

 <p><b>HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE</b></p>	 <p><b>HEALTHWATCH LINCOLNSHIRE</b></p>
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**Statement from Health Scrutiny Committee for Lincolnshire and Healthwatch  
Lincolnshire**

**Lincolnshire Partnership NHS Foundation Trust  
Clinical Strategy 2016/17– Draft Priorities**

Introduction

On 21 October 2015, the Health Scrutiny Committee for Lincolnshire established a working group to review seven draft priorities, on which Lincolnshire Partnership NHS Foundation Trust was seeking views, prior to developing its clinical strategy for 2016/17. Healthwatch Lincolnshire also participated in the working group, and the following comments have been prepared on behalf of both Health Scrutiny Committee for Lincolnshire and Healthwatch Lincolnshire.

General Comments

The Health Scrutiny Committee for Lincolnshire and Healthwatch Lincolnshire give their overall support to the seven draft priorities. The specific comments on each priority are set out below.

As an overarching theme, Health Scrutiny Committee and Healthwatch Lincolnshire would like to emphasise prevention and early intervention, as this is preferable for service users, and can improve their overall wellbeing and actions to support this are particularly welcome.

The Health Scrutiny Committee and Healthwatch Lincolnshire accept that the seven priorities are not in a particular order. However, we believe that the priorities on *Improving Access to Services; Providing Better Support for People Who Are Discharged or Who are Waiting for Services; and Increasing Service User and Carer Involvement in all Aspects of Service Design and Delivery* need to be given greater emphasis in the final clinical strategy, as these priorities directly relate to improvements in services for patients.

Compliance with the Care Quality Commission's Fundamental Standards of Care.

The Health Scrutiny Committee and Healthwatch Lincolnshire accept that meeting the Care Quality Commission's five key requirements are a longstanding commitment, and are not solely limited to inspections. However, some of the outcomes of the inspection taking place in November and December 2015 may lead to the development of specific actions.

One of the proposed actions under this priority is the provision of clear information and advice about services offered and where to access them. We believe that primary care services also have a role in supporting this action. Primary care should also be encouraged to promote, for example, specialist GPs or nurse practitioners in the area of mental health and learning disability.

#### Ensuring Long Term Sustainability of the Trust

The Health Scrutiny Committee and Healthwatch Lincolnshire support the Trust's intention to broaden this priority to ensuring the long term sustainability of health services in Lincolnshire.

#### Improving Access to Services

As stated above, the Health Scrutiny Committee and Healthwatch Lincolnshire stress the importance of this priority.

The Health Scrutiny Committee and Healthwatch Lincolnshire understand that one of the proposed actions will be adjusted to provide support and training for all primary care (not just GPs), to support mental health and learning disability awareness.

Another proposed action is the provision of a higher level of clinical support to the Managed Care Network. The Health Scrutiny Committee and Healthwatch Lincolnshire look forward to professionals engaging with volunteers and believe that relationships between professionals and volunteers should always be based on respect.

#### Provision of Better Support for People Discharged from or Waiting for Services

Healthwatch Lincolnshire's own research had identified a high level of dissatisfaction from service users after they had been discharged from the Trust, so this priority is strongly supported, by both the Health Scrutiny Committee and Healthwatch Lincolnshire. Service users' expectations are important and need to be considered and this makes information of key importance.

There is also a view that once services users are "in the system" they are well treated, but while waiting for services, they may feel isolated; and again, once they are discharged, they are always feelings of isolation. This view reinforces the need for this priority. Ideally there could be a tapered discharge, so that service users do not suddenly feel there is no one there to support them.

One of the proposed actions under this priority is the expansion of the volunteer scheme to provide support for those currently engaged in services. This recognises the importance of the third sector, in particular as part of the Managed Care Network. Another proposed action is the creation of a care navigator to support integration and link to the neighbourhood teams. This role would be particularly important for those service users waiting for services.

### Supporting Staff

Raising any concerns about services is a key role for staff, and it is important that the Trust has a means of gathering and acting on such information, without fear and favour. The Health Scrutiny Committee and Healthwatch Lincolnshire recognise that staff forums take place every two months, and these provide an opportunity for staff to provide general feedback on service delivery.

### Increasing Service User and Carer Involvement in Service Design and Delivery

The Health Scrutiny Committee and Healthwatch Lincolnshire strongly support this priority. It is important that where service users and carers are involved in service design and delivery, their contributions are valued and they are able to see the outcome of their contribution. The Health Scrutiny Committee and Healthwatch Lincolnshire would like the Trust to show how contributions from service users and carers make a difference, to encourage other services users and carers to participate as well.

### Supporting Lincolnshire Health and Care (LHAC) and Promoting Service Integration

The Health Scrutiny Committee and Healthwatch Lincolnshire understand that the Trust intends broadening this priority beyond Lincolnshire Health and Care to promoting service integration for patients, irrespective of the provider. Furthermore, as mental health is not a prominent component of the Lincolnshire Health and Care, it would be beneficial to do this. The Health Scrutiny Committee and Healthwatch Lincolnshire acknowledge the progress made so far with the neighbourhood teams.

The Health Scrutiny Committee has previously indicated that it would wish all clinical strategies to meet the aims of Lincolnshire Health and Care and this desire remains.

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