

Minutes of the Healthwatch Northumberland Annual General Meeting held on Wednesday 19 October at Northumberland College, Ashington

Attendees:

93 people attended including members of the public, representatives of health and social care providers and commissioners and voluntary and community organisations.

Welcome: David Thompson, Healthwatch Northumberland Chair

David Thompson opened the AGM and welcomed everyone to the STEM Centre at Northumberland College. He explained the agenda for the day and introduced health and social care students from Northumberland College and their course leader Julia Common to talk about their course and career aspirations.

Studying health and social care

A group of students studying health and social care at Northumberland College spoke about their experience of their course and how they hope it will help them get a job in the health and social care sector in the future. Benefits of the course include industry-related careers advice, a specially equipped Health Hub to learn practical skills and work placements. One student has been offered a job in a care home following a successful work experience placement.

Questions for students

Q. What made you go into health and social care?

A. Student Ellie said it was the hands-on life skills that made her want to study health and social care. She hopes to go on to study a mental health nursing degree at university.

Q. What has been the highlight of your course?

A. Ellie said her highlight was getting hands-on experience working in a care home.

David Thompson thanked the students and wished them good luck. He said in what is a difficult time for social care it is good that we have young people wanting to enter the profession.

Annual Meeting: David Thompson, Healthwatch Northumberland Chair

David Thompson thanked current and former board members and volunteers for their contributions and invited questions on last year's minutes. There were no questions about the minutes.

David said he had news to share – three new board members are joining Healthwatch Northumberland. These are Carol Rogan (Northumberland CVA), Dr Jim Brown (Public Health) and Lorna Beech (Independent Complaints Advocacy Northumberland).

David introduced Derry Nugent, Project Coordinator to give a review of Healthwatch Northumberland's work over the last year.

Review of the year: Derry Nugent, Project Coordinator

Derry gave a review of Healthwatch Northumberland's statutory activities over the last year as outlined in the Annual Report which was published in June. Derry spoke about the importance of listening to people's experiences and said Healthwatch Northumberland will always be about Northumberland but we increasingly need to work with others across our borders.

Derry spoke about what it means to be a health and social care 'champion' and the importance of face-to-face engagement. A good example of listening to user experience is Healthwatch Northumberland's work with the Pharmacy Needs Assessment and listening to people in Alnwick about pharmacy opening times.

Derry outlined what Healthwatch Northumberland said it would do over the last year then gave a summary of the work that was completed over the last year including projects around pharmacies, GP access, Home Care and End of Life care.

Derry said a major activity over the next year for Healthwatch Northumberland will be the Annual Conversation in place of a survey. This will focus on groups we don't

hear from as often. Other projects will include hearing from families with autistic children, hearing from families with young children in Blyth about using health services, what young people say about health and care services and good practice in care from Enter and View visits. However other issues will emerge from what Healthwatch Northumberland hears.

Derry said Healthwatch Northumberland continues to encourage NHS England to enact local solutions to the lack of dentistry provision in Berwick. There is no quick fix but we will continue to listen to people's feedback and pass this on to commissioners.

Healthwatch Northumberland will also continue to ensure that the voices of the people of Northumberland are heard by the ICS. Derry thanked Northumberland County Council for its continued support.

Derry welcomed groups and individuals to join in the conversation, invite Healthwatch to groups and sign up to the newsletter.

Questions and comments about the review of the year

Q. I know a lady in charge of social care workers going out to rural communities and she says there are issues with lack of money and lack of staff as many returned to Europe after Brexit. It's about making people working in the social care sector feel valued.

A. Derry agreed that raising the profile and status of care work was vital and that is why Healthwatch Northumberland was keen to hear from Northumberland College students.

Q. I am a social prescriber and we have a support group for fibromyalgia in Berwick. Would you be interested in coming to talk to us?

A. Engagement Officer Helen Brown will be in touch to discuss this.

The future of adult social care services: Neil Bradley, Director of Adult Social Care, Northumberland County Council

David Thompson introduced Neil Bradley, Director of Adult Social Care.

Neil Bradley explained the key responsibilities of adult social care and gave some statistics about the scale of social care in Northumberland. The biggest service demand in Northumberland is home care.

Neil talked about the recent changes in adult social care including the end of partnership working with Northumbria NHS Trust and the aftermath of Covid-19.

Current issues in adult social care include charging reform, the impact of changes in the NHS, budget pressures, workforce issues, the cost of living crisis and tackling inequalities.

Neil spoke about future developments in frontline services with more focus on outcomes for individuals. The focus for the next few years will be to ensure consistent quality, develop use of technology, develop extra care and supported housing options and continue to develop relationships with the NHS and Healthwatch.

David Thompson thanked Neil for his presentation and introduced Rachel Mitcheson.

Integration of services: Rachel Mitcheson, Director of Place and Integrated Services - Northumberland, North East and Cumbria Integrated Care Board

Rachel Mitcheson spoke about change. She said change over time is inevitable and necessary to solve problems. Rachel presented a history of the structure of the NHS from NHS North of Tyne to Clinical Commissioning Groups and now the Integrated Care System.

Rachel explained the Integrated Care System and how the Integrated Care Board and Integrated Care Partnership fit into this structure. She explained some of the challenges inherited from the previous structure.

Rachel presented some figures from primary care services. There are 325,000 patients in Northumberland which equates to 1,500 patients per GP. 1.6M GP appointments were attended last year, two thirds of which were face-to-face. 42.5k appointments were not attended.

What next? Rachel said change will continue to happen but it can be a good thing and help us find solutions to problems.

Following on from the presentations there was a short Q&A session where Derry invited questions for Neil and Rachel.

Questions and comments to speakers

Q. (for Rachel) How do you anticipate the ICB will affect access to dentists and vaccinations?

A. Dentistry is an area the ICB is less familiar with, but it is coming over to the ICB in April. We are currently trying to understand population need and looking at the contract so the ICB may be able to help on a local level.

Vaccination is a challenge as it is not a local service, it is driven by the national team e.g. the national booking line. GPs are operating a different system. My advice is if you want a local appointment then wait and you will be asked, if you are happy to travel then use the national booking system.

Q. (for Rachel) North East and North Cumbria is a big area to cover

A. It is a big area to cover but we are trying to conquer that by breaking it up into smaller 'Places' e.g. Northumberland.

Q. (for Neil) What would you say to recruit people into the health and social care sector?

We hear from carers that they love making a difference in their job and the bond they form with individuals is very rewarding. For young people, the skills learnt in social care can be useful in other careers and they can go into other specialisms. We would love to be able to pay people more but unfortunately the money isn't available to do that currently.

Q. (for Neil) Given the rising costs of gas and electric, relatives of those living in care homes have raised concerns on whether increased costs will impact on care home fees or additional smaller charges for their loved ones.

How are care home providers coping with these increased costs and will the same increased costs impact day care services and their users?

A. We have a statutory responsibility for services to continue and we will tackle issues on an individual basis as organisations have different profit margins and structures. We urge any provider facing difficulties to come and speak to us. Longer term we don't know what will happen – costs could come down again.

Q. (for Neil) There are people who can't leave hospital as there's no place for them to go. Is there any light at the end of the tunnel?

A. The situation in Northumberland does seem to be better than many other areas of the country. At the moment there are normally between 25 to 40 people

with adult social care needs at any point in time awaiting discharge. Many will only be waiting maybe 24 to 48 hours to leave hospital, but some can be stuck longer where the patient requires a complex care package i.e. for challenging behaviour or the patient's family not being happy with the solution.

Q. (for Rachel) In your presentation you mentioned the volume of 'Did Not Attend' appointments in primary care.

One of the key issues we hear from people in Northumberland is around difficulties accessing GP appointments so what can the people in this room and the ICB do reduce this figure and free up much needed availability?

A. People can help by coming to appointments. The ICB has done some engagement work to see what people need from an appointment and is also looking at improving the language around appointments and what services are available to encourage people to attend.

Q. (for Rachel) Does the ICB cover both physical and mental health?

A. Yes it covers both physical and mental health services.

Q. (for Neil) Young people entering health and social care need to be mentored and supported. Do you talk to providers about why people are leaving? Also family carers need support and better communication. There is a lack of day centres to offer support.

A. We do talk to providers about why people are leaving and try to work with them. Northumberland Communities Together is working to bring voluntary services together to offer a range of support services for families in addition to their care package.

Q. (for Neil) You talked about maximising the benefit of your relationship with Healthwatch Northumberland. What do you see could be the biggest benefit to Adult Social Care of this relationship?

A. The biggest benefit is we get warts and all feedback from Healthwatch which is invaluable to Adult Social Care.

Close: David Thompson, Healthwatch Northumberland Chair

David closed the AGM by thanking everyone for attending and he thanked Neil, Rachel and the health and social care students for their presentations. He also

thanked the staff at Northumberland College and Healthwatch Northumberland's staff and volunteers for organising the event.

He invited people with further questions to send them in or leave them in the box on their way out and to keep the dialogue going by sharing feedback about health and social care services.