

## ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE

### **4 NOVEMBER 2024**

### **OBSERVATIONS ON THE AGENDA**

Comments received from Healthwatch Leicester and Healthwatch Leicestershire, on the agenda for the meeting, as follows:

"Firstly, there is no reference to winter contingency planning on the agenda and whilst Healthwatch recognises that HOSC has leadership responsibility for scrutiny on these plans, Healthwatch is asking for assurance that A&C OSC is satisfied plans are on track for social care delivery.

Item on the agenda:

• **Draft AC dept strategy** - Healthwatch LL recognises the work in preparing the stakeholder mapping at Appendix B. Under the General Public Section, we would wish to understand whether a separate category of 'service user' has been considered? Lived experience of current service users can often be helpful in shaping future planning at a strategic level alongside a more generic response."

Fiona Barber Co-Opted Member, Healthwatch Advisory Board





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# **OBSERVATIONS ON THE AGENDA**

Comments received from Healthwatch Leicester and Healthwatch Leicestershire, on the agenda for the meeting, as follows:

"Item on the agenda:

CQC LA assessment - in the spirit of transparency, the Committee may wish
to be aware that CQC inspection teams contact local Healthwatches to gather
feedback and evidence."

Fiona Barber Co-Opted Member, Healthwatch Advisory Board





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### **OBSERVATIONS ON THE AGENDA**

Comments received from Healthwatch Leicester and Healthwatch Leicestershire, on the agenda for the meeting, as follows:

"Item on the agenda:

• Customer Service Centre - Healthwatch welcomes this comprehensive report. We are seeking clarification as to how service users have been involved in the review, and whilst Healthwatch can see there is access to an online survey, we would welcome detail on what other methods are available. The performance metric at para 24 talks about reduction in overall monthly contacts (indicates reduced failure rate), Healthwatch feels this is open to mis interpretation by those who may see it as limiting access to the CSC. Lastly, some of the timescales in the review are exceedingly limited, for example, only 4 weeks is set aside for a trial limiting email access to emergency services, with only 4 weeks there could be undue fluctuations caused by for example, IT problems or sickness."

Fiona Barber Co-Opted Member, Healthwatch Advisory Board

