

County Durham LINK Enter and View Minutes (Amended)

Monday 5 July 2010
Pioneering Care Centre, Newton Aycliffe

		ACTION
1.	<p>MD opened the meeting. MD and AL discussed the reason for the venue change. AL outlined the Fire procedure and toilet facilities</p> <p>Present: Michael Dalton (MD), Michael Hemingway (MH), Dave Kellet (DK), John Hudson (JH), Syd Duggan (SD), Agnes Armstrong (AA), Pauline Crathorne (PC), Sheila Grant (SG)</p> <p>In Attendance: Helen Marshall – Observer, Alesha Aljeffri (AL), Colin Burton (CB), Sandra Roberts (SR) - minutes</p>	
2.	Apologies: Joan Taylor (JT), Sandra Cottrell	
3.	Minutes of the last meeting: Agreed and approved	
4.	<p>Matters arising not on the agenda:</p> <ul style="list-style-type: none"> • An information day is being organised in August for the Enter and View and Management Committee groups. • A draft report is being put together for the Management Committee regarding the relationships with commissioners. The Enter and View Group will be asked for comments before the report is sent to the Management Committee. 	Host to arrange
5	<p>Training</p> <ul style="list-style-type: none"> • AL acknowledged that the sourcing of training programmes had been slow. This was due the difficulty in getting dates together. Disability Awareness Training will be commencing after lunch meaning that the majority of the Enter and View Group will now be fully trained. The exceptions are Sandra Cottrell who joined the Enter and View group late and Sheila who will be completing her Safeguarding training shortly. All Enter and View reps who have completed their training will be issued a certificate by the LINK • SD agreed that some training should have taken place; however felt the amount of training was over the top. MD responded that the training was governed by the 	Host to issue

structure and governance placed on LINKs.

- AA voiced concerns about whether the funding for LINKs has now gone under the change of government and is worried that LINKs may about to be cut off in its prime. AA also raised that there are no significant outcomes to evidence or justify further funding.
MD responded that while there are no commitments at present for further funding he believes the likelihood is that LINKs will carry on for at least another 12 months. AL concurred with this statement and pointed out that we were not the only LINKs having problems with the issue of Enter and View and training. AL is confident that Enter and View group will now progress and move forward aligning themselves to the work plan issues and conducting visits.
- DK stated that it was the responsibility of everyone at the table to create the work plan for the Enter and View Group and that they should not wait for the Management Committee to plan the work for them. MD stated that two visits to all intense purposes had been conducted. Reports of those visits have been produced and published, even though they had been classed as training visits.
- MH asked whether it is possible for any members that are not fully trained to attend a visit as long as they are accompanied by two fully trained members. AL responded that it had been agreed that reps would have to be fully trained before they could undertake any formal visits however, this would not be necessary as after today nearly everyone would be fully trained.
- CB stated the attitude of Durham County Council (DCC) slowed things down in terms of getting Enter and View off the ground. However feels that the situation has now been resolved.
MD agreed, stating that Residential Care Homes had been frightened off from working with LINK by DCC, who had built the LINK up as a group of people what to Enter premises and create problems. However since the meeting with the Care Home they have come to realise that that is not the case.
- JH asked about Health Watch – The conservatives answer to LINKs as he has heard that this is now progressing.
MD responded that he was of the opinion that Health Watch would replace LINKs however at the present moment in time it was on the back burner as other

	<p>thing were taking priority in the current economic climate. He stated as of yet there were no implementation timescales set for Health Watch.</p>	
6.	<p>Feedback from Management Committee</p> <ul style="list-style-type: none"> • AL informed the Enter and View group that the Management Committee had recently conducted a work plan review. • AL also discussed the change in the Management Committee Structure and the up and coming elections. The will now be 14 District Management Committee Members and 4 Special Interest members. (Carers, Older People, People with Sensory Impairment and People with Mental Health problems). Other ways are to be found of engaging with Children and Young People, People from Ethnic Minorities and People with Learning Difficulties are to be explored. <p>AL stated that it would now also be possible for any of the Management Committee members stepping down to join the Enter and View group or Standards Committee due to the training that they had undertaken to be a Committee member.</p> <p>AL confirmed that Enter and View Chair position as a Co-opted member of the Management Committee will remain.</p> <ul style="list-style-type: none"> • A discussion took place regarding why the Management Committee had not aligned itself to the Area Action Partnership. The group was advised that the Management Committee felt it was right to increase its numbers by 7 to 14 District Representatives to help with the work load of district reps. (It is a requirement of the role specification that the member is able to feed information in to the LINK from other networks and vice versa.) <p>However, it was not plausible to go down the AAP route and add further to the Management Committees numbers as it would become unworkable.</p> <ul style="list-style-type: none"> • MD stated that nominations were now being accepted for the Management Committee and that this would include nominations from various networks so that the LINK could continue its partnership working. • A discussion took place about the long term future of AAPs their budgets and the work priorities they set themselves. This was due to question being raised by the members about how their work priorities are set. As not all AAP's have set Health as one of their priorities. Also question marks were raised by some 	

	<p>members as to whether the AAPs had a long term future. However it was resolved that it is the future funding for the AAPs that is in some doubt and not their operational status.</p>	
7.	<p>LINK Work Plan Review and Update</p> <ul style="list-style-type: none"> • AL sent round a handout regarding the work plan review. AL then went through the information. • Questions were raised about who sets the objectives for these working groups. AL stated that it was the decision of the individual members within the working group to decide the objectives and direction that would be taken. • AL also highlighted some of the work plan issues that had run into difficulties and gave an outline of what those difficulties were. • SG raised concerns that the Residential Care Homes Working Group would only focus on the proposed closures and not look at the other issues such as people being funded by health care in these homes. Personalisation is funded by social care. AA responded that these points would need to be raised at a working group meeting so that they could be considered when planning the objectives of the group. • A discussion then took place regarding how difficult it was to find the lines between health and social funding. MD stepped in to say that this was not a discussion for this meeting and that these issues should be fed into the working group for them to take forward 	
8.	<p>Patient Transport Service Visit</p> <ul style="list-style-type: none"> • AL has been in touch with Sahdia from NEAS regarding a visit to the Patient Transport Service Control room. Everybody from the Enter and View has the opportunity to attend this informational visit. • MD asked the members to raise their hand if they were interested in visiting the control room. • The interested parties are: JH, MH, MD, SD • It was agreed the visit should be arranged for either Monday or Wednesday week commencing 26th July 2010. 	AL to confirm the visit
9.	<p>Enter and View Visits – Working groups</p> <ul style="list-style-type: none"> • Clozapine Visit to be conducted by DK, MD, AA Visit date agreed as 26th July 2010 Pre meeting is to take place Monday 19th July 2010 at St Cuthberts 	Host to confirm arrangements

	<ul style="list-style-type: none"> • Willowdene Residential Care Meeting Visit to be conducted by JH, PC, JT is to be asked to join the group as SG is concerned about the issue of time/training and her involvement with this visit Pre meeting to be confirmed date suggested 21st July 2010 • Appletree Residential Care Meeting Visit to be conducted by MH, SG, SD Visit date w/c 9 August 2010 Pre meeting to be arranged for a week prior. • A&E University Hospital North Durham A visit is to be arranged for August / September The following members are interested in being involved AA, MD, PC, MD, DK • SD requested that a sheet that be sent round confirming all the dates to the members. • MD thanked the host for the work put into arranging the visits so far. MD feels that everyone will now get a taste of what is involved in a visit. He is pleased to see things are moving forward and feels that it would be prudent to follow up the first couple of visit with a review before charging straight into anymore. DK questioned MD asking whether this would mean there would be a hiatus on further visits. MD responded that further visits can be looked at and the process used to set up a Enter and View visit can still be set in motion. MD acknowledged that the visits are not as straight forward to arrange and that the way a visit is conducted may need to be reviewed based on the outcomes of the first official visits. 	<p>Host to confirm</p> <p>AL to confirm</p> <p>Host to confirm</p> <p>AL</p>
10	<p>Any Other Business</p> <ul style="list-style-type: none"> • Attendance – AL asked the members if they could inform Host if they cannot attend a meeting so that if necessary they can be rearranged. • Colin asked the group if they were still happy for him to attend the meetings. The group confirmed that they were. • Enter and View review. The Enter and View group members were asked for feedback for the Enter and View Review. The following were comments made by the members. SD – stated that he was a bit dubious about the Management Committee and has been worried about the link between the Enter and View Group and the Management Committee. However SD is happy with the way things are moving 	

	<p>forward in terms of visits</p> <p>MD – feels that the Management Committee and David Haw have included the Enter and View group in their processes.</p> <p>DK – Wondered what the Management Committee thought of the progress that Enter and View have made. DK is disappointed at the rate of progression the Enter and View group had made.</p> <p>He feels the Management Committee should have more expectations of the Enter and View group, that the group should have its own goals and the Management Committee should them accountable.</p> <p>AA – Feels that LINK needs to be more proactive and not wait for the responses (i.e. the Residential Care Home Consultation Response) before booking meetings with commissioners. AA pointed out that the LINK is subject to both internal and external scrutiny and that people are watching closely the progress that is being made.</p>	
	<p>Date of next meeting: Friday 3 September 2010, 10am – 12.30pm, Bowburn Community Centre, Bowburn</p>	