

# Committee minutes

10am, 19 September 2019

MEA House, Newcastle

## Committee members present

Kate Israel (KI)	Independent (Chair)
Terry Bearpark (TB)	Independent
Gill Clancy (GC)	Independent
Feyi Awotona (FA)	Independent

## Apologies

Alisdair Cameron (AC)	Launchpad
Alexandros Dearges-Chantler (AD-C)	Independent

## In attendance

Steph Edusei (SE)	Chief Executive, HWN
Felicity Shenton (FS)	Deputy Chief Executive, HWN
Rachel Wilkins (RW)	Project Manager, HWN
Lyndsay Yarde (LY)	Associate, HWN
Kate Beattie (KB)	Finance and Administration Officer, HWN

## 1. Welcome and introductions

1.1 The meeting began with a round of inductions. KB was welcomed by those in attendance and said a few words about herself.

## 2. Apologies for absence

2.1 Apologies noted from Alisdair Cameron and Alexandros Dearges-Chantler.

## 3. Minutes of previous meeting and matters arising

3.1 The minutes for the meeting were agreed as a true record.

### 3.2 Matters arising:

We have now received a letter from Mark Adams. Although TB and AD-C both stated that it was inaccurate and that they were not pleased about this. SE said she would raise the letter at the stakeholder group. SE also mentioned that the letter was marked as private and confidential which it shouldn't have been as she would like to copy it to those who received our original letter. FA suggested to take the letter back to Mark Adams and ask specific questions.

**Action: Committee members to take it up in patient participation groups.**

3.2 FS stated that the Local Dental Committee has changed its meeting dates.

3.3 RW still waiting for a response from NHS England. RW will further update.

3.4 LY will meet up with Chris Piercy. LY will present at Gateshead Mental Health group. LMC - widely circulated.

**Actions: 5.3 from previous meeting - circulating.  
AGM on agenda.**

#### **4. Outreach update (paper 1)**

- 4.1 MB carrying on with outreach focus groups, two of which involve people with diabetes and multiple sclerosis. 'Name the bear' at the Pride event proved very popular. Activity on how people rank their health. MB and BN are expanding their work with young people and children to support RW. Gateshead College Fayre also proved to be a success. MB is still in the process of setting up focus groups with refugees and asylum seekers.
- 4.2 SE met up with Ang Jamson and discussed the council's plans to look at how they can commission care differently. SE had a brief chat with MB about Adult Social Care (ASC) and how we can engage with the council's plans.
- 4.3 The council asked MB to go to a meeting to get a further insight into the council's commissioning plans.
- 4.4 KI stated that the Mela had a 'steady stream' of visitors. KI said the table was not visible enough and that they did not have a banner to attract the public.
- 4.5 LY is setting up links with NTW.
- 4.6 KI was positive about all the outreach updates and that the Scrutiny Committee is always appreciative.

**Action: future events need to include a Healthwatch Newcastle tablecloth and banner.**

#### **5. Project updates (paper 2)**

- 5.1 RW updated on project focusing on children and young people's mental health services. RW is looking closely at Kooth and single point of access for children and young people's mental health services (SPA). Newcastle and Gateshead CCG has carried out some work to assess the impact of the implementation of these two services, but the survey had a low response rate with responses mainly from professionals and not from children and young people or adults and carers. The plan of action is to create a survey of three or four questions that will assess children, young people and their parents' and carers' knowledge of children and young people's mental health services.
- SE suggested that service providers could promote this, as it is their role. Discussion about how to go about this and who to ask and what to ask.
  - RW will use data gathered from the survey to gather more views from people who have heard of the service and have used it. This will be in the form of one-to-one interviews or an organised focus group.
  - RW will send survey to the young people population and to professionals and parents/carers.

**Action: RW to create an online survey and ask organisations to publicise it. The survey will include up to four questions and ask for more information if it is required.**

5.2 RW to talk to the SPA and ask for referral data so we can get an idea of who is referring into the SPA. RW will also seek support from the SPA to promote our poll.

**Action: RW will revisit the timeline and will update at the next meeting. HWG Committee also needs to be informed.**

5.3 LY updated the Committee on her project: the launch of PPG award will take place on Wednesday 25 September (pilot run for six months, if it takes longer then it can be flexible). Twenty-two people have said they are going to the event, representing 13 practices (eight from Newcastle, five from Gateshead).

- Overall, there has been a positive response.
- GC and TB going to ask Academic Health Science Network (AHSN) to do an evaluation of the pilot (is this award worthwhile? etc).
- Step-by-step process.
- MB and BN are happy to work alongside LY depending on their workload and if they have the capacity and skills to help.
- Basecamp: information-sharing platform will be made available to participants.
- The project is going well so far but there is a risk. LY starts jury service in November. SE has others who can pick this work up if LY is on jury service for some time.

## 6. Trend analysis (paper 3)

6.1 Top three themes:

- Treatment and care
- Staff
- Access to services

No further updates.

## 7. 2019 AGM

7.1 17 October is next AGM meeting. SE stated that it does not need to be a formal AGM. The formal aspects will focus on Committee members that have left and joined in the last year. KI and Michael Brown, Chair of HWG, are presenting. Section from SE on finances and staffing levels.

7.2 FS commented on the small size and operational budgets for Healthwatch and how little this is understood, even by those who commission the service.

7.3 Primary Care Networks presentation by Sheinaz Stansfield.

7.4 Venue is Royal Station Hotel, maximum of 50 people. It is an accessible venue for wheelchair access and public transport. Invites have gone out. SE will confirm if Committee members have to sign up online.

7.5 The conference draws in a wider audience. SE - do we want to continue with this?

## 8. Healthwatch England (HWE) Committee visit

8.1 Many thanks to BN for helping out with the arrangements.

8.2 SE spent time with them. SE visited Northumbria Hospital and saw how the hospital is collecting patient experience, which then gets reported back to the wards in the hospital.

8.3 FS went for the formal meal with HWE and SE joined for the speech which was about involvement within medical training. SE has asked if there are ways we can work with the medical school as recruitment and assessment at the moment is mostly on a score basis system. The medical school is interested in exploring how they can involve people in assessment. SE and FS will meet with them in the future.

8.4 FS, KI and ADC went to the formal HWE Committee meeting and met the Darlington Chief Executive who delivered a presentation. Other areas still referring to STP rather than ICS.

8.5 Stakeholder analysis was discussed and ADC is keen we undertake a similar piece of work. FS mentioned the Sunderland students stakeholder proposal.

8.6 Healthwatch Newcastle and Healthwatch Gateshead are well received and recognised.

**Action: FS to chat with AD-C about stakeholder analysis.**

## 9. Preparing for Brexit

9.1 KI outlined a recent NCVO report looking at the possible impact of Brexit.

9.2 Impact on volunteers and an issue of continuation and austerity. HWN will stay aware of issues and practical stuff that may or may not affect us.

9.3 Issue: shortage of medicine - discussion at Scrutiny meeting. No-deal Brexit could cause issues with medicine.

**Action: NCVO report to be circulated. Steph to consider issues and possible impacts and liaise with HWE. Take action post-Brexit.**

## 10. Chair update

10.1 KI is meeting up with the TUN Committee on 3 October to discuss the new Chair for Healthwatch Newcastle. KI will suggest that TUN asks for expressions of interest within the HWN Committee.

10.2 Wellbeing for Life Board meeting - Prevention green paper presentation. NTW said inappropriate use of drugs is going up and the North East is the worst in the country.

10.3 VCS groups are now asked to pay for rooms in council properties, which they cannot afford. This runs counter to the public health agenda.

10.4 Report written by NCVS 'Canaries in the coal mine' reports less money, higher demand, but still optimism in the voluntary sector.

10.5 Next Wellbeing for Life Board meeting takes place in October.

10.6 23 September meeting, joint OSC on STP and ICS.

## **11. Chief Executive update**

11.1 NHS Expo - HWE asked SE to go to Manchester. Interesting event overall, a question was raised by the facilitator (who is also a GP) 'why don't people do what we tell them to do'? 500 focus groups were delivered as part of the work carried out nationally on the NHS Long Term Plan.

11.2 Non-core work: sometime in October we will conduct a survey in A&E about why people have chosen to go to the emergency department. AD-C raised the safety of staff. Volunteers will never be on their own there, however, there is a greater risk at focus groups, etc. The lone working policy needs to be followed.

## **12. Any other business**

12.1 There is a plan to organise a volunteers' event where they get to meet everyone in a social situation sometime before Christmas.

**The meeting closed at 12 noon.**