to time limitations; the members of the group took away the document relating to the item, so that the issues could be fed back on after people had had time to consider it.

WTG006 AGENDA ITEM 06: AGREE NEXT STEPS

Item 6 was deferred due to time limitations.

WTG007 AGENDA ITEM 07: Date and time of next meeting approved:

It was agreed the next meeting would take place on Thursday 13 July, from 18.00 - 20.00.

The meeting closed at 20.00