



Report from Mark Farmer

Chair of The People's Council and Healthwatch Leicester and Leicestershire Board member

The People's Council

The external review of the Council has now concluded, and the Council is considering next steps. The report notes what we are doing well, which included the Council's leadership team providing support to Council members and what we need to do to improve, to get the most from our members. One of the key findings was that members of the Council needed to see that they are making a difference to services provided by the Trust. Next year, it would be useful to discuss with Board in a joint development session on how we could address that finding and the recommendations.

There was a special meeting of the Council to discuss the outcomes to the Step Up To Great consultation, now it will be moving into the all-important implementation phase, the Council will need to consider what its ongoing role be.

Council members continue to work closely with the Head of Patient Experience and Involvement to develop a new approach to patient and carer leadership, this work includes what would the Trust need to do to create a patient and carer Director at the Trust, with lived experience, which is a recent NICE guideline and creating a lived experience framework.

Angela is coming to our next Council meeting in December. The Council will be talking to her about the CQC Inspection and what the plans are in response to it and we also want to discuss strengthening LPT's approach to patient and carer engagement and involvement. I and Al Richardson, Chair of the Council's communications sub-group were part of the interview panel for the role of Deputy Head of Experience and Involvement at the Trust.

Healthwatch

In January, the Board of Healthwatch is due to receive a report on male suicide in Leicester and Leicestershire. We will then send this report to partners, including the All-Age Mental Health Design Group, the Governance Team at LPT, Health Overview and Scrutiny Committees and the two Health and Wellbeing Boards. We have recently signed off reports of people's experience of accessing GP services.

Healthwatch has been part of developing an Integrated Care System approach to engagement, which has been led by the combined Clinical Commissioning Group Engagement and Involvement team, with the involvement of LPT and UHL. We need to consider how we better use all the intelligence that we have in each organisation to inform strategy and service planning and ICS decision making at all levels.

We continue to receive concerns from members of the public about the long wait times to access Personality Disorder services at the Trust and how people seemingly have regular changes to their consultant in a number of adult mental health services and how they have to keep repeating their story. There also continues to be concerns raised about the Crisis Team and it not being treatment focused, supportive or responsive to those that need their services the most. I remained assured that the implementation of Step Up To Great for Mental Health will address these concerns, but we will keep this under review.

General Updates

I continue to Co-Chair All Age Mental Health Design Group the this with the Interim Director of Mental Health Services. We recently had a session on how we do we make sure that we have all the right relationships in place and what barriers we need to overcome as we move towards a collaborative model for mental health. There is real commitment from partners to come together in a collaborative way to move plans to transform mental health services right across all mental health services. It is evident that we need an agreed framework for what everyone's shared priorities on mental health will be.

I have taken part in national meetings with NHS England:

- I am part of a working party looking at outcome measures in Community Mental Health services

- I had a meeting with the Adult Mental Health team about changes to the way in which GP's are paid for carrying out health checks for those with Serious Mental Illnesses, following concerns raised locally about changes made to the payment arrangements that could result in the checks falling down a practices list of priorities.
- I have contributed to the development of new national inpatient guidelines
- I attended a meeting of the national forum for Expert Advisors on Adult Mental Health, where we reviewed the job support service for those with mental ill health that need that require that additional support to get into employment.

I am pleased to report that with the support of Cathy Ellis, I have recently secured a one-year placement on the Board of East Midlands Ambulance Service NHS Trust as a Non-Executive Board Director in training.

I would like to finish my report by thanking all of you for being supportive of the Council, the work of Healthwatch and for the support you have personally given me. I do really appreciate, and I am grateful. You are a great team to work with, I am pleased that our work together it is paying off, with the CQC, in its latest inspection report, praising the Trust for the work we are leading together on engagement and involvement. Well done all.