



On equal terms

Then and now

Healthwatch Gateshead annual report 2020—2021

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Message from our Chair

This year has been a great challenge due to the COVID-19 virus and its traumatic effects on our communities. We quickly realised we could not continue in the same way and had to adapt to the new reality. Our staff had to work from home and become a virtual team. Thank you to them for finding ways to maintain the service and keep in touch and engage with users of health and social care services and partners to ensure people still had a meaningful voice. Whilst COVID-19 has been a big shock, we have shown how we can adapt, work in new ways and still deliver an effective service.



During all of this change on the national scene, there were also organisational challenges. Our new Chief Executive, Siobhan O'Neil, brings a wealth of experience regarding engagement and championing service user rights.

We had to change from working on previously agreed Gateshead Committee priorities in order to support and feed into regional and national projects. Our work was organised under Healthwatch England priorities. Of course, we cannot deliver without the help of our volunteers who had to adapt to new ways of working. A big 'thank you' to them, particularly for the befriending calls in partnership with Mental Health Concern and Age UK Gateshead. These calls have been a vital service for those living alone or having to isolate.

I am grateful for the commitment of Healthwatch Gateshead Committee members. New members joined and I am sure their varied backgrounds will prove to be an asset in improving health and social care services. I must also give thanks to the people of Gateshead who have been willing to share experiences of services during difficult times. I am sure they will continue to do so in the year ahead, particularly when we know the pandemic has created huge backlogs and exposed health and care inequalities and pockets of deprivation across Gateshead.

We will continue to work closely with the council, public health and health and social care partners, particularly with the Gateshead Health and Wellbeing Board. Big challenges are ahead, such as further integration of health and social care and, hopefully, proposals for the future funding of social care. We thank our partners for recognising our work and expertise and their willingness to involve us at a high level where we can have an influence on behalf of local people. We proved we can adapt and engage with local people, despite COVID-19 restrictions. I can assure you that Healthwatch Gateshead will continue to ensure local people have effective ways to influence and improve health and social care services.

A handwritten signature in black ink that reads "Michael Brown". The signature is written in a cursive, flowing style.

Michael Brown
Healthwatch Gateshead Chair

About us

Here to make health and care better

We are the independent champion for people who use health and social care services in Gateshead. We're here to listen to what people like about services and what can be improved. We find out what matters to people and help make sure their views shape the support they need, by sharing these views with those who have the power to make change happen. We're here to encourage services to involve people in decisions that affect them.

Helping you to find the information you need

We help people find the information they need about services in their area. This has been vital during the pandemic with the ever-changing environment and restrictions limiting people's access to health and social care services.

Our goals



Supporting you to have your say

We want more people to get the information they need to take control of their health and care, make informed decisions and shape the services that support them.



Providing a high-quality service

We want everyone who shares their experiences or seeks advice from us to get a high-quality service and to understand the difference their views make.



Ensuring your views help improve health and care

We want more services to use people's views to shape the health and care support needed today and in the future.



"Local Healthwatch have done fantastic work throughout the country during the COVID-19 pandemic, but there is more work ahead to ensure that everyone's views are heard. COVID-19 has highlighted inequalities and to tackle these unfair health differences we will need those in power to listen, to hear the experiences of those facing inequality and understand the steps that could improve people's lives."

Sir Robert Francis QC, Chair of Healthwatch England

Highlights from our year

Find out about our resources and the way we have engaged and supported people in 2020–21.

Reaching out



We heard from

1,388 people

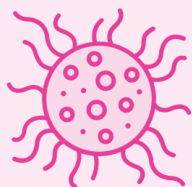
this year about their experiences of health and social care.

We provided advice and information to

43 people

this year.

Responding to the pandemic



We engaged with and supported

142

people during the COVID-19 pandemic this year.

Making a difference to care



We published

9 reports

about the improvements people would like to see with their health and social care. From this, we made 19 recommendations for improvement.

37% of recommendations

we made last year have been acted upon, at the point where we reviewed progress.

Health and care that works for you



9 volunteers

helped us to carry out our work. In total, they contributed 329 hours.

We employed 3 'full-time equivalent' staff

and all our staff worked part-time. We said goodbye to and welcomed new team members during the year.

We received

£140,075 in funding

from our local authority in 2020-21, this is at the same level as in 2019–20.

Then and now: Adult social care

Then: Access to Adult Social Care – the front door to social care services

The 'front door' is a term often used to describe the single point of access for social care services provided by local authorities. In Gateshead, this is called Adult Social Care Direct (ASCD) and is a 24-hour service that can be used by both health and social care professionals and members of the public.

Access to Adult Social Care Direct became a work priority in 2019 following a consultation exercise with the public, who told us they felt it was important for us to focus on this topic.

Early research told us that ASCD had recently carried out an internal audit and was aware of the need to make changes to the service. The introduction of online forms was one of the improvements made as a result.

Some of the comments we received may have been about the service before those changes were made to ASCD. However, we believed that, because those changes had been in place for almost 12 months, we should survey the public's current views. We wanted to find out what users felt about the current service, how effective it was and hear their suggestions for further service development.

We engaged in several ways. There was a survey of ASCD service users and a listening event for unpaid carers, the public and voluntary and community sector organisations. We also surveyed GP practice staff who referred people to ASCD. This gave us views from a wide variety of users on the effectiveness of the service and suggestions for how it could be enhanced. The engagement was done in collaboration with Gateshead Council.

Now: Improvements to Adult Social Care Direct

We produced a report¹ with a series of recommendations in four key areas:

- Online referrals
- Improving access
- Quality assurance
- Improving referrals

¹ Healthwatch Gateshead (2020) 'Adult Social Care Direct in Gateshead: The front door to social care services' <https://tinyurl.com/v66k7g8>

Gateshead Council responded to us on each area of concern. The council implemented improvements based on our report findings, including the following:

- The introduction of online forms for unpaid carers assessments.
- Guidance developed to help people completing online referral forms.
- Data gathered from ASCD to be fed into a council-wide review of Advice, Information and Guidance, so that Gateshead Council can ensure hard to reach and underrepresented groups are targeted with relevant information about how they can access support.
- The introduction of a flowchart on Gateshead Council's website to help with the referral process.



“The Council is undertaking a full review of the Advice, Information and Guidance offered in Gateshead, and there is also an ongoing review of the Adult Social Care Website. ASCD will have significant input into both of these projects, and the outputs from the Healthwatch survey will help to inform the developments.

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.”

Team Manager, Adult Social Care Direct at Gateshead Council



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. We're here for you.

w: www.healthwatchgateshead.co.uk

t: 0808 801 0382

e: info@healthwatchgateshead.co.uk

Then and now: PPG awards

Then: Participation in Practice Awards and COVID-19 disruption



In September 2019 we launched the pilot of a 'Healthwatch Participation in Practice' award, a best practice award for GP Patient Participation Groups (PPGs), in partnership with Healthwatch Newcastle. A PPG is a group of GP patients who work with their practice to improve patient services.

The award is built around the five PPG requirements in the 2015–16 General Medical Services (GMS) contract. We developed several criteria for each requirement, based on accepted best-practice for patient involvement. The criteria were designed to promote effective and autonomous PPGs and provide that crucial 'critical friend' role for practices.

Twelve GP practices and their PPGs from across Newcastle and Gateshead signed up to take part in the pilot. During 2019–20 the practices and their PPGs were supported to become more effective. We ran workshops and informal meetings, set up an information-sharing forum for circulating best practice materials and sharing experiences, and provided one-to-one support.

At the end of the pilot, Healthwatch staff planned to visit practices to assess whether they had achieved the award. The pilot was to be evaluated and, if the award found to be successful in increasing PPG effectiveness, we would consider how to make it available to all local GP practices and their PPGs.

However, in March 2020, the impact of COVID-19 meant we had to put all our face-to-face activities associated with the PPG award on hold. We decided to keep going with the pilot and continued to offer online and telephone support to those participants who wished to continue. In July 2020, Newcastle Medical Centre was the first practice to complete the award, with distinction.

Now: Participation in Practice Awards – pilot complete, evaluation on hold

Over the past year, we have continued to support practices participating in the award. Online workshops and meetings and telephone support have replaced more traditional get-togethers, and Healthwatch staff have visited practices when restrictions allowed. Unfortunately, the ongoing challenges of the pandemic have meant that half of those who initially signed up have withdrawn from the pilot. By the end of the pilot in February 2021, six of the original 12 had achieved the award – three from Newcastle and three from Gateshead.

We intended to start the award evaluation straight after the pilot ended. However, it became clear that GP practices continue to be exceptionally busy. They need more time to embed their learning and develop their PPGs during more 'normal' circumstances, so the decision was taken to postpone the evaluation. We anticipate it will now take place in early 2022 when we hope we can better assess whether the award has helped those PPGs involved in the pilot to become more effective. The evaluation will also consider the potential for the award to provide a model of support that can be adopted locally and, possibly, regionally or nationally.

"Since signing up with Healthwatch I have felt more enthusiasm to take forward 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, Contracts and Performance Manager at Birtley Medical Group

When initially set up, we needed to limit PPG award participants to a manageable number. Several practices and PPGs were disappointed that they were unable to take part. In response, we also established the Healthwatch PPG forum, a forum facilitated by Healthwatch Gateshead and Healthwatch Newcastle. This is for PPG members to meet, discuss issues, share information and access training. The group meets quarterly and has continued to run virtually throughout the pandemic. At our most recent meeting in February 2021, the group discussed their experiences of receiving the COVID-19 vaccination. As a consequence of issues raised at that meeting, we have included an additional question about the location of vaccination venues in our recent vaccination survey.

It remains difficult to assess the impact of the PPG award while the evaluation is on hold. However, anecdotal feedback from those involved has been very positive. Both in-person and virtual events have all been well attended and people have told us they have found them very helpful. One-to-one support has been appreciated and some practices have stated that their PPGs have already become more motivated and effective.

Then and now: Children and young people's health access

Then: Asylum Seeker and Refugee Child Clinic

In 2019, we developed a partnership with the Asylum Seeker and Refugee Child Clinic at the Queen Elizabeth Hospital. The clinic was a pilot of a new service model which provided health assessments for refugee and asylum-seeking children. The clinic wanted to identify the health needs and healthcare barriers for these children and families.

We supported the clinic by holding a focus group, with no member of the clinic staff present, to find out more about their experiences of using the clinic and also barriers faced using other health services. The Asylum Seeker and Refugee Child Clinic was described as an excellent service, especially for the length of the appointment, presence of an interpreter, thoroughness of assessment, quick access to investigations and referrals to specialists, and clarity of communication. Most children felt very much at ease although some felt uncomfortable because the doctor did not speak their language. Families were generally satisfied with follow-up information and the clinic letter provided, but some struggled to understand the letter because it was provided only in English.

The focus group also explored their experience with primary care in general, and as a follow-up from a clinic visit. Most parents were very satisfied with their practice and realised, and appreciated, the extra mile many practices go in supporting their health, including making appointments, getting vaccinations, medicines and referrals. Nevertheless, there were several recurrent themes including some practices being reluctant to register families, difficulties in getting an urgent appointment, appointments being too short, the wrong language interpreter being booked or the interpreter not turning up, and staff and doctors struggling to understand the cultural background and concepts of health and disease that refugees and asylum seekers have. Families stated that easier and quicker access to longer GP appointments, with the presence of an adequate interpreter, could make the most difference in meeting their health needs.

As a result of our work, we were able to help identify unaddressed health needs and substantial barriers to accessing health care and help propose a service model for healthcare provision. Our findings featured in the research article 'Health needs of accompanied refugee and asylum-seeking children in a UK specialist clinic'².

² Harkensee, Christian and Andrew, Rachel (2021) 'Health needs of accompanied refugee and asylum-seeking children in a UK specialist clinic' <https://doi.org/10.1111/apa.15861>

Now: Lost in translation – interpreting services in Gateshead

From our previous work in 2019 we identified negative feedback from people in Gateshead about interpreting services for health care. We also knew from this work (which required translation of letters to NHS patients) that some people received translations that were not in their language. We worked with The Gateshead Housing Company (GHC) to develop a short questionnaire. GHC holds an annual English for Speakers of Other Languages (ESOL) assessment week and this seemed an ideal opportunity to reach out and seek people's views.



In February 2020, we gathered the views of 148 people there who spoke Arabic (our questionnaire was translated into Arabic by one of our volunteers). Staff handed out the questionnaire before or after the ESOL assessments took place. People completed the questionnaire themselves or were offered help by their support workers.

Survey respondents highly rated the quality of service they received but mentioned several issues, including a lack of Arabic (Syrian dialect) interpreters, long waiting times for appointments with an interpreter and having to rely on support workers in emergencies.

Recommendations were made in our report and shared with relevant services. We are pleased that Gateshead Health NHS Foundation Trust has responded to our recommendations, including the following actions:

- Monthly contract meetings take place with the interpretation provider Big Word, where recruitment of linguists is discussed.
- Work has been undertaken, over the last year, in line with the Accessible Information Standard. The Trust has agreed that interpreting is an aligned aspect and included within this body of work.
- Through the Big Word, portal staff can provide feedback regarding their experience. A survey will be developed by Trust staff and circulated via social media and with wider stakeholders to allow insight into the experiences of speakers of different languages use of the Trust's interpreting service.

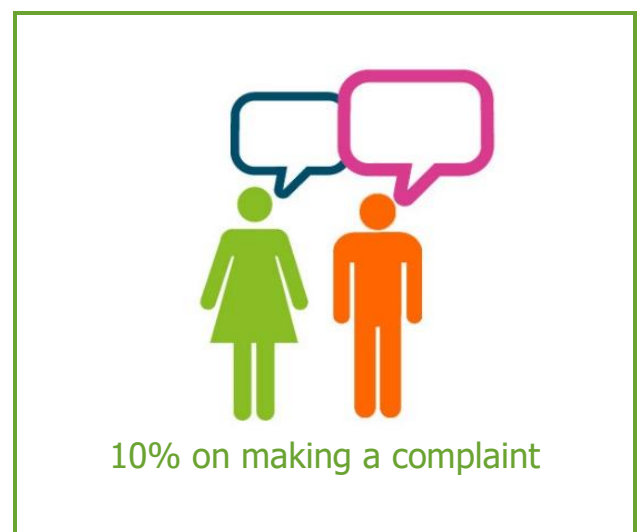
Responding to COVID-19

Healthwatch plays an important role in helping people to get the information they need, especially through the pandemic. The insight we collect is shared with both Healthwatch England and local partners to ensure services are operating as best as possible during the pandemic.

This year we made contact with people 300,575 via outreach and engagement, and our social media channels by:

- Providing up-to-date advice on the COVID-19 response locally.
- Helping people to access the services they need.
- Linking people to reliable up-to-date information online.
- Supporting the vaccine roll-out.
- Supporting the community volunteer response.

The top four areas people contacted us about



Resolving care home concerns

Mr N contacted us to express concern about the care and treatment of his mother in a Gateshead care home. The family was also challenging a Deprivation of Liberties (DoLs) that had been applied to their mother around making her own decisions. The family said that the relationships with the care home manager had completely broken down. As a result, Mum had been given notice to leave the care home and Adult Social Care (ASC) was looking for another care home to meet her needs.

Healthwatch Gateshead contacted ASC with the family's permission to find out more. We learned that the family's relationship with both ASC and the care home had broken down and this was making progress in this complex case difficult. We were asked by ASC to continue to liaise with the family as we had developed a trusted relationship with them. We acted as an impartial conduit between the three parties to reach a resolution, with the mother's needs at the centre of decision-making.

As a result, a multi-agency team met and decided that a Court of Protection would be applied for, as the DoLs was time-limited. Mum remained in the care home and the notice to leave was revoked. There was also an agreement reached with the family and the care home around access to Mum and standards of behaviour.

"Thank you Healthwatch, Mum is settled now and we get regular updates. Dad has been able to see Mum, albeit by Zoom."

Family of Mrs N

Ensuring vaccination for hospital inpatients

Mr B contacted us about the process for a COVID-19 vaccination for long-term patients in Gateshead hospitals.

We contacted the Patient Experience Team at Gateshead Health NHS Foundation Trust, which raised the issue at the Trust's vaccination meetings.

Following this, the Queen Elizabeth Hospital has adopted a vaccination policy for long-stay patients who have been in hospital for more than 42 days. This covers people who haven't had the vaccine, who fit in one of the priority groups being vaccinated and who are clinically fit to receive the vaccine. As a result, Mr B's wife was vaccinated after 42 days as an inpatient and more patients will benefit who otherwise may have faced an unnecessary delay in receiving vaccination protection.

"This has been achieved through your intervention and I am extremely grateful. Now that the QE has adopted a policy for long-stay inpatients it will benefit a number of those who otherwise may have faced an unnecessary wait."

Mr B

Volunteers

At Healthwatch Gateshead we are supported by nine volunteers, known as Champions, to help us find out what people think is working and what improvements people would like to make to services.

This year our volunteers:

- Helped people have their say from home, by promoting surveys to family, friends and neighbours.
- Carried out mystery shopping and surveys over the telephone.
- Supported Mental Health Concern and Age UK Gateshead to provide befriending calls for the most vulnerable.
- Conducted desk-based research and updated databases.

Supporting vulnerable members of our community

“During lockdown, Healthwatch Gateshead asked us volunteers if we could offer some of our time to support Age UK Gateshead with befriending calls. I have been a Champion for several years and I really enjoyed making befriending calls this year.

I wanted to help others and do something meaningful to support those vulnerable members of our community in these unprecedented times. I understand the difficulties the individuals face in their daily life and the complexities that COVID-19 brought.”

Alison Chambers



Be our Champion

Help us make a difference in Gateshead.
Find out about the opportunities we have for you at
www.healthwatchgateshead.co.uk/volunteer

Helping to promote COVID messages

“At one of the Healthwatch Champion meetings we were told that Gateshead Council was looking for local people to have their photo taken with a mask to help promote mask-wearing during COVID-19. I thought, why not? So volunteered to take part. Bit of a strange thing for me to volunteer for as I don't really like having my photo taken but maybe the thought of being behind a mask helped!



The council arranged a convenient time with me for a photographer to come and take photos in my local area. He helped put me at ease and took a variety of shots at different locations in Ryton. I had been asked for a sentence on why I wore a mask to go with the photo in the campaign. I could choose which photo was used and the final artwork was emailed to me before the council used it in their social media campaign.”

Sue Hill

My path to an autism diagnosis



“I have been a Healthwatch Champion in Gateshead and Newcastle for several years. I recently received an autism diagnosis and wanted to share insights on this. I've been autistic all my life, but it was only two weeks before my 57th birthday that I realised this! It is something I'm only beginning to understand.

The path to my diagnosis began at a joint Healthwatch Gateshead and Healthwatch Newcastle conference in April 2018, when I found myself in conversation with Toni Brown, a clinical psychologist working with middle-aged men diagnosed with autism.

During the conversation, she described the symptoms and one by one I found myself ticking them off in my mind with the thought “that's me”. But (like a typical bloke some may say) I 'ummed' and 'ahhed' about things until it came up during a volunteer review. The Healthwatch Volunteer and Outreach Coordinator at that time advised me to get in touch with my doctors. I took a questionnaire that was submitted to the Adult Autistic Diagnostic Service and received a diagnosis in November 2020.

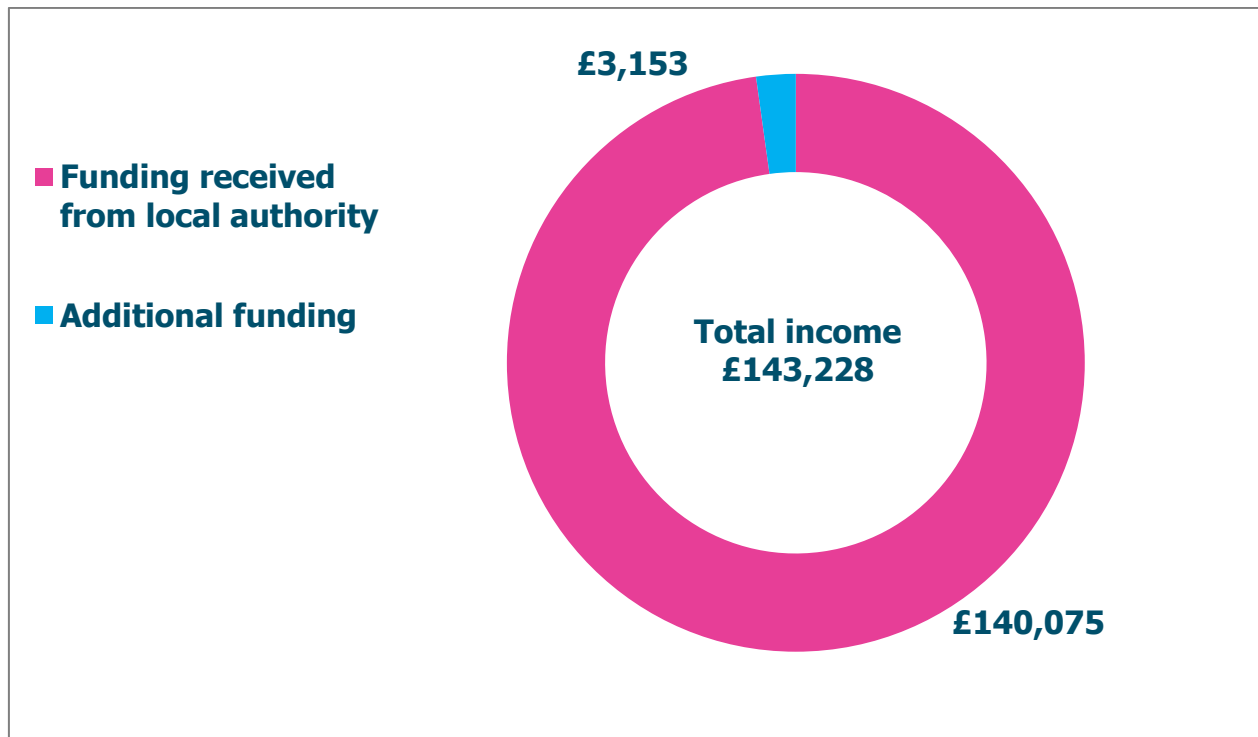
I shared this publicly via Healthwatch newsletters and social media to make people aware. As a result, BBC Radio Newcastle asked me to do an interview about my experiences. This reached lots of people and increased awareness of autism and also later in life diagnosis. I'm only just beginning to understand a condition that I've had all my life: why I find it difficult to make decisions, express my feelings or even be understood. But that's me, Alan Guest, a middle-aged autistic man!”

Alan Guest

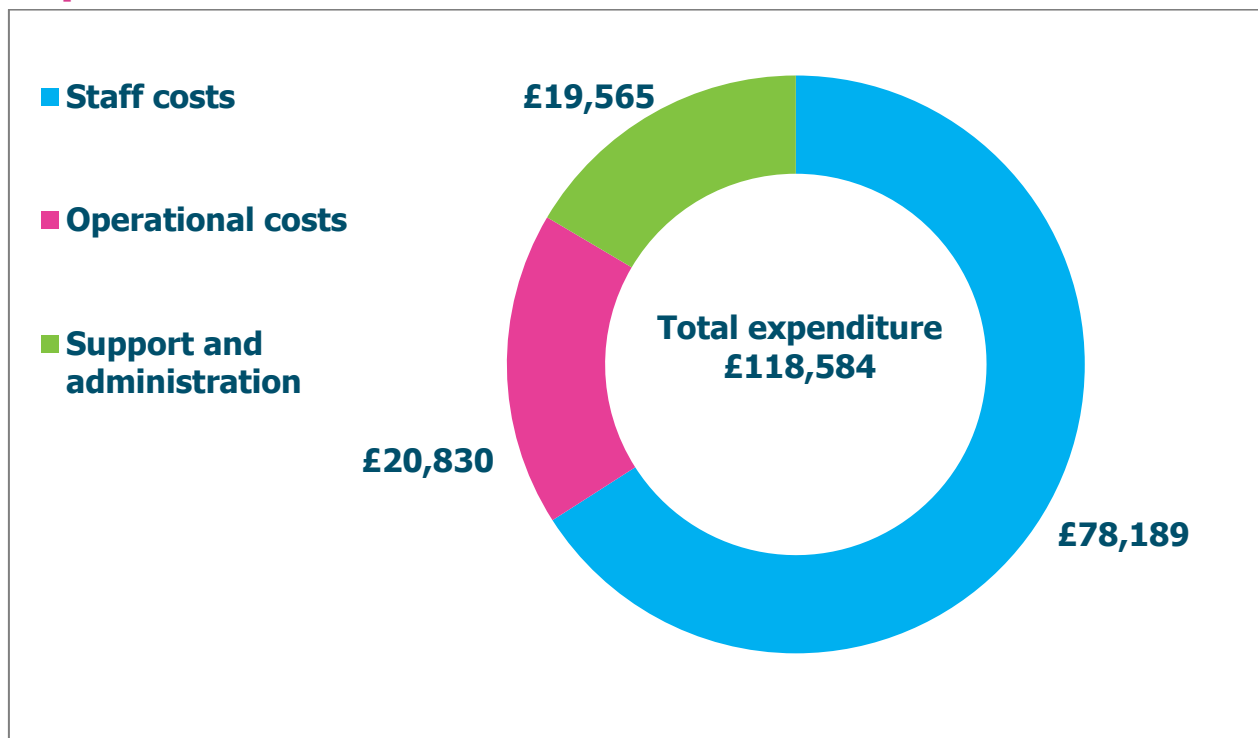
Finances

We receive funding from our local authority under the Health and Social Care Act 2012. In 2020–21 our budget was £140,075 and we spent £118,584.

Income



Expenditure



Next steps

Top priorities

1. Resilient communities post-COVID-19

We would like to explore the health and care responses to COVID-19 within communities to better understand how the pandemic has impacted on the health and wellbeing of different communities across Gateshead.

2. Access to GP services for refugees with leave to remain

We want to understand the experience of refugees and asylum seekers when they seek to access GP services, to identify what barriers may exist and examples of good practice. As a result of our work, we want refugees and asylum seekers to have better information about how to access GP services and for frontline staff to be better prepared to welcome refugees and asylum seekers to their services.

3. In addition to these priorities, we are also looking at how we might work to support the uptake of the COVID-19 vaccination and have identified areas of work around access to mental health services. We will monitor and assess over the coming months and be ready to respond as themes emerge.

4. Finally, we have learned over the past year that we need to be flexible and responsive to needs as they arise. We have identified resources that we can use in response to additional issues that may arise over the coming year.

Next steps

As we look ahead, we are mindful of the continuing impact of COVID-19, the lessons that will be learned from our collective experiences over the past year and the inequalities and structural disadvantage that have been further exposed by the pandemic. Our focus remains the same, we will seek out and listen to the experiences of those using health and social care services in Gateshead. We will be particularly attuned to sharing experiences that support services to reduce inequalities and enable people and communities across the borough to thrive.

“This is my first annual report for Healthwatch Gateshead and there is no doubt that I have joined during a unique period, in fact I have yet to meet Committee members, volunteers and team members in real life!

There is though a sense of homecoming, having previously spent many happy years working in Gateshead. Preparing this report has given us an opportunity to reflect. We’re proud of the part our volunteers and staff played as we reacted to the challenges the pandemic brought, and appreciative and thankful for the way organisations and communities across Gateshead have worked together and responded to need. We look ahead with determination and renewed commitment to engaging with people and communities amplifying their voices and experiences to improve health and social care services.”

Siobhan O’Neil

Healthwatch Gateshead Chief Executive

Statutory statements

About us

Healthwatch Gateshead, MEA House, Ellison Place, Newcastle upon Tyne, NE1 8XS
Organisation holding the Healthwatch Gateshead contract:
Tell Us North CIC (company number 10394966), MEA House, Ellison Place, Newcastle upon Tyne, NE1 8XS
info@tellusnorth.org.uk

Healthwatch Gateshead uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.

The way we work

Involvement of volunteers and laypeople in our governance and decision-making.

Our Healthwatch Committee consists of seven members who work on a voluntary basis to provide direction, oversight and scrutiny to our activities. Our Committee ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community. Through 2020—21 the Committee met five times and made decisions on matters such as choosing Healthwatch priorities and aligning them with Healthwatch England for the new financial year.

Committee members 2020—21

Michael Brown – Committee Chair
Michael Peacock
Shamshad Shah
Mairi Cox (joined April 2020)
Rachel Smith (joined November 2020)
Lyn Boyle (joined November 2020)
Jane Quilty (joined November 2020)

Involvement of volunteers and lay people in our governance and decision-making

We ensure public involvement in deciding our work priorities. An annual priority-setting exercise is held every January to April. Concerns and feedback from the public are collated from our feedback centre, signposting enquiries and outreach. Local and regional intelligence is also gathered from various sources, including voluntary and community sector organisations. Areas of interest are identified from these sources and a shortlist of potential work priorities is created.

Public and stakeholder feedback on the shortlist is gathered via an online survey, community outreach and at our annual conference. The Healthwatch Committee meets to discuss the feedback and then agrees on our priorities for the next 12 months.

Things changed so much during our priority-setting exercise in early 2020. Our efforts to gather feedback were hampered by the COVID-19 pandemic and restrictions on gatherings and movement. Our Committee decided to take a different approach for 2020–21 and it was agreed to align our priorities with those of Healthwatch England. Our priorities were:

- Information-giving — communicating key messages to the public, with a particular emphasis on how to stay safe and well during the pandemic and how to get help if and when required.
- Signposting — supporting people to get the help that they need in response to enquiries via the phone, email, website and social media.
- Troubleshooting — helping people who are not getting the response they need from services.
- Supporting the local communities — working with the voluntary and community sector, health and the local authority to support the wider community.

“I wanted to thank you for the invaluable support that Healthwatch has given the Northern Cancer Alliance throughout the pandemic.

At the start of the pandemic we saw our urgent cancer referrals rates drastically drop and have been working hard to recover these rates since then.

Your support in helping us reach our communities across the NE and North Cumbria via your network has been extremely helpful and this has contributed massively to the level of engagement we have had with our local Help Us Help You and Do It For Yourself lung cancer awareness campaigns.

The key to improving cancer outcomes in our region is early diagnosis and it is therefore imperative people contact their GP at the earliest point.

Jo Mackintosh, Delivery Manager at Northern Cancer Alliance

Methods and systems used across the year’s work to obtain people’s views and experience.

We use a wide range of approaches to ensure that as many people as possible have the opportunity to provide us with insight into their experience of health and care services. During 2020–21 we were available by phone, email and a form on our website, as well as providing an online feedback centre rate and review system. We also attended virtual meetings of community groups and forums and provided virtual activities and engaged with the public through social media.

“Since April 2020 Leam Lane Community Centre has been supported by Gateshead Healthwatch. Individuals in our community have benefited from individual support and signposting and development staff have stated they are being kept up-to-date with vital information that they are able to pass on.”

Teresa Boden, Youth and Community Development Worker and Volunteer Manager at Leam Lane Community Centre

We are committed to taking additional steps to ensure we obtain the views of people from diverse backgrounds who are often not heard by health and social care decision-makers. This year we have done this by, for example, approaching several local organisations to ask if they would like to record an information video for us. This allows organisations an opportunity to talk about their service and referral methods. We can use these videos as part of our signposting function. The videos are also publicised on social media and give us an opportunity to engage directly with the public and ask their views on the topic covered.

We joined a range of Facebook community groups across the borough to enable us to find out what issues are affecting specific communities. We use these groups to publicise work we are doing and interact directly with local residents.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We publish it on our website www.healthwatchgateshead.co.uk/about-us/reports

Responses to recommendations and requests

There were no issues or recommendations escalated by our Healthwatch to Healthwatch England Committee and so no resulting special reviews or investigations.

Health and Wellbeing Board

Healthwatch Gateshead is represented on the Gateshead Health and Wellbeing Board by Chief Executive Siobhan O’Neil and Committee Chair Michael Brown. During 2020—21 our representatives have effectively carried out this role by attending the regular meetings, updating partners on our work, and sharing people’s experiences and stories of accessing services during the COVID-19 pandemic.

We have also attended Gateshead’s Local Outbreak Engagement Board sharing insight from our work with local people, including the results of our COVID-19 vaccination survey. Through this, we were able to actively support the ‘#BeatCovidNE’ campaign featuring local people. The focus of this was to thank local people, encourage and support them to keep going and follow the latest guidance to beat the pandemic.

“Healthwatch remains an active and committed member of the Gateshead Safeguarding Adults Board. This can be demonstrated by the fact that during 2020/21 a Healthwatch representative supported the Board by undertaking the role of interim Chair. Healthwatch provides a vital role in bringing concerns from Gateshead residents to the Board, and provide appropriate independence and challenge to the statutory safeguarding partners.”

Carole Paz-Uceira, Safeguarding Adults Business Manager at Gateshead Council

Glossary

Accessible Information Standard

This aims to make sure that patients, service users, carers and parents with a disability, impairment or sensory loss are given information they can understand and the communication support they need. All organisations that provide NHS care and/or publicly-funded adult social care are legally required to follow the Accessible Information Standard.

Autism

Autism is a lifelong developmental disability that affects how people communicate and interact with the world. One in 100 people are on the autism spectrum and there are around 700,000 autistic adults and children in the UK.

Care, Health and Wellbeing Overview and Scrutiny Committee

This committee is responsible for carrying out all scrutiny activities concerning health, public health and social care. This includes scrutiny of the commissioning and delivery of NHS funded services in Gateshead.

Care Quality Commission (CQC)

The independent regulator of all health and social care services in England.

CIC

A CIC (Community Interest Company) is a special type of limited company which exists to benefit the community rather than private shareholders. Any profit is used to grow and develop its business and benefit the community.

Clinical Commissioning Group (CCG)

A group of medical professionals that collectively plan and buy services in the local area, including mental health services, urgent and emergency care, elective hospital services and community care. NHS Newcastle Gateshead CCG is responsible for this in Gateshead.

Commissioning

This is the process for planning, agreeing, paying for and monitoring services.

Court of Protection

The Court of Protection makes decisions and appoints deputies to act on a person's behalf when they are unable to make decisions about their health, finance or welfare.

Deprivation of Liberty Safeguards (DoLS)

A set of checks to make sure that people who cannot consent to their care arrangements in a care home or hospital are protected if those arrangements deprive them of their liberty.

Gateshead Health NHS Foundation Trust

Provides a range of hospital and community health services in Gateshead, including the Queen Elizabeth Hospital, Blaydon urgent care centre and Bensham Hospital.

Gateshead PALS

The Patient Advice and Liaison Service (PALS) offers confidential advice, support and information on services provided by Gateshead Health NHS Foundation Trust. PALS provides a point of contact for patients, their families and their carers.

Health and Social Care Act 2012

The Health and Social Care Act created the most wide-ranging reforms to the NHS since it was founded in 1948. It included the creation of a Wellbeing for Life Board and Healthwatch in each local authority area and CCGs in England.

Healthwatch England

An independent organisation whose main legal functions are to provide leadership, guidance, support and advice to local Healthwatch organisations and escalate concerns about health and social care services raised by local Healthwatch to the CQC.

Patient Participation Group (PPG)

A group of GP patients who meet regularly (in person or virtually) and work in partnership with their practice to improve patient services. From April 2016, it has been a contractual requirement for all English GP practices to form a PPG.

Provider

This refers to an organisation directly delivering health or social care services.

Voluntary and community sector (VCS)

This sector is independent of the government and private sectors. It is very diverse and covers everything from local playgroups to national and international charities. They are non-profit, self-governing organisations and include registered charities and CICs.

Wellbeing for Life Board

This Board is responsible for making strategic decisions and overseeing improvements in health and social care services in Gateshead. Board members include local councillors and representatives from Children's and Adult's Social Care, Newcastle Gateshead CCG, Public Health, the VCS and Healthwatch Gateshead.

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 organisations that have contributed to our work:
 - Age UK Gateshead
 - Arthritis Care Gateshead
 - Connected Voice
 - Diabetes UK
 - Gateshead College
 - Gateshead Council
 - Josephine and Jack Project
 - Leam Lane Community Centre
 - Making Changes NE
 - MEARS
 - Mental Health Concern
 - NHS Newcastle Gateshead CCG and its long-term conditions group
 - Northern Cancer Alliance
 - Northumbria Blood Bikes
 - Skills4Work Gateshead
 - Stroke Association
 - The Gateshead Housing Company
 - The Whole System
 - Tyneside Mind
 - Veterans at Ease

“Skills4Work Gateshead are proud to work with Healthwatch and it is vital that young people in Gateshead are given a voice to praise the experience they have received and also know where they can go in need of complaint. I am delighted to say that all involved had received a positive experience over the past three years.”

Tracey Wallace, Development Manager at Skills4Work Gateshead

Contact us



MEA House, Ellison Place, Newcastle upon Tyne, NE1 8XS



0191 477 0033



07498 503 497



info@healthwatchgateshead.co.uk



<https://healthwatchgateshead.co.uk>



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