

Board meeting minutes

16 March 2015 - 3pm Riverside CHP, Newcastle upon Tyne

Board members present

Bev Bookless (BB) Chair and independent

Alisdair Cameron (AC) Launchpad Tim Care (TC) Independent Alison Walton (AW) Independent

Anne Bonner (AB) Riverside Community Health Project

Apologies

Lisa Charlton (LC) Newcastle Society for Blind People

Sarah Cowling (SC) HealthWORKS Newcastle

In attendance

Steph Edusei (SE) Chief Executive, Healthwatch Newcastle (HWN)

Deborah Hall (DH) Information Support Officer, HWN Rachel Head (RH) Champions' Support Worker, HWN

1. Welcome and introductions

1.1. The meeting began at 3pm.

2. Apologies for absence

2.1. Apologies were noted from Sarah Cowling and Lisa Charlton.

3. Minutes of last meeting and matters arising

3.1. Item 6.1 - amend from 'second' to 'third meeting'.

3.2. Actions and decisions document (from 8 December meeting):

Item 3.3- a monitoring report will be submitted to Newcastle City Council in April and Rachel Head (RH) is reviewing the requirements to better reflect what Healthwatch Newcastle (HWN) does (measuring impact will also be discussed at the April development session)

Item 4.2 - HWN received feedback from Deciding Together that the consultation timeline has not be decided (HWN prefers a 12 week consultation period)

Item 6.4 — the apprentice administrator, Beth Nichol, begins work on 19 March and will be studying towards an NVQ level 3

Item 7.6 — an evidence base was presented at the January development session and is a work in progress

Item 8.6- demographic data is currently being drafted and findings so far indicate a gap in volunteers in their 40s and 50s - and there are plans to work with Karen Watson of Volunteer Centre Newcastle on a recruitment campaign

3.3. The minutes were agreed as a true record.

4. Chief Executive's report (paper 1)

- 4.1. Changes to mental health services: the Deciding Together mental health £ event on 14 February was well attended and received positive feedback. It was the NHS Newcastle Gateshead Alliance's first event of this kind and impressed on attendees how difficult health budgeting can be.
- 4.2. Hospital social workers: awaiting response from Ewen Weir to letter asking how the council will mitigate risk and measure the impact of losing social workers. It was mentioned at the Health Scrutiny meeting that delayed transfers in this area are lower than in other local authority areas. Bev Bookless (BB) stated that it is important to monitor the impact of removing social workers from hospitals.

Action: Steph Edusei (SE) to monitor impact of removing social workers

- 4.3. Board member recruitment: the date has been extended to 27 March and is being promoted in a variety of media, including The Journal.
- 4.4. Associate register: an advert has been drafted asking individuals and organisations to add their skills to the register.
- 4.5. Care Act: Rachel Head (RH) has been researching the act and what it means for those affected. The council is confident that it is working towards the act's objectives. HWN will raise awareness and gather experiences but there are currently no direct implications for us.

Action: Nicci Donnelly (ND) to raise awareness of Care Act and about contacting HWN

- 4.6. Regional devolution: in light of the government being asked to consider devolution proposal for the North East the implications of this will be raised on 19 March when BB meets with Nick Forbes.
- 4.7. HWN strategic objectives: these were sent to the Board for approval. The next step is to review the business plan and incorporate the objectives and plans for this year.

Agreed: to accept the revised HWN objectives

Action: SE to revise the business plan and take to development session, then sign off at June Board meeting

5. Conference update

- 5.1.RH gave a verbal update on the 5 March HWN social care conference. The event went well, with 95 people attending and very positive feedback received.
- 5.2. A narrative of the event has been published on the HWN website and a report will be produced shortly and sent to all attendees and shared with key organisations.

- 5.3. People were invited to vote on three priorities for HNW during 2015 and selected dementia and older people's care; domiciliary (home) care; and care for people with learning disabilities.
- 5.4.BB would like the priorities shared with commissioners. Alison Walton (AW) made a comment that the priorities are adult-focussed and we should also remember children's social care.

Action: SE to produce conference report and share with commissioners

- 5.5. The team was thanked for organising a successful and energetic event.
- 6. Young people's group update on work (paper 2)
- 6.1.Lee Peacock (LP) from Children North East, Project Worker Andy Render (AR) and Rachel Ward (RW) a member of the Healthwatch young people's group gave a presentation on the demographics and priorities of the group and its dental health report. Ryan Ruddy (RR) from the young people's group was also present at the Board meeting.
- 6.2. The young people's group meets every Monday evening at WEYES and also meets at other times to do work, for example, street surveys. Twice as many females compared to males attend the group and most are in the 17–25 age range. There is a recruitment group to increase attendance and young people are promoting the group: one young man recently gave a presentation about HWN to the Excelsior Academy and as a result someone new attended a meeting.
- 6.3. The dental report arose from research at last year's Pride event: nothing seems to have been done before around dentistry. RW outlined the main findings of the report, including the things that stop young people going to the dentist, for example, making appointments, price, and attitude of dentist. RR enjoyed being involved in the dental research, especially when it was face-to-face. A member of the public recommended that future reports provide percentages as well as actual numbers.
- 6.4.LP said the young people's group has only been in existence since May and the dental report is testament to the group's work so far. The group is being developed and suggestions being acted upon, including young people attending Healthwatch Board meetings. There are also plans to arrange training in effective research methods.
- 6.5. A discussion took place on the next steps for the dental report. HWN works on a 'no surprises' basis so it is important to plan the release of information. The press release drafted by Children North East will be part of the report's launch. AW suggested drafting two or three recommendations and taking forward and then measuring the impact.
- 6.6.SE will be meeting with Christine Keen and will highlight that young people's access to dental information is patchy; and suggest that perhaps NHS England and the young people could work together to produce suitable information. BB also recommended looking at what other Healthwatches have said about dental services in their areas, flagging the findings to Healthwatch England (HWE) and commissioners and the local dental committee.

Actions:

DH to research dental services in other areas on the HWE Hub

SE to discuss working in partnership with NHS England and disseminate report to HWE, commissioners and local dental committee

SE to draw up recommendations and work with young people on next steps

- 6.7. The group has met several times to look at what is happening in mental health and where it can develop a piece of work. There's a feeling that young people may not know where to go to receive mental health support.
- 6.8. The Board asked the young people's group to look at ways of linking mental health to social care for children and young people, in order to complement HWN's focus on social care. In addition to researching services for mental illness, we should also take into account wellbeing and a preventative approach. Also, how is mental health supported in schools, youth clubs, etc. as these have a part to play in addition to services? HWN should always be mindful of duplication when scoping work, aiming to add value and look into things that may be forgotten by other people.

Agreed: to focus on social care for young people with mental health needs

7. Trend analysis (paper 3)

- 7.1. The trend analysis is done on a 12 month rolling basis. Health feedback is quite good, except around waiting times and access to GP appointments. Most contact has related to GPs and the HWN Board was asked if it wanted to look at this further? Clinical Commissioning Groups (CCGs) and NHS England say GP access is a national issue, however, GPs are individual businesses.
- 7.2. The Newcastle Gateshead Alliance is co-commissioning and this may be an opportunity for HWN to have an influence. HWN has received an invitation from the joint committee, and from NHS Newcastle West CCG to be involved in research; however, HWN needs to be mindful of its impartiality.
- 7.3. Where are there GP access issues? This will be a piece of initial work for the team. We need more information and an annual plan of outreach and comms is being developed to support this.

Actions:

Julie Marshall (JM) to draw up outreach plan to support GP access data gathering ND to develop comms plan to support GP access data gathering

8. Priority setting

- 8.1.HWN will build on the work initiated at the January Board development session and at the conference. The Board looked at a range of local and national issues and this was reduced to five issues for people to vote on at the conference. As discussed earlier, people voted for dementia and older people's care; domiciliary (home) care; and care for people with learning disabilities as their top priorities.
- 8.2. There were several proposed actions:
 - Desk based research (literature review)
 - Voluntary and community sector information sharing

- Young people to young people work
- Service user focus group survey
- Provider research/survey
- Staff survey
- Mystery shopper work complaints handling
- Informing and influencing
- 8.3. A discussion took place on the potential difficulty of organising focus groups for service users who may be difficult to access. There may also be challenges in gaining access to staff. If staff are contacted via providers, and service users through carers, the information may be filtered and should therefore be treated with some caution. People should also take into account unintended consequences, for example, a disclosure which damages a relationship between a carer and the person cared for. A member of the public also recommended analysing the survey throughout and not just at the end in order to pick up on any issues.
- 8.4. It would be a good idea to extend 'nominate a star' to promote and share best practice. How do social care commissioners know about quality of services? SE has requested a sample copy of the council's contract. Also, what information do other VCS organisations have? The University of York has a good social policy research unit, and perhaps HWN should ask about the challenges and pitfalls in this area of research.

Action: ND to promote 'nominate a star' in social care

9. Finance subgroup

- 9.1.HWN is funded until September 2015 with the potential to carry through for a further 12 months. SE, Sally Young and Kieran Connaty are in dialogue with commissioners but do not expect to hear any firm decision until the council signs off the budget.
- 9.2. Despite a finance re-forecast there is still a significant surplus; although there has subsequently been expenditure on IT in anticipation of the move to Broadacre House so staff can work on a single site.
- 9.3. There has been an overspend on the events line because of the conference, and the marketing budget should be used by March end. There has been no spend on participation support although Board members can claim travel expenses.
- 9.4. Finance manager Graeme Lyall has been asked to put together a 2015—16 budget that reflects HWN lines (rather than the LINk figures that were originally used).
- 9.5. The meeting closed at 5pm.
- Date and time of next meeting: 1 June 2015, Broadacre House, Market Street, Newcastle upon Tyne, NE1 6HQ