

# Committee minutes

10 July 2019 – 10am

St Mary's Heritage Centre, Gateshead

## Committee members present

Michael Brown (MB)	Independent (Chair)
Michael Peacock (MP)	Independent
Lynda Cox (LC)	Independent
Esther Ward (EW)	Independent
Shamshad Shah (SS)	Independent

## In attendance

Steph Edusei (SE)	Chief Executive
Felicity Shenton (FS)	Operations Manager
Beth Nichol (BN)	Finance and Administration Officer
Lyndsay Yarde (LY)	Associate

## 1. Welcome and introductions

1.1. MB welcomed FS to Healthwatch Gateshead and there was a round of introductions.

## 2. Apologies for absence

2.1. Apologies were noted for Shamshad Shah.

## 3. Minutes of previous meetings and matters arising

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

### Matters arising:

- 3.2 No update for hot desk as SE has yet to hear back from the council. The monitoring visit action plan has been completed and sent back. SE and FS have met with commissioners who aren't concerned and will be looking to do something next year.
- 4.2 NHS long-term plan work: a report has been published from STP areas. There will be a Gateshead-specific report but unable to share report yet.
- 5.1 Report shared and received well.
- 7.2 Development session will take place in the autumn.
- 9 Annual report submitted and formatted.
- 10.2 Quality accounts in Gateshead didn't happen. Conversation around engagement with NEAS.

## 4. Chair update

4.1. MB stated that SE was interviewed by BBC about the Directors of adult social care (ASC) report. Most of the media interviews that Healthwatch Gateshead receives are radio stations requiring expert opinion. This will be another year with problems

continuing for public health and ASC. There are concerns with highly paid health professionals, predominantly doctors, who work beyond their contracts to do extra procedures and reduce waiting lists which is affecting their tax and pension positions. There is a concern that this may lead to staff withdrawing their services or industrial action.

## **5. Project updates and new priorities**

### **5.1. Lack of funding for adult social care**

SE stated the report has been published and well received. The council's comments were not included as SE sent report to the council, but they did not receive report so could not comment. The council is fine with report, we delayed final publication to allow them to include comments, and it will be presented to the Care, Health and Wellbeing Overview and Scrutiny Committee.

### **5.2. Mental health services**

LY stated the report has been published and sent out to stakeholders. We have received a detailed response from Northumberland, Tyne and Wear Trust (NTW) on what the trust is doing already but not as a consequence of the report. We will be looking to revisit this in December. NTW is, however, looking into the translation tool used on the NEAS website. LY has also attended a Newcastle task and finish group on BAME mental health, recommending that NTW goes into communities rather expecting people to come them, as many people are unsure of what's available. NTW is setting up teams to go into community and groups connecting with the trust. LY has met with Chris Piercy and managed to get an invite to the mental health advisory group where the report went down well.

LY commented that if we were to take this approach for projects in future (commissioning groups with work with communities), we should be more prescriptive about what is required, including the quality of the reports. However, it was noted that this was a useful approach

**Action: LY to respond to the NTW response to find out what has changed as a result of the report.**

### **5.3. New priorities**

#### **Adult social care**

KN is looking at Adult Social Care Direct (ASCD) and a Healthwatch Committee sponsor is needed. This issue was included because we had a lot of series about ASCD including receiving incorrect information, etc. KN received an update from the council to say that it has done some work on the service and the 50% of calls aborted due to response time has now reduced to 3%. The council is receptive to the work and KN has been invited to observe. At the moment, we may look at the service's quality assurance process by using mystery shopping, but this is still in the development phase.

#### **Children and young people mental health**

Rachel Wilkins (RW) is looking at what came out of the Expanding Minds, Improving Lives engagement work as well as evaluating the Kooth and single point of access services. However, Newcastle Gateshead Clinical Commissioning Group (CCG) has decided to do a review on services using a survey. RW has been having conversations with the CCG asking what is being looking at, the response rates and demography of respondents to see if the CCG's work would benefit from an additional, targeted, survey or if we could look at the survey results and then do some follow up work. She

is also looking at the outcomes from Expanding Mind Improving Lives to see what was said and what is being done as a result.

### **Patient Participation Groups (PPG)**

Lyndsay Yarde (LY) is looking at PPGs because GP practice managers and members of PPGs have contacted us to ask for help developing their PPG. Written materials and toolkits are available on several websites to support PPGs. LY is developing a Healthwatch award that PPGs can work towards based around the criteria for PPGs in the GP contract. We are planning on holding a launch event towards end of September and inviting practices to attend: LY has the capacity to support four to eight practices in a pilot. We may also run workshops with PPGs and practices to help with their development. There will be an award event held in around March/April 2020. There will be further discussions at a steering group meeting next Wednesday; Sue Jennings (Gateshead practice manager) and two PPG members will be attending the steering group meeting.

SE met with Phil Kyle from the Academic Health Science Network (ASHN), an NHS organisation looking at bringing health industry together. His remit is patient public involvement (PPI) and the network's aim is to work on developing PPI. Phil is currently mapping all the various PPI groups across the North East and North Cumbria. There is a strong possibility that we will be able to use ASHN resources to help support this project.

## **6. Outreach update**

- 6.1. BN has run 15 events and stalls since taking on the role in May. She has been attending coffee mornings and libraries holding focus groups. We held a stall at Trinity Square which would have been more useful if it wasn't raining and therefore poorly attended.
- 6.2. BN has been focusing on the 'Have you heard about us' survey and there have been 70 responses so far.
- 6.3. BN discussed future work, including working with Comfrey Project, long-term condition organisations, GP practices and young people.
- 6.4. BN has met with all the Champions and they have decided to have six-month reviews. The Research Champions are now holding stalls without staff members present. A new Champion has been recruited who is completing her Masters in social science and she will be trained up as soon as possible. More volunteers would be welcome.
- 6.5 BN asked the Committee if any support could be offered for the events that were emailed round.

**Action: Committee to email Beth if able to support.**

## **7. Chief Executive and Operations Manager updates**

- 7.1 SE discussed the presentation by the Optimising Services Workstream to the Joint Overview and Scrutiny meeting for the Sustainability and Transformation Programme. This will be an interesting area to keep an eye on. NHS England has approved the North East and North Cumbria Integrated Care System (ICS). There were discussions around the progress with the commissioned coordination role and that there is some

pushback from the ICS to having a Healthwatch rep on workstream. Local Healthwatch don't have any involvement at the integrated care partnership (ICP) level.

There was also a discussion around the idea of creating citizen panels and training expert citizens to participate at meeting level.

**Actions: SE to discuss with other HW about workstreams and arranging meeting with HW Chairs.**

- 7.2. Changes locally to CCG, with 20% management cost saving. Mark Adams is now Chief Executive of Newcastle, Gateshead, North Tyneside and Northumberland. There will be further changes at a senior level. In Gateshead, Lynn Wilson, Director of Transformation, is replacing Jane Mulholland's role as lead CCG Director for Gateshead.
- 7.3. Yvonne Ormston is now Chief Executive of Gateshead Health NHS Foundation Trust. Paul Liversidge is currently acting Chief Executive of North East Ambulance Service (NEAS). NEAS usually involves Healthwatch in its recruitment process for Chief Executive.
- 7.4. FS has been meeting people, attending meetings with the NHS and the voluntary and community sector. She met with volunteers and has attending strategic meetings. She commented that Healthwatch Gateshead appears to have a good relationship with the local authority and is seen as a critical friend. FS is happy to continue meeting more people.
- 7.5. FS stated there are interviews this week for a Finance and Administration Officer to provide support. She is currently developing the TUN business plan and this has been completed in draft form, which MB and SE have seen. After further discussions it will share with the Board.

## 8. AOB

- 8.1. FS discussed DBS issues raised by staff and volunteers. She suggested that everyone should have an DBS, including all volunteers.

**Decision: DBS for all Champions and staff.**

**The meeting closed at 12pm.**