

Minutes of the Healthwatch Northumberland Board meeting held on 5 December 2023 at Adapt NE, Burn Lane, Hexham

Present: Peter Standfield (PS) Chair, Liz Prudhoe (LP) Adapt NE, Debra Blakey (DB) Carers Northumberland, Denise Robson (DR) Patient Advice and Liaison Service, Sue Taylor (ST) Independent Member, Kevin Higgins (KH) Northumberland County Council, Mike Allport (MA) Independent Member, Gillian Robinson (GR) Independent Member, Jim Brown (JB) Public Health NCC

In attendance: Derry Nugent (DN) Project Coordinator, Lorna Beech (LB) Engagement and Volunteering Officer, Tim Hakim (TH) Engagement and Insight Officer, Laura Haugh (LH) Communication and Marketing Assistant

Apologies: Caroline Rogan (CR) Northumberland CVA

Minutes recorded by: Laura Haugh

| 1. Introduction, apologies and declarations of interest | Action |
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| <p>1.1 The Chair opened the meeting and welcomed everyone.</p> <p>1.2 Apologies noted above.</p> <p>1.3 PS reminded the board of his involvement with four Abbeyfield Societies, which provided residential care and sheltered accommodation for older people on a not-for-profit basis in Newcastle and Northumberland and had now merged into a single charity known as Abbeyfield Northumbria.</p> <p>1.4 No other interests were declared pertinent to items at this meeting.</p> | |
| <p>2. Minutes of last meeting</p> <p>The minutes of 12 September 2023 were agreed as a true record.</p> | |

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| <p>3. Action points</p> <p>3.1 Items 7.5 and 12 to remain as an open action point.</p> <p>3.2 Item 9.8 could now be marked as complete.</p> <p>3.3 Item 10.3 – DN has had a useful discussion with LP regarding the Adult Social Care Advisory Panel resourcing issues. DN feels HWN currently has enough capacity and this work sits within HWN’s contract. She noted that HWN will pay travel expenses and claim these back from the Council.</p> <p>3.4 All other action points were noted as complete.</p> | |
| <p>4. Matters arising</p> <p>There were no matters arising from the minutes.</p> | |
| <p>5. Questions from the public</p> <p>No questions had been received from the public. PS suggested reviewing the promotion of the opportunity for public questions.</p> | <p>DN/CJ to discuss options for promoting public questions opportunity.</p> |
| <p>6. Presentation: Volunteering update</p> <p>6.1 LB gave an overview of HWN’s volunteering activity.</p> <p>6.2 LB talked about some of the volunteers and the activities/projects they had been involved in. Volunteers had helped with engagement support, admin support and research.</p> <p>6.3 Two volunteers had worked on a project to assess GP websites and see how easy it is for people to raise a complaint online. The reasons for this project were 1) patient feedback is important; 2) feedback received by HWN; 3) changes to advocacy services; 4) changes to how complaints are handled from July 2023.</p> <p>6.4 LB said this project involved flexible desk-based work, drawing on different skills and volunteers provided a useful fresh perspective.</p> | |

- 6.5 The volunteers looked at 36 websites using both a laptop and mobile phone. They assessed whether the information on each website was up to date, how easy it was to find the correct information, how many clicks were required to get to the complaints information and what could be improved.
- 6.6 Positive comments about the websites included complaints information being easy to spot on the homepage and patients' confidentiality being assured throughout. Negative comments included some websites not being mobile-friendly and having to download a pdf to complete.
- 6.7 LB shared hard copies of the report with the board which explains the findings of the research. The report includes a template which GP practices can use to easily update their website information. The websites will be reviewed in six months to assess the outcome of the project.
- 6.8 LB thanked all HWN volunteers and welcomed a new young volunteer who will offer community engagement support.
- 6.9 The presentation led to a discussion about the statutory legal obligations for GP practices to provide the correct complaints information. DN said this is an interesting point which will need to be followed up and HWN will look for allies to help launch the findings and recommendations.
- 6.10 MA noted that there needed to be a policy for people who are not online. Members agreed that information needed to be accessible for everyone. DN suggested adding an additional paragraph to the report recommendations reminding practices that complaints information also needs to be available in the waiting room.
- 6.11 GR asked if volunteer time is logged and whether time is recorded in monetary value. LB said volunteer hours are logged but not in monetary value. PS suggested looking at the Heritage Lottery Fund for hourly rates.

LB to add an additional paragraph to report reminding practices that complaints information also needs to be available in the waiting room.

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| <p>6.12 LB said a volunteer recruitment campaign would be launched in January. KH said he was keen to link people up to these volunteering opportunities to help them into employment.</p> <p>6.13 PS asked if HWN tracks how long volunteers stay in their role. DN said this is recorded in yearly monitoring and volunteer catch-ups.</p> | |
| <p>7. Operational, risk and financial update 2023/24</p> <p>DN spoke to the circulated report.</p> <p>7.1 Despite Well Up North pulling out of the FishMish engagement, HWN still has good relationships with the PCN and the Fishermen’s Mission itself. Well Up North is now working with farming communities. HWN is collaborating with HW County Durham and HW Cumberland to discuss the possibility of joint working. GR said work must focus on Northumberland and Kirkley Hall would be the best link to do this.</p> <p>7.2 HWE has been feeding back to local Healthwatch about Annual Reports. There is an emphasis on evidencing change and outcomes for both HWE and local HW.</p> <p>7.3 DN said no recent HWN work had been highlighted in recent HWE reports. As this is a measured KPI, DN has raised this with Gavin McGregor at HWE and asked for more information about this and a meeting to discuss. He said HWN’s recent autism report was included in the HWE blog however the team was not aware of this.</p> <p>7.4 AGM and listening sessions – PS said good feedback had been received about the AGM and listening sessions. The format of the sessions worked well and could potentially be used again. More discussion to follow at the Planning Day in January.</p> <p>7.5 The Board agreed the items currently on the risk register.</p> <p>7.6 Enter and View – JB suggested reviewing the prioritisation of Enter and View as a tool if there is an overwhelming case as he was not seeing the value. DN said it is one of HWN’s statutory duties. Members agreed to go back to the Enter and View policy and decide whether to de-prioritise it for this year. PS suggested revisiting this at the Planning Day.</p> | <p>DN to circulate document from HWE to all members.</p> <p>All members to read the Enter and View policy before the Planning Day.</p> |

8. Board partner organisation updates

8.1 Carers Northumberland

- An outreach programme is providing a drop-in and bookable appointments across the county. Sessions have been held in Blyth, Rothbury and Bellingham with more planned in Amble, Berwick, Belford, Haltwhistle and Allendale.
- A survey specific to carers in Northumberland had been sent out with the latest newsletter with over 30 responses so far. Questions cover breaks for carers, dementia services and a general 'What is the picture?' question. Responses to this question have been mostly negative, especially from parent carers.
- The lack of pre-bookable respite care is still an issue – there has been no further update from Adult Social Care regarding bookable beds.
- A 12-month pilot has been commissioned by Northumberland County Council to provide online carer support. The service is called Mobilise. The Board discussed how this service would support carers without online access and fit in with Carers Northumberland's role.

8.2 North of Tyne Patient Advice and Liaison Service (PALS)

- There has been an issue with patients and visitors smoking outside of Northumbria's hospitals and support is being offered to help people quit.
- Two new PALS officers are now in post creating more capacity. In November there were 150 more concerns dealt with than the same time last year.
- PALS suggests a response time of within two weeks and this has been working well so far.
- A pilot shuttlebus scheme has been launched to transport patients, visitors and staff between North Tyneside and Cramlington, and Cramlington to Wansbeck.

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| <ul style="list-style-type: none"> • LP asked if subsidised transport is still available for visitors if patients are transferred from Hexham to Cramlington. DR will find out and report back. <p>8.3 Northumberland CVA</p> <p>There was no update from Northumberland CVA.</p> <p>8.4 Public Health</p> <p>JB updated on various public health issues:</p> <ul style="list-style-type: none"> • JB said he would share the online national consultation on 'Creating a smokefree generation and tackling youth vaping' and would be grateful if members could complete it. • The Joint Health and Wellbeing Strategy is being refreshed. • The 30% management cost cuts will mean different structures for ICB management. 100 posts will be lost and it looks like Northumberland and North Tyneside will combine as one Place. • Work on a sexual health audit and strategy is in progress. • JB asked members to look out for a Department of Public Health report on Ageing Well. • The Pharmacy Needs Assessment reviews pharmacy services in Northumberland. Due to closures in Blyth there is likely to be a 'gap notice' which will make it easier for new pharmacies to open in Blyth where there is a gap in services. • Corporate peer review will take place in January. • There was a discussion around the geographical challenges of how to group neighbourhoods/areas in Northumberland. | <p>DR to look into subsidised transport for LP.</p> |
| <p>9. Governance issues update</p> <p>9.1 Adapt - HWN operational agreement</p> <p>There were no comments on the HWN operational agreement. Board members accepted the agreement.</p> | |

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| <p>9.2 Quality Plan update</p> <p>There were no comments on the Quality Plan update.</p> <p>9.3 Quality Framework</p> <p>JB suggested that the Quality Framework should not just be about protected characteristics but also wider health inequalities. DN said the template came from HWE and she would feed back these comments.</p> <p>JB said the Academic Health Science Network mentioned on Collaboration 1.2 had changed its name to Health Innovation Network.</p> | <p>DN to feed back to HWE about Quality Framework template.</p> <p>DN to update Academic Health Science Network to Health Innovation Network on Quality Framework.</p> |
| <p>10. Reflections on meeting</p> <p>PS thanked everyone for their contributions. Although some of the discussions had been longer than expected they provided valuable insight.</p> | <p>All to consider and feed back suggestions to PS at any time</p> |
| <p>11. Any other business</p> <p>PS asked members to consider whether it would be beneficial to receive full notes and links from the regional ICB meetings or just a short summary. Members agreed the detailed reports would be useful. PS said he would share these with all members.</p> | <p>PS to share notes from regional meetings with all members.</p> |
| <p>12. Close</p> | |

Date of next meeting – 23 January 2023 (Planning Day)

Dates of meetings for 2023/24

Tuesday 23 January 2024 (Planning Day)
12 March 2024