

Healthwatch Committee meeting  
15 January 2020  
**Project updates – paper 2**  
**Presented by: Steph Edusei**

Members of the Committee are asked to:

- Note the contents of the report

Quality statement: 1, 6, 7, 12, 13, 14, 15, 22

Rachel Wilkins and Lyndsay Yarde have spent the autumn delivering the following two projects:

- Children and young people's mental health
- Effective GP practice participation groups

**Children and young people's mental health**

There have been 268 responses to the survey, with good representation of children and young people in particular. Work will now commence to analyse the data and write the report.

**Effective GP practice participation groups**

The first workshop on recruitment took place on 31 October 2019 and was attended by 19 participants, representing 10 of the 12 practices involved in the pilot. Feedback from participants has been positive.

We held an informal catch up took place on 12 December 2019. Due to ill health and staffing issues only five people attended, however all found it useful.

Lyndsay is currently planning second visits to practices which will take place in the second half of January.

The second workshop is focusing on co-production and is planned for 30 January 2020. At the time of writing, seven people have signed up for this and a reminder email has been sent out on the week commencing 6 January.

## Project highlight report

### Project board: Healthwatch Newcastle

<b>Project name</b>	What do you know about children and young people's mental health services?	<b>Reporting period</b>	Dec 2019
<b>Project sponsors</b>	Alisdair and Alexandros	<b>Project Manager</b>	Rachel Wilkins
<b>Author</b>	Rachel Wilkins	<b>Date report approved</b>	
<b>Project overview</b>	<p>In 2015–17 the 'Expanding Minds, Improving Lives' listening and consultation exercise took place. The aim of this project was to transform services for children and young people's mental health. This project pulled together the views of children, young people, parents and carers from those people directly and also from VCS organisations. These views informed the design of some new models of service delivery and these new models were consulted on.</p> <p>As a result, children and young people's mental health services have been changing since then, with the set-up of a single point of access for referrals and online consultations (Kooth). Other work is also being delivered as described within the children and young people's mental health and emotional wellbeing action plan 2017-19</p> <p>Since then, Newcastle Gateshead Clinical Commissioning Group (CCG) promoted a survey asking for people's views on the single point of access and Kooth (an online counselling service). This survey asked for views from young people, parents or carers, teachers, GPs, school nurses and social workers, etc.</p> <p>Only 67 people responded to this survey, most of whom were professionals. Two were young people and five were a parent or carer. As so few young people, parents or carers responded to this survey, it is important that more views are gathered.</p> <p>The aim of this project is to:</p> <ol style="list-style-type: none"><li>Get an understanding of children, young people and their parents and carers awareness of the self-referral process into children and young people's services</li><li>Get an understanding of children, young people and their parents and carers awareness of Kooth</li><li>Get an understanding of children, young people and their parents and carers experiences of using this services via one to one interviews or focus groups</li><li>Get an understanding of the progress made against the action plan stemming from EMIL.</li></ol>		

RAG ratings	
	Project actions on track
	Project actions slippage - monitor situation
	Project actions slippage - action required
	Project actions complete

1. Progress against key project milestones				
Milestone	Planned completion date	Progress or slippage	Variance	Explanation
Contact made with key stakeholders to summarise the work that we plan to undertake	Sept 2019	Completed		
Information request asking for an updated EMIL action plan submitted	Sept 2019	Completed		We expect a response from the CCG by 17 October, but have received no response yet. I know there is some staff sickness within the team.  I will chase this.
Survey developed	Sept 2019	Completed		
Focus group/one to one interviews designed	Oct 2019	Completed		

Surveys distributed to schools, youth groups, parent groups, via GP practices, VCS bulletins, Kooth, single point of access	Oct 2019	Completed		<p>So far we have 268 responses, of which 204 are complete. However, it appears that Survey monkey is counting surveys as incomplete if the monitoring information has not been completed.</p> <p>125 parents and carers have responded.</p> <p>93 children and young people have responded.</p> <p>9 looked after children have responded.</p> <p>147 of the respondents are from Gateshead.</p> <p>101 of the respondents are from Newcastle.</p>
Data collection via focus groups, one to one interviews and surveys	Oct 2019 to Dec 2019			<p>37 people have come forward stating that they would like to speak to me further about their experiences. 21 of these people are parents/carers and 16 are young people.</p> <p>So far, five interviews have been completed, with six more due to happen. Three more are waiting to be arranged.</p> <p>If all go ahead, I would have interviewed 11 parents and three young people. Some interviews are taking place in the first week of January.</p>
Data entry	Oct 2019 to Jan 2020			Has been completed as surveys have been received.
Data analysis	Jan 2020			
Report writing	Jan to Feb 2020			
Report published	March 2020			

## 2. Key expectations in next reporting period

- Data analysis and report writing commenced, with hopefully a draft final report produced

3. Risk report	Risk rating
<b>The organisations we ask to publicise surveys on our behalf are not able to</b> Lowered to green. Survey has been well publicised and has had a good response.	Green
<b>Delayed start to survey and focus groups/one to one interviews</b> No longer of concern.	Green
<b>Poor numbers of people who have used single point of access or Kooth have shared their views</b> This is very likely to be the case and will become clear when the data is analysed.	Red
<b>Poor survey response rate</b> No longer of concern.	Green
<b>Poor representation of certain communities responding to our survey</b> Demographics for children and young people responses is spot on, but with respect to parents and carers we are lacking responses from parents and carers in Newcastle, fathers, parents with disabilities, LGBT parents and ethnic minorities. Efforts have been made to try and improve this.	Amber
<b>Poor representation of certain communities taking part in our focus groups or one to one interviews</b> This appears to be the case but needs to be properly assessed.	Amber
<b>Work poorly received by stakeholders</b> This work should provide commissioners and service providers with ideas on how these new services could be further developed and improved, so I feel that this is unlikely. However, these services are new so our work may highlight some negatives which may not be well received.	Amber
<b>Work poorly received by public</b> No evidence that it will be well received or not well received at present, but experience suggests it would be unlikely.	Green
<b>Staff leaving or going on sick leave</b> This is unlikely.	Green

## 4. Changes in reporting period

(A change request pro-forma should be attached as an appendix for all changes)

None

## 1. Project highlight report

### Project Board: Healthwatch

<b>Project name:</b>	Participation in Practice	<b>Reporting period:</b>	Dec 2019
<b>Project sponsor:</b>	PPG Advisory Group	<b>Project Manager</b>	Lyndsay Yarde
<b>Author:</b>	Lyndsay Yarde	<b>Date report approved:</b>	

### Project highlights:

- Project launch in September was attended by over 20 participants.
- Interest in the pilot has been keen. There are 12 practices taking part in the pilot (seven from Newcastle, five from Gateshead). There is also an informal waiting list of four practices that we can call on should any practices drop out.
- All practices participating in the pilot have been visited and all have signed up to Basecamp, the information-sharing forum we have set up for participants.
- The recruitment workshop took place on 31 October and was attended by 19 participants, representing ten of the practices involved in the pilot. Feedback from participants has been positive.
- Informal catch up took place on 12/12/19: 12 people signed up but due to ill health and staffing issues only five people attended, however all found it useful.
- Currently planning second visits to practices which will take place in second half of January.
- Co-production training planned for 30 January, to date (2/1/20) seven people have signed up for this - reminder email to go out w/c 6 Jan.

### Project overview

Healthwatch Newcastle and Healthwatch Gateshead chose Patient Participation Groups (PPGs) as one of our priority areas for 2019–20 for the following reasons:

1. From 1 April 2016 it has been a contractual requirement for all GPs to have a PPG that gathers the views of patients and carers, to engage with that PPG and to make reasonable efforts for it to be representative of the practice population. In addition, CQC inspections require evidence that GPs practices encourage patient participation and act upon patient feedback.
2. However over the last few years, several GP practices and a couple of PPG members have contacted us to tell us their PPG is not working effectively and/or to ask for help to enable it to be more effective. We know that Newcastle Gateshead CCG are also concerned that some local PPGs are not functioning well and we believe our work in this area will support the CCG's aim of increasing the effectiveness of PPGs.
3. Our key remit is to ensure that all service users and the public are involved in the ongoing development of health and care services, especially those who may struggle to have a voice or to get involved.

**Project overview**

Initial research has highlighted that a number of PPG good practice ‘toolkits’ are already in existence. NAPP (National Association for Patient Participation), the Patients Association and the LMC and other Healthwatch (Sunderland and Leeds) have all produced tool kits or other forms of guidance. To avoid duplication we have decided to take a different approach and introduce an award, the ‘Healthwatch Participation in Practice’ award, which PPGs can work towards. The award will be based upon the requirements outlined in the 2015–16 General Medical Services (GMS) contract, which are for all practices to:

- Develop and maintain a PPG for the purpose of obtaining the views of patients and enabling the practice to obtain feedback from the practice population.
- Make reasonable efforts for this group to be representative of the practice patient population.
- Engage with the PPG at a frequency and in a manner agreed with the group to review patient feedback (whether from the PPG or other sources) with the aims of the practice and PPG agreeing improvements that could be made to services.
- Act on suggestions for improvements, where the practice and PPG agree.

The plan is to launch the award at a Healthwatch event to be held in September, to which all local GP practices and their PPGs will be invited. At the launch and during other work leading up to the launch, we will endeavour to recruit a number of practices (4–8) from across Gateshead and Newcastle to take part in a pilot that will run from September 2019 to April 2020. During that time Healthwatch will support practices and their PPGs to meet the award criteria. Support will take the form of one-to-one visits, running local workshops and sharing best practice materials. The intention is that by April all practices involved in the pilot will have met the award criteria. We will then hold a further event where the practices receive their awards.

We will then evaluate the pilot and investigate how the award can be rolled out more generally across Newcastle and Gateshead and potentially wider.

## RAG ratings

	Project actions on track
	Project actions slippage - monitor situation
	Project actions slippage - action required
	Project actions complete

## 4. Progress against key project milestones

Milestone	Planned completion date	Progress or slippage	Variance	Explanation
Project plan complete	Jul 19	Complete		
Complete award documentation	August - Sept 19	Complete		
Plan and promote launch event	August - Sept 19	Complete		
Recruit pilot participants	August - Sept 19	Complete		
Hold launch event	Sept 19	Complete		
Develop and organise workshops	Sept - Oct 19	Underway		Second workshop due 30/1/20, it will be on co-production and be delivered by Changing Lives. Planning meeting with Changing Lives on 9/1/20.
Undertake initial visits	Oct - Nov 19	Complete		
Provide ongoing support to participants	Oct 19 - Mar 20	Underway		Informal catch up meeting took place on 12/12/19. Second practice visits will happen mid-late Jan. A further informal meeting will take towards the end of February
Run workshops x 3	Oct 19, Jan 20 and Mar 20	Underway		19 participants attended the first workshop on recruitment, feedback positive. Second workshop due 30/1/20.
Plan final award event	Feb- Mar 20			



Undertake final assessment visits	Mar - Apr 20			
Award event	April 20			
Evaluate pilot	May - Jun 20			Met with Phil Kyle from AHSN on 31/10/19. Phil to undertake evaluation for us

#### 5. Key expectations in next reporting period

- Undertake second visit with all participants during January.
- Organise and recruit participants to Co-production workshop planned for 30 January.

#### 6. Risk report

Risk rating

Now the launch and the initial workshop have taken place, practices may lose focus. We need to keep the award on their agenda - I will endeavour to do this by keeping in contact via email and Basecamp and by arranging informal catch-up meetings for in-between the workshops.

Amber

Practices may struggle to find the time to undertake the work required to meet the award criteria. Will discuss this issue with participants at the meeting in December and also during one to one visits in January.

Amber

#### 4. Changes in reporting period

(A change request pro-forma should be attached as an appendix for all changes)

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