



Annual report 2019–2020

Guided by you

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Message from our chair

Whilst the coronavirus did not occur until the end of the period this annual report covers, the impact upon daily lives was



immediate and created all sorts of challenges, not least for care services and their users.

With the benefit of hindsight, we all should have been more prepared and not assume that living in a relatively rich nation would protect us from this dreadful pandemic. I offer reassurance, however, that Healthwatch Gateshead has quickly reacted to the emergency and we are offering accurate information, signposting, advice and support to all Gateshead residents who need it, either by phone, email or social media. We will also make sure that your voice is heard at a local, regional and national levels to ensure services and policies are changed to reflect your needs and experiences.

In these uncertain times, it gives me great pleasure to introduce the Healthwatch Gateshead annual report for 2019—2020. From 1 April 2017, the Healthwatch Gateshead contract has been held by Tell Us North, a not-for-profit community interest company that also runs Healthwatch Newcastle. We have been fortunate to have our contract in Gateshead extended for a further year, not only because of the virus but because Gateshead Council is satisfied that we have performed well in providing a voice for Gateshead's residents. This is the fourth annual report produced by this organisation.

As I repeat often, one organisation delivering Healthwatch on both sides of the Tyne brings added advantages. This is particularly important in respect of health services as we know that some residents cross the Tyne to access them. It follows that some of our priority areas for research should also be cross-Tyne and this year has been no exception. However, some priorities are uniquely Gateshead's and Healthwatch Gateshead has an independent voice that reflects the views and needs of Gateshead's residents where appropriate.

The role of the Committee is to oversee and prioritise the work of Healthwatch Gateshead. All of the Committee members either live or work in the borough or have a strong connection and commitment to Gateshead. We said goodbye to Esther Ward and Julie Boyack and thank them for their input and insight. We have welcomed a new member, Mairi Scott, who works in young adult mental health. She will bring a different perspective, experience and skillset to our work. We want to make sure that our Committee reflects the diverse population of Gateshead so if you're interested in joining please get in touch. We are committed to holding as many meetings as possible in public and will find ways to do this despite social distancing.

Healthwatch Gateshead is held to account by a national body, Healthwatch England, but also by Gateshead Council's scrutiny processes. We have to prove to these organisations that we enable residents in Gateshead to influence and change services. Feedback from these organisations indicates we are on the right track. We also use the effective contacts we have developed across

health and social care to influence change in policies and services on behalf of Gateshead's residents. We attend high-level meetings such as the Gateshead Health and Wellbeing Board, where we discuss key issues with directors, senior managers and councillors from health and local government. In such meetings we have kept a close eye on how integrated care services are being developed to ensure that engaging residents becomes the norm at every major step.

We have recently produced reports in areas such as children's' mental health services and the effectiveness of the council's referral service for adult social care (Adult Social Care Direct). Our reports are available on our website www.healthwatchgateshead.org.uk. Once our recommendations are accepted we follow up to make sure action has taken place. We present our reports to the council's scrutiny committee and the committee helps us to hold services to account to deliver on the actions and make changes.

We have begun an innovative project to improve Patient Participation Groups (PPGs) in GP practices in Gateshead and Newcastle. A pilot scheme is underway for 12 GP practices to self-assess their arrangements for PPGs. An award scheme will give recognition when the standard is met. This project will make sure Gateshead residents are engaged effectively in issues at a primary care level.

I am pleased to report that our reputation for expertise on how best to engage and involve residents in difficult and complicated issues has been enhanced over the year. More health and care organisations come to us for advice or to carry out engagement

work on their behalf.

Looking ahead we will develop more effective ways, such as social media, to engage with hard to reach and underrepresented groups across Gateshead. When life returns to normal, we will also look to increase our number of volunteers, who do a great job in making contact with residents. We will train some volunteers to be able to carry out more complex engagement.

Financial pressures have not reduced and it is uncertain how the pandemic will affect the economy and finances for health and social care. Brexit and the impact upon workforce levels is a further complication. We are playing our part in keeping Healthwatch England up to speed with the effect of the pandemic on local services and will represent Gateshead's experience in any national review. Let's hope a positive outcome of the pandemic will be a cross-party consensus about how to develop a truly integrated national care service with adequate funding. We guarantee we will keep Gateshead residents engaged effectively throughout.

All of this activity could not take place without the commitment of our team of staff and volunteers. They continue to work flexibly and effectively despite the limitations of the lockdown. I thank them again for their efforts in making sure Healthwatch Gateshead is the voice for Gateshead's residents for all aspects of health and social care.



Michael Brown
Healthwatch Gateshead Chair

Our priorities

Last year many people told us about the improvements they would like to see health and social care services make in 2019—2020. In January 2020, our Committee selected five potential priorities for the coming year, based on what we had heard:

- Interpreting services
- Risk of falls
- Standards of care in residential settings
- Supporting young people who are facing gender identity issues
- Use of pharmacies

We asked the public to help us prioritise them over the next few months and the top two priorities became standards of care in residential settings and risk of falls.

However, at the time of writing this report we are in the middle of the global coronavirus pandemic. Our health and care services and the wider social sector are facing real challenges to deliver both new services and existing services in different ways. So, we have adjusted our immediate priorities for 2020—2021.

Information—giving – communicating key messages and important information to the public.

Signposting – supporting people to get the help they need.

Troubleshooting – helping people who are not getting the response they need.

Supporting local communities – working with others within the voluntary and community sector, health and the local authority to support the wider community.

We will continue to gather information and feedback about people’s experiences of health and care services. This information will be shared with the people that plan and provide services to help them plan and change what is offered as required.

Once the pandemic period has passed, we will revisit longer-term priorities. At the moment, we think that it would be sensible to use this as an opportunity to help the system reflect on and learn from the pandemic response but will make decisions about that nearer the time.

About us

Here to make care better

We are the independent champion for people who use health and social care services. We're here to find out what matters to people and help make sure your views shape the support they need.

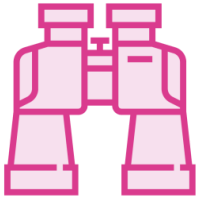
We listen to what people like about services, and what could be improved, and we share these views with those with the power to make change happen. We also help people find the information they need about services in their area.

Nationally and locally, we have the power to make sure that those in charge of services hear people's voices. As well as seeking the public's views ourselves, we also encourage services to involve people in decisions that affect them.



Working with Healthwatch has allowed students the opportunity to vocalise their views and opinions in relation to health and wellbeing, also helping them to be self-reflective about theirs.

Kirsty Patterson, Gateshead College



Our vision is simple

Health and care that works for you.

People want health and social care support that works – helping them to stay well, get the best out of services and manage any conditions they face.



Our purpose

To find out what matters to you and to help make sure your views shape the support you need.



Our approach

People's views come first – especially those that find it hardest to be heard.

We champion what matters to you and work with others to find solutions. We are independent and committed to making the biggest difference to you.



How we find out what matters to you

People are at the heart of everything we do. Our staff and volunteers identify what matters most to people by:

- Visiting services to see how they work
- Running surveys and focus groups
- Going out in the community and working with other organisations



Find out more about us and the work we do

Website: www.healthwatchgateshead.co.uk

Twitter: @HWGateshead

Facebook: gatesheadhealthwatch

Highlights from our year

Health and care that works for you



12 volunteers

helping to carry out our work. In total, they gave up 370 hours.

We employed

5 staff

none of whom are full time equivalent, which is the same as the previous year.

We received

£140,075 in funding

from our local authority in 2019-2, 6.5% less than the previous year.

Supporting people



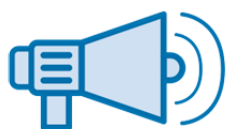
912 people

shared their health and social care story with us.

29 people

accessed Healthwatch advice and information online or contacted us with questions about local support.

Reaching out



131,256 more people

engaged with us through our website, social media or at community events.

Making a difference to care



We published

5 reports

about the improvements people would like to see with their health and social care, and from this we made 21 recommendations for improvement.

How we've made a difference

Speaking up about your experiences of health and social care services is the first step to change.

Take a look at how your views have helped make a difference to the care and support people receive.

Adult Social Care Direct

The front door to social care services

When we consulted on our priorities for 2019—2020, Adult Social Care Direct (ASCD) was chosen as an area that the public would like us to explore further for the following reasons:

- We had received several negative comments from the public about ASCD.
- During research for our 'Impacts of reduced funding for adult social care in Gateshead' report, difficulties in accessing ASCD were highlighted by the voluntary and community sector, health professionals, service users and carers.

Early research told us that Gateshead Council had carried out an internal audit of ASCD in October 2018. Several changes were then made to ASCD including the introduction of online forms, which had reduced telephone response times.



With that in mind we decided to gather people's opinions on the service provided by ASCD and find out if improvements made in 2018, including the introduction of online forms, had improved access to this service.

We also wanted to give feedback on our findings to ASCD and identify any areas that may require further development.

We used a variety of methods to engage including:

- Survey of GP practice staff.
- Survey of people who had contacted Adult Social Care Direct.
- 'One collective voice' — an event to hear from unpaid carers and public, private, and voluntary and community sector representatives.

Based on our findings, we made recommendations in four key areas:

- Online referrals
- Improving access
- Monitoring and assurance
- Improving referrals

The report was received well by Gateshead Council, which felt that the report, overall, was positive and mirrored some of its own findings. The council also said that the recommendations were especially useful, giving some excellent ideas to improve services quickly.

I would like to thank you for the suggestions on improvements we can make to the service, we have found the involvement with Healthwatch an invaluable experience.
Adult Social Care Direct Manager

Escalation of issues

NHS Continuing Healthcare (CHC) was chosen as a priority in 2018. CHC is a package of care provided outside of hospital, arranged and funded solely by the NHS, for individuals aged 18 years and older who have significant ongoing healthcare needs. We produced a report which included recommendations for improvements in the following areas:

- Hospital discharge and the CHC process
- The assessment processes
- Gathering feedback from carers
- Children in transition into adult services
- The appeals process

In 2019 we were contacted by some of the carers that we had worked with during our research into CHC. They told us that during

reviews for CHC funding they had been informed that CHC care funds would be capped to a specific number of hours per day. We raised this with Newcastle Gateshead Clinical Commissioning Group (CCG) which told us that this was not the case and that the care needed would be the care that was given in line with the CHC national framework.

We also raised this at Gateshead Council's Overview and Scrutiny Committee (OSC), which invited a representative from the CCG to a meeting to clarify the situation formally.

The CCG told OSC that there may have been some internal communication issues that had led to the wrong message being given to patients, and that Newcastle Gateshead CCG would continue to fund CHC in line with the national framework on CHC

Share your views with us



If you have a query about a health and social care service or need help with where you can go to access further support, get in touch. Don't struggle alone. Healthwatch is here for you.

w: www.healthwatchgateshead.co.uk

t: 0808 801 0382

e: info@healthwatchgateshead.co.uk

A good practice award for Patient Participation Groups

In partnership with Healthwatch Newcastle, Patient Participation Groups (PPGs) were chosen as one of our priorities for 2019–2020.

Over recent years, several GP practices and several PPG members had contacted us to tell us that their PPG was not working effectively. Some also asked for help in either setting up a PPG or supporting their PPG to become more effective. We were also aware that Newcastle Gateshead Clinical Commissioning Group (CCG) was concerned that some local PPGs were not functioning well. We aimed to support and complement the CCG's work towards increasing the effectiveness of PPGs.

Initial research showed that there was already a lot of information about PPGs 'out there'. NAPP (National Association for Patient Participation), the Patients Association, other Healthwatch (Sunderland and Leeds) and the NHS have all produced toolkits or other forms of guidance.

To avoid duplication, we chose to take a different approach and decided to introduce a best practice award, 'Healthwatch participation in practice', which PPGs could work towards. The award is based upon the four PPG requirements in the 2015–16 General Medical Services contract, which are for all practices to:

- Develop and maintain a PPG to obtain 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 on improvements that could be made to services.

- Act on suggestions for improvements, where the practice and PPG agree.

Several criteria were developed for each requirement, founded upon accepted best practise for patient involvement. Our criteria were aimed at promoting effective, autonomous and supportive PPGs, to provide crucial 'critical friend' role for practices. Criteria included mandatory and non-mandatory elements. GP practices and PPGs had to meet all the mandatory criteria to achieve the award. A minimum 90% of all the criteria (at least two criteria from each requirement and all the mandatory criteria) had to be achieved to receive an award with distinction.

A pilot was implemented to assess interest in an award and test the criteria and the support we planned to offer to see if it was appropriate.

A pilot launch event was held in September 2019 to recruit between four and eight participants from across Gateshead and Newcastle. In the end we recruited 12 practices, seven from Newcastle and five from Gateshead. We could have recruited many more but 12 was the maximum we were able to viably support on the pilot.

From September 2019 to March 2020 we supported practices and their PPGs to meet the award criteria through one-to-one visits, workshops, informal get-togethers and the sharing of best practice materials and template documents through Basecamp, an online project management platform.



When the pilot ends, Healthwatch staff will visit practices to assess whether they have achieved the award. There will be external moderation of decisions by the CCG. The pilot will also be evaluated by the regional Academic Health Science Network, which has supported the project from the start. If the evaluation finds the award successful in increasing PPG effectiveness, we will consider how it can be rolled out more generally across Newcastle and Gateshead. The evaluation will also consider the potential for the award to provide a model of support that can be adopted on a much wider scale, possibly regionally or nationally.

We planned to run the pilot to April 2020, with an extension to September 2020 for practices that needed more time to achieve the award. Due to the COVID-19 outbreak, activities and events associated with the pilot

are on hold, with the agreement of all practices. We are currently investigating how we can continue to provide a level of online support, perhaps focusing more on PPG members rather than very busy practice staff, throughout the current crisis.

It is difficult to assess the impact of the award while the pilot is incomplete, however, anecdotal feedback from the practices and PPGs involved has been very positive. Activities have all been well attended and people have told us they found them very helpful. We have heard that one-to-one support has been appreciated and some practices have stated that their PPGs have already become more motivated and effective, as they work towards achieving the award.

Since signing up with Healthwatch I have felt more enthusiasm to take forward the work of the PPG. The award has helped me focus on driving the PPG group in the right direction. The tools available have been of great use and something we were lacking. This area within our surgery now has the bones of a good group that I'm sure we will add meat to going forward.

Joyce Mason, Birtley Medical Group

Lost in translation

We received negative feedback about foreign language interpreting services for health services during engagement with asylum seekers and refugees. This included incorrect language interpreters attending appointments, interpreters not understanding medical terminology and interpreters cancelling at the last minute. When we ourselves used the translation service to translate letters for a piece of work, some patients reported back that the translation was not in their language.

We developed a short questionnaire that was translated into Arabic. We gathered the views of 148 service users during Gateshead Housing Company's English for Speakers of Other Languages (ESOL) assessment week in February 2020.

We found the most accessed services (GP, dentist and opticians) offered the interpreting services the most often. This was followed by hospital and community nurses. Other services, such as pharmacies, offered interpreters the least often.

Respondents to our questionnaire said it was easy to book interpreters. However, many said there was a lack of Arabic (Syrian dialect) interpreters, long waiting times and a reliance on support workers in emergencies.

Quality of service was rated highly but experienced interpreters had weak 'Arabic language' skills. There were also issues with punctuality and reliability, not receiving an interpreter of the requested gender and difficulty using phone services with hearing impairments.



The majority of service users received translations in their correct language but sometimes had to use Google translate for NHS letters. Some people also found that the translated documents they received were sometimes inaccurate.

Our main recommendations included:

- Review how NHS services offer interpreting services to their patients.
- NHS/interpreting services to review long waiting times for interpreting appointment. Is it due to waiting for available interpreters or availability of longer appointments with GPs?
- Recruit more Arabic interpreters and look at the current staff's language skills and their punctuality.
- Ensure patient needs and requests are being met with regards to cultural, gender and sensory impairments.
- NHS/interpreting services to check systems to ensure they have the correct language on file for their patients.

I would like to thank all who support and help us and the ones who have helped us to get over our daily problems.
Gateshead Housing
Company tenant

Long term plan

#WhatWouldYouDo

The NHS long term plan was published by NHS England in January 2019. It sets out priorities for the NHS over a ten-year period in order to improve the quality of patient care and health outcomes.

This was one of the largest engagement exercises that the NHS has ever carried out, done in cooperation with Healthwatch England and the 110 local Healthwatch, including ourselves.

Highlights



More than 40,000 people shared their views with Healthwatch



Our national network held over 500 focus groups reaching different communities across England



Healthwatch throughout England attended almost 1,000 community events, including festivals, carers cafes, shopping centres and NHS services to speak to the public about their experiences

Mental health for young people – our role in the NHS long term plan

The NHS long term plan was published by NHS England in January 2019. It sets out its priorities for the NHS over a ten-year period in order to improve the quality of patient care and health outcomes.

As part of the NHS long term plan, we collected the views of young people on mental health. We conducted a focus group with local young people's organisation Streetwise, discussing prevention and/or early intervention, assessment, diagnosis and treatment and the provision of ongoing care. The young people recommended the following.

Prevention and/or early intervention

- Engagement with young men to get support to combat stigma.
- More publicity on talking about mental health.
- Include mental health on the curriculum from primary school upwards, using interactive activities to engage with young people.
- Public and professionals need training to identify mental health conditions.
- Include videos on websites alongside standard information, as young people can access this on their phones. Can be updated easily and reach more people.

Assessment, diagnosis and treatment

- Mental health services should be attached to services within the community, as people with mental health issues won't travel or it can cost too

much for them.

- Home visits should be offered initially to those with severe issues who can't leave the house; they can visit GP practice once able to travel.
- Better to speak in person but use Skype as an alternative for sessions.
- Hold more sessions as it takes a while to build a relationship. Work is lost after sessions stop.
- Offer more counselling; medication was seen as an easy option.
- Training for health professionals to reduce inconsistent advice/treatment between staff. Need better communication.
- Create a service for 16–18 year olds who are between adult and children services.
- Give patients access to online records.
- Test results should be given to children under 16 as well as their parents.
- Put money into existing services rather than create new services/apps as it takes a while to promote and build a reputation.

Provision of ongoing care and support

- Educate parents on how to deal with mental health problems and change attitudes as lack of awareness affects young people's mental health.
- Offer checkups and support while on the waiting list.
- More support in schools to prevent teachers taking on responsibility.
- Teach young people mental health first aid to understand and support peers.
- Have fewer people involved in care and support for young people to reduce miscommunication between those involved.

Helping you find the answers

Finding the right service can be worrying and stressful. Healthwatch plays an important role in helping people to get the information they need to take control of their health and care and find services that will provide them with the right support.

This year we helped 2,673 people get the advice and information they need by:

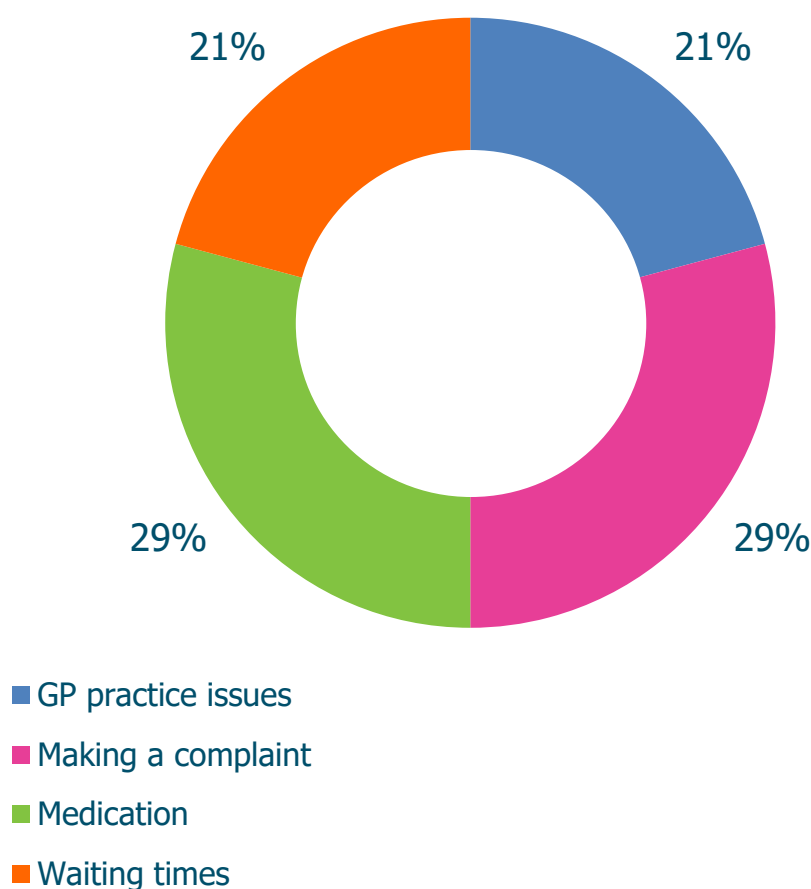
Providing advice and information articles on our website.

Answering people's queries about services over the phone, by email, or online.

Talking to people at community events.

Promoting services and information that can help people on our social media.

Here are some of the areas that people asked about



Supporting a complaint

We were contacted by someone who wanted to pursue a medical negligence case on behalf of a family member, which had resulted in a death. He wanted to know if we were able to provide a list of solicitors who specialised in medical issues.

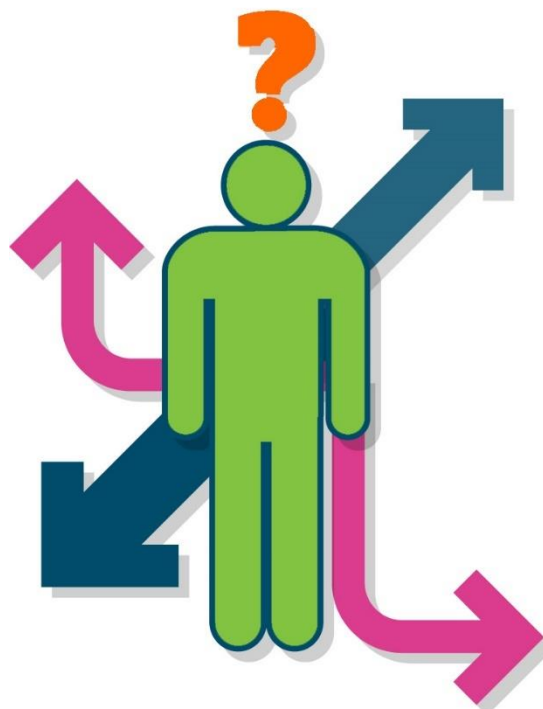
We agreed to meet with the person to find out more as the care pathway appeared to have been complicated and involved many different agencies.

The person told us about the experience of the family member using mental health NHS services in many different parts of the country. He felt that each NHS trust was dealing with each part of the complaint separately and not looking at the coordination of care, resulting in the breakdown of mental health care.

We suggested that a referral to Independent Complaints Advocacy Service (ICA) would be the best way forward. Following the referral ICA, the person was able to use the resources provided by ICA to pursue his complaint.

We are grateful for Healthwatch referring us to the ICA. I was subsequently contacted by the regional ICA and was assigned a sympathetic caseworker.

Healthwatch caller



Getting the right social support

We received a call from someone who was dissatisfied with the service provided by two social workers in Gateshead. The caller considered the Child in Need Assessment for her son, by one of the social workers, was inaccurate and inadequate. Another social worker had also got in touch with questions, but she was never clear as to why that social worker was involved.

We supported this caller to raise her concerns by emailing the team managers of both the social workers in question. In this email, we asked both managers to get in touch with the caller.

The team managers did get in touch. Unfortunately, the caller called us back as she was dissatisfied with their response. Since then she has been in contact with the Customer Liaison Manager at Gateshead Council but wants some support to make a complaint. We referred her to Advocacy Centre North.

Advocacy support

A support worker from Macmillan Cancer Support had been working with a woman diagnosed with lymphoma and leukemia. This woman had had many issues with social workers in the past.

She was meant to be receiving 36 hours of care a week but had only been receiving 10 hours. This was very distressing for her as she was paying for 36 hours but only receiving ten.

The support worker felt that the patient needed some advocacy support and was wondering if Healthwatch Gateshead could provide this.

We informed the caller that we don't provide advocacy services, but we were able to make a referral to an advocacy service on their behalf, which we did.

Help in making a complaint

We received a call from someone who was very dissatisfied with the service provided by the outpatient cardiology department at Queen Elizabeth Hospital. They wanted to make a complaint.

The department had sent an appointment letter to them in March 2019 offering an appointment in September 2019. In May 2019 a cancellation letter was sent and a new appointment in November 2019 was offered. Shortly after this, that appointment was cancelled, and an appointment was offered in December 2019.

As the caller wanted to make a complaint, we told them that they could work with the North East NHS Independent Complaints Advocacy Service. The caller was interested in doing this and a referral was made.



Contact us to get the information you need

If you have a query about a health and social care service or need help with where you can go to access further support, get in touch.

Don't struggle alone. Healthwatch Gateshead is here for you.

w: www.healthwatchgateshead.co.uk

t: 0808 801 0382

e: info@healthwatchgateshead.co.uk

Our volunteers

At Healthwatch Gateshead we are supported by twelve volunteers to help us find out what people think is working, and what people would like to improve, to services in their communities.

This year our volunteers:

- Raised awareness of the work we do at events, in the community, with health and care services.
- Visited services to make sure they are providing people with the right support.
- Helped support our day-to-day running.
- Listened to people's experiences to help us know which areas we need to focus on.

How our Champions help us

We knew that changes had been made to how children and young people's mental health services were being delivered.

We wanted to find out how much children, young people and their parents and carers know about accessing these services and if they had heard of a new service called Kooth (an online counselling service). We also wanted to hear people's experiences of using these new services. To do this we designed a survey to gather people's views.

Our Champions helped us with this work in three ways. Firstly, three of our Champions with research and survey writing experience got involved in helping to design the survey. They viewed a few draft surveys and helped us adapt them to ensure that the survey was as effective as possible.

Secondly, two Champions with research experience helped us build a database of all the mainstream, specialist and independent schools in Newcastle and Gateshead. This database included contact details, the school

mental health leads (if any) and if the school was actively promoting Kooth on its website.

Finally, two Champions helped us to run stalls and a focus group to gather people's experiences.



We could not do what we do without the support of our amazing volunteers. Meet some of the team and hear what they get up to.

Alan



I've been a Healthwatch Champion for just over three years. I enjoy this role as it gives me an insight into how and what are the priorities in health and social care for people in the area where I live.

I've helped staff with many different projects, including promoting Healthwatch at events like the Newcastle Mela and the Chinese New Year, and doing an NHS-sponsored survey of A&E departments in Newcastle and Gateshead. I make sure Healthwatch leaflets are available around Gateshead, including at the Queen Elizabeth Hospital. I also enjoy supporting events, including being the 'mike guy' at our conferences and AGMs.

Kay



I have been a volunteer with Healthwatch Gateshead for many years now. Previously I was a social worker specialising in adult mental health. Since retiring, volunteering has given a sense of purpose to my life that is meaningful and fun. I am continually learning, meeting new people and making new friends. There are no age barriers to volunteering. I can choose to give as many or as few hours per week as I wish.

We help gather views from local people about their health and social care experiences in order to help shape and improve services. I will continue to volunteer as long as I am able.

Randa



My voluntary work with Healthwatch Gateshead enables me to meet proficient employees and other great volunteers, whose sincere dedication is easily spotted as they are always there for people giving their time and energy to a worthwhile cause.

My experience has added value to my life. Being provided with meetings, training, activities and a space to integrate what I am capable of, with the organization vision, gives me a sense of purpose and deeper self-confidence. It turned out the benefits of volunteering are vast for me and not just the community!

Our Committee



The Healthwatch Gateshead Committee has continued to support and lead our work over this year. The members come with a wide range of experience. Some bring direct experience of having worked in health or social care, while others bring a strong understanding of the needs of communities within Gateshead.

Last year, some of our Committee members took on a project sponsor role for our in-depth research and our Project Managers found their guidance, advice and perspective very helpful. We repeated it this year and it has helped us to think about new ways to hear from people and present our findings.

Unfortunately, we said goodbye to two Committee members this year, Julie Boyack

and Esther Ward. We'd like to thank them for their support and wish them well for the future. This means that we continue to have vacancies on our Committee. We would love to be able to have a Committee that truly reflects the population of Gateshead and will be recruiting new members in 2020—2021.

Committee members 2019—2020

Michael Brown (Chair)
Lynda Cox
Michael Peacock
Shamshad Shah

Julie Boyack (stepped down)
Esther Ward (stepped down)

Our plans for next year

Looking back



This has been a great year for Healthwatch Gateshead. We have heard from more people and addressed more issues than before and I believe that we are well respected by the people that plan and provide health and care services. That respect is important as it makes it more likely that we will be listened to when we raise issues and share your views.

The work that Kim Newton, Project Manager, led on the council's Adult Social Care Direct service has been a great example of partnership working leading to valuable information and recommendations for improvement. Kim was able to persuade the council to send out surveys on our behalf to people who contacted the service, meaning that we reached people who had recent experience of using the service.

Our Volunteer and Outreach Coordinator, Beth Nichol, has been leading some excellent work, hearing from the borough's most seldom heard. This includes hearing from speakers of other languages about their experiences of interpreters in health settings. This work will help to shape the service that NHS England purchases on behalf of our local NHS.

We also joined with Healthwatch Newcastle and Healthwatch North Tyneside to do a survey over two 48-hour weekend periods in the Emergency Departments at the Queen Elizabeth Hospital and the Royal Victoria Infirmary. This was unprecedented work and wouldn't have been possible without the help of our Champions and committee members.

Along the way we have been able to support and help many individuals with their enquiries and issues, making a difference to individuals as well as to communities and the wider public.

Victoria Clark, our Volunteer and Outreach Coordinator, left us in May 2019. Victoria built a great relationship with our Champions and with some seldom heard groups that has helped us with our work. We wish her all the best for the future. I'm sad to say that Felicity Shenton, who has been Operations Manager for Gateshead for the last year, is leaving us to take up a new role. During her time with us she has strengthened our position in Gateshead as well as supported the staff and volunteers to do some great work.

Looking ahead

All of our plans started to change in late March as we realised just how significant the pandemic was going to be. Our focus for the duration of the pandemic is on making sure that people get the support and information they need.

We will continue to gather information about people's experiences of health and social care and will share this with the people that are planning and providing the services. As a lot of the ways in which services are being provided are very new, using technology to support social distancing, etc. this feedback is still very important.

We also need to make sure that the services meet the needs of all the communities across the borough.

As this year progresses, our priorities will change to meet the needs of our communities.

Thank you

This is the last annual report that I will be part of as I move on to pastures new. I am very proud of the way we take feedback from members of the community and use that to make real changes in services in Gateshead.

I would like to thank the Committee members, Champions and staff for all that they have done to deliver our work over the last year. I know that we will continue to work hard to do our work, even against the current background of the coronavirus pandemic. I'd also like to thank the wider population of Gateshead for supporting our events, sharing your experiences and trusting us to support you.

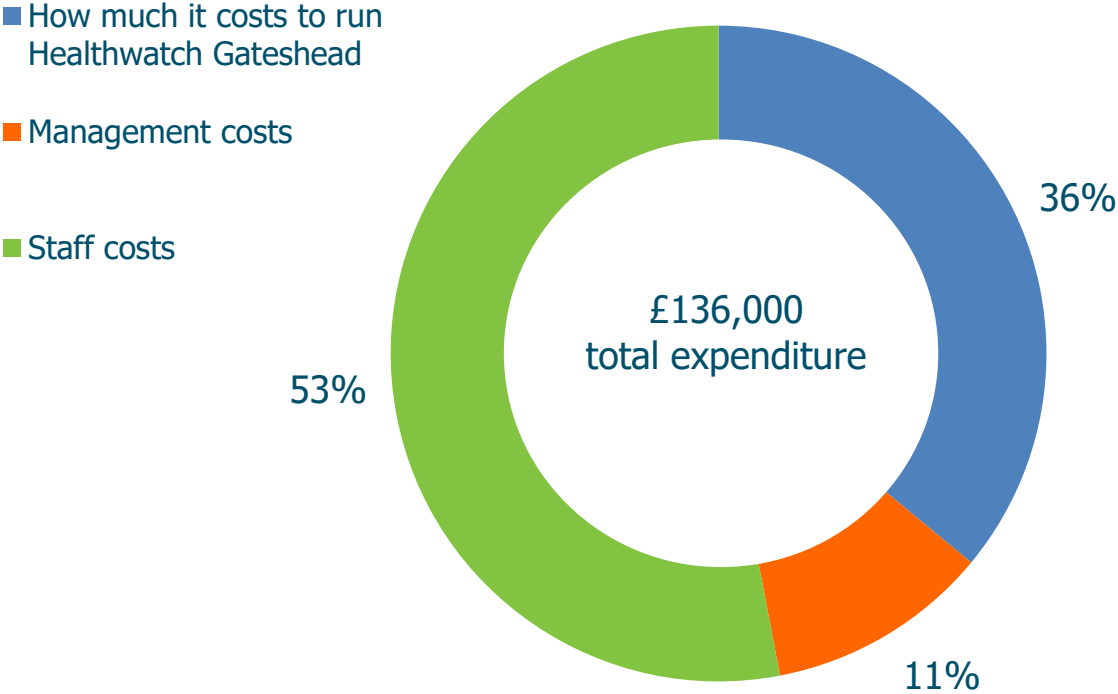


Steph Edusei
Healthwatch Gateshead Chief Executive

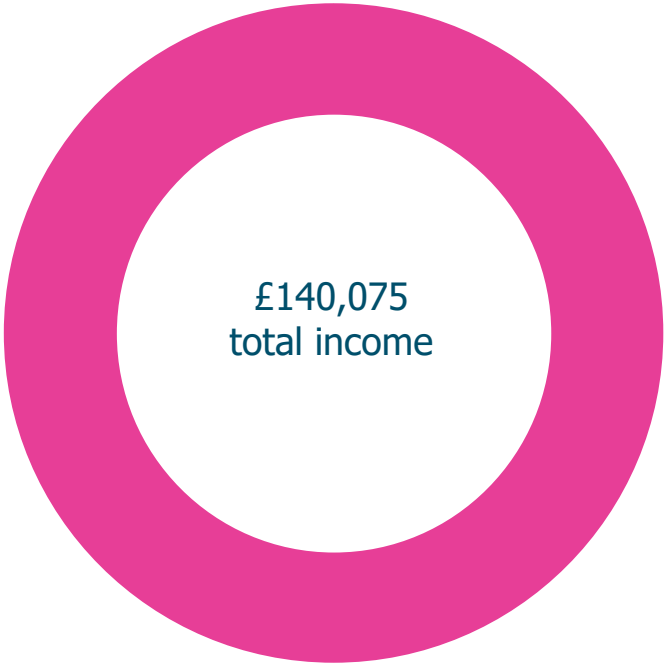


Finances

We are funded by our local authority under the Health and Social Care Act 2012. In 2019—2020 we spent £136,000.



■ 100% funding received from local authority



Thank you

Thank you to everyone that is helping us put people at the heart of care, including:

- Members of the public who shared their views and experience with us.
- All of our amazing staff and volunteers.
- The voluntary organisations that have contributed to our work:
 - Children North East
 - Deaflink
 - Gateshead Clubhouse
 - Gateshead Mental Health User Voice
 - HAREF (Health and Race Equality Forum)
 - NE Youth
 - Newcastle Volunteer Centre
 - NRASS (North Regional Association for Sensory Support)
 - Peace of Mind
 - Your Voice Counts
 - Youth Focus: North East
- Our partners and stakeholders:
 - Academic Health Science Network for the North East and North Cumbria
 - Anchor Housing
 - Castle and Coasts Housing Association
 - Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust Service User and Carer Reference Group
 - Fulfilling Lives Newcastle Gateshead (a project of Changing Lives)
 - Gateshead College
 - Gateshead Health NHS Foundation Trust Academic Health Science Network for the North East and North Cumbria
 - Gateshead CAB
 - Gateshead Council
 - Gateshead Housing Company resettlement team
 - Gateshead Jobcentre Plus
 - Gateshead Libraries
 - Inspired Support
 - Learning Skills
 - Newcastle Gateshead Clinical Commissioning Group
 - Newcastle upon Tyne Hospitals NHS Foundation Trust
 - All of the practices involved in the Participation in Practice award: Birtley Medical Group, Bridges Medical Practice, Cruddas Park and Hillside Surgery, Denton Turret Medical Centre, Dilston Medical Centre, Elswick Family Practice, Fell Cottage Surgery, Newcastle Medical Centre, Oxford Terrace and Rawling Road Medical Group, Teams Medical Practice, Throckley Primary Care, Westerhope Medical Group

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Organisation holding the Healthwatch Gateshead contract as of 31/03/2020

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