

# **Board meeting minutes**

15 September 2014 - 3pm Central Square, Newcastle upon Tyne

#### Board members present

Bev Bookless (BB) Chair and independent
Jill Remnant (JR) Vice chair and independent

Tim Care (TC) Independent

Lisa Charlton (LC) Newcastle Society for Blind People

Sarah Cowling (SC) HealthWORKS Newcastle

Alison Walton (AW) Independent

Anne Bonner (AB) Riverside Community Health Project

**Apologies** 

Alisdair Cameron (AC) Launchpad

Sally Young (SY) Chief Executive, Newcastle CVS

In attendance

Deborah Hall Information Support Officer, Healthwatch Newcastle (HWN)

Julie Marshall (JM) Involvement Coordinator, HWN Rachel Head (RH) Champions' Support Worker, HWN

Andy Render (AR) Project Worker, West End Youth Enquiry Service

#### 1. Welcome and introductions

1.1. The meeting began at 3pm with a round of introductions.

## 2. Apologies for absence

2.1. Apologies were noted from Alisdair Cameron (AC) and Sally Young (SY).

#### 3. Declarations of interest

3.1. No interests were declared.

#### 4. Minutes of last meeting and matters arising

- 4.1. Matters arising: Bev Bookless (BB) asked about the impact of the bus advertising campaign: no impact has been recorded so far. The adverts will remain until someone else buys the space.
- 4.2. The minutes were agreed as a true record.

#### 5. Annual General Meeting (AGM)

- 5.1.BB started the AGM section of the meeting by saying that it was the first AGM for Healthwatch Newcastle (HWN) and it has been 16 months since the Board members were first appointed. HWN is still finding its feet, forging relationships with many organisations (including the NHS England Area Team and CCGs) and dealing with the impact of NHS reforms.
- 5.2.HWN wants to be an active partner for service change. The tendering process for out of hours GP services and Scotswood GP practice highlighted gaps and HWN has played a role in revising tender specifications. The Better Care Fund work is led by Alison Walton (AW); this is currently quiet although things are expected to pick up at the end of September.
- 5.3. The Champions were thanked for their contribution as they play a great part in the work and HWN could not function without them.
- 5.4. There were two areas where it was felt improvements could be made: there's a need to focus more on social care, especially in the area of integration; HWN's level of influence is not as it should be need to be involved at the start of service changes and proposals.
- 5.5. There was formal acceptance of the HWN annual report and budget (proposed by Anne Bonner (AB) and seconded by Sarah Cowling (SC)).
- 5.6. Two people stood down from the Board and sought re-election. AW was proposed by JR and seconded by Lisa Charlton (LC); Tim Care (TC) was proposed by AB and seconded by SC.
- 5.7. Di Barnes resigned from the Board in May due to other commitments and JR plans to step down at the end of 2014, therefore recruitment of two new members will take place shortly. HWN is looking for one member who can quickly gain credibility in the VCS and one member with an academic research background. BB asked everyone to promote the Board recruitment when it takes place. Members will also be co—opted when specific areas of expertise are required.

**Agreed:** AW and TC are reappointed for a term of three years

# 6. Work plan update (paper 1)

- 6.1. Trend analysis: the team will be using a spreadsheet to analyse all data to identify common themes.
- 6.2. VCS engagement: two events were held and an information-sharing protocol has been put together and will be shared soon. A draft flow—chart showing how HWN can help the VCS and case studies are also being developed.
- 6.3. Champions: 25 volunteers have now been recruited and have taken part in various activities, including a monthly City Library information stall and the annual street survey. They will also be helping at upcoming events including the Disability North Exhibition (DNEX) and Mental Health Awareness Day.

- 6.4. Eating disorders: the five beds at the RVI will now remain and be commissioned by NHS England. This means that inpatients can now be treated locally instead of having to travel to Darlington or even further afield.
- 6.5. Care Act 2014: the team will be familiarising itself with implications of the Act so it can consider how HWN can be effectively involved.
- 6.6.GP practice review: this is at the planning stage and will involve an overall review of patient perception and experience; it will be evidence based. One of the Champions is a former health economist who has ideas on how to develop the work.
- 6.7. Wellbeing for Life Board meeting: HWN will be delivering a presentation in October outlining some of the main themes and issues that are being picked up from the public.
- 6.8.CCG merger: Newcastle North and East, Newcastle West and Gateshead CCGs are merging into the Newcastle Gateshead Alliance. This is currently in shadow format and will be a single body from April 2015. Guy Pilkington will be the clinical lead for Newcastle and he will rotate the overall clinical Chair with Mark Dornan.
- 6.9.GP out of hours: the procurement process has been halted so NHS England can design how out of hours services should look. HWN has written to the CCGs to ask how the public will be involved in designing and contributing towards a new model of care.
- 6.10. Andy Render (AR) tabled a paper about his work with children and young people aged 13—25 years. There's been a positive start and a weekly participation group has been meeting since June to give their views. A questionnaire has also been developed and used at various events. An effort has been made to recruit people from a wide variety of places, including people who don't usually participate in surveys.
- 6.11. The participation group's priority will be dental services. Many people hadn't been to a dentist for years and were unsure about the difference between NHS and private services, how to register, etc. The group is currently scoping the work and will be inviting someone to speak about dental services.
- 6.12. The second priority will be mental health, focussing on what services are available in Newcastle. The group has also been reviewing marketing materials and the website from a young person's viewpoint and will be making some suggestions. A comment was made about these priorities being applicable to the wider public as well as young people.
- 6.13. Alisdair Cameron (AC) is the lead for the young people's work, with AB in support. BB is keen for the group to meet with the Board before Christmas.
- 6.14. NTW's mental health service changes: Northumberland, Tyne and Wear NHS Foundation Trust (NTW) and the Newcastle Gateshead Alliance are reviewing adult and older people's mental health service provision for both inpatient care and community pathways.
- 6.15. There are three meetings taking place in September: two for service users and carers and one for the VCS. These are not part of a formal consultation but the views expressed will help to shape a formal public consultation process led by Newcastle and Gateshead Alliance which will last for at least 12 weeks.

- 6.16. The hope was expressed that the consultation will include the public as well as patients. The nature of the Newcastle family services review was also raised it was felt that people have been presented with three options but have had no input in developing the consultation model. It was suggested that someone could ask the local authority about involving people in the design of consultation models.
- 6.17. English for speakers of other languages (ESOL) module: the healthcare system can be baffling for newcomers and the GP gateway is not self-evident. There are an estimated 2,500 'ESOL' people in Newcastle and JM is working with JET to develop training modules to help them understand and access NHS services. There will be three two-hour courses which can be stand-alone or part of a set. The intention is to trial and then release as a free resource by January in order to improve equality and accessibility throughout Newcastle. A generic module is also being developed for everyone (not just ESOL) who wants to know about the NHS.
- 6.18. GP practices in the West End (paper 2): an overview was given on proposed changes. Scotswood GP practice termination of the contract with the provider and procurement of new provider; Grainger GP practice early exit of the provider from the contract and procurement of new provider; West One proposals for a new primary care centre and relocation of two existing GP practices.
- 6.19. Following consultations and a review, NHS England has decided to merge Grainger GP and Scotswood GP practices into one. A procurement exercise began on 14 July 2014 and HWN is awaiting the outcome.
- 6.20. Consultations took place with local people in 2009, but to date West One remains at the planning stage. Restructuring of the primary care sector in 2013 has resulted in changes to the stakeholders involved: the PCT and SHA are no longer in existence and the CCGs would need to take over sponsorship of the project for it to continue. Grainger GP practice was originally earmarked to occupy West One but due to the merger with Scotswood GP practice it is unclear if services will still be moved from Grainger GP practice into West One.
- 6.21. Concerns were raised about the long period of time taken over the development of West One and discussions took place on how best to monitor this. It was suggested that HWN might raise a freedom of information request to find out how much has been spent on the proposal so far.

**Agreed:** Utilise the HWN partnership with the Health Scrutiny Committee to monitor developments; with SC and AB gathering local intelligence as they are close to the area

- 7. Health Scrutiny Committee, Wellbeing for Life Board and Healthwatch Newcastle joint protocol (paper 3)
- 7.1. JR gave an outline of the joint protocol. All parties have a shared agenda to ensure access to good services, with different areas of emphasis. By understanding each other's roles and powers, each organisation can be clear on how to contribute to the powers, roles and remits of the other two organisations. JR acknowledged the large contribution of the council staff in drawing up the protocol. It is due to be presented to the Wellbeing for Life Board in October.

Agreed: The HWN Board approved the joint protocol

7.2. HWN's incoming Chief Executive, Steph Edusei, was present at the Board meeting and BB welcomed her. Craig Duerden has now left and was thanked for his work in setting up HWN.

## 8. GP mystery shopping project

- 8.1.RH gave a presentation outlining the rational and methodology for the mystery shopping project. Comments to HWN about GP practices are almost four times higher than those received for any other single health or social care service.
- 8.2. Forty-two GP practices were visited in Newcastle by Champions. The two Newcastle CCGs and the Cumbria, Northumberland, Tyne and Wear Area Team were informed the work would be taking place so there were no surprises. The aim was to find out what information GP practices had about their complaints procedures, how clear that information was and how easy it was to find. Comments from one of the Champions included his observations that some practices were friendlier than others and that some expect complaints to be made in writing.
- 8.3. A report has been written that the Board was invited to comment on. This will be sent out with a tailored report for each practice; GP practices will be encouraged to contact HWN to discuss the findings. Things to consider: a change to the title; important to emphasise positive feedback so it is not just about complaints; reword the "20 working days to respond" section. Patient Participation Groups were mentioned as useful allies in supporting any suggested improvements where necessary.

## Agreed:

- RH/JM producing a sheet describing the rationale for the report, which will be circulated to all Practice Managers
- RH to make amendments to the main report before circulating
- Discuss how best to involve Champions in HWN work at the next Board meeting

## 9. Any other business

- 9.1. There was no other business.
- 9.2. The meeting closed at 5pm.
- 9.3. Date and time of next meeting: 8 December 2014, Central Square