

healthwatch

Redcar and Cleveland

Healthwatch Redcar & Cleveland Network Discussion June 2013



Introduction

Healthwatch Redcar and Cleveland held its first network discussion week commencing 24th June. During this week, two physical meetings were held, the first at the Old Co-op Building Loftus and the second at Tuned In! Redcar. A Healthwatch awareness session was also held with six Patient Participation Groups (PPGs) from the Normanby and Eston area of Redcar and Cleveland. To accommodate those members who were unable to come along to a physical meeting, a virtual discussion forum was held through the Healthwatch Redcar and Cleveland website on two different occasions during the week.

The agenda and content for both the physical and virtual discussions were identical, giving Healthwatch members the opportunity to comment and share their views on:

- What they expect from Healthwatch Board Members
- How Healthwatch can best engage with the people they know and represent
- What health and social care issues they think the Board should consider as a priority over the next year

A total of 49 people both individual and organisation representatives engaged with Healthwatch Redcar and Cleveland during the first network discussion. All information from the Healthwatch discussion will be compiled and submitted to the Healthwatch Board, once in place.

Summary of discussion

What do you expect from Healthwatch Board Members?

Openness

- Open and inclusive
- Trustworthy and well respected
- Be open and able to justify why and how they have made decisions
- Accessible and able to listen to everyone

Reliability

Credibility

Transparency

Confidence

Varied skills, knowledge and attributes

- Ability to work in partnership
- Passionate and strongly believe in making a difference
- Good leadership
- Advocate on behalf of people
- Peer within the community
- Good communication skills
- Able to develop effective relationships at a strategic level
- Be able to translate information from a local level to a strategic level
- Develop an understanding of health and social care issues
- Independent of politics

Act independently in terms of conflict of interest

Connectivity

- Knowledge of Redcar and Cleveland and an understanding of the issues and barriers people have in all areas of the borough
- Well connected within their community

Representativeness

- Representation from a range of backgrounds such as Black and Minority Ethnic (BME), young people and disabilities
- Demonstrate how they represent people's views
- Strong independent member representing individuals
- Not self interested and understand they're there to represent others

What do you think should be on the work programme for Healthwatch?

<p>Mental Health</p> <ul style="list-style-type: none"> • Patient dignity • Stigma • More advocacy support 	<p>Stopping smoking service- exploring reasons for drop out.</p>	<p>Recognition of the health impacts on people from sexual and domestic violence.</p>	<p>Transport links to services needs to be improved.</p>
		<p>Clarification of Clinical Commissioning Group responsibilities.</p>	<p>More services at Redcar Primary Care Hospital.</p>
			<p>Care homes- Focus on Enter and View programme.</p>
<p>Young people</p> <ul style="list-style-type: none"> • Emotional wellbeing of young People • Transitions- young people into adulthood and those leaving work 		<p>Promotion of the Improved Access to Psychological Therapies (IAPT) service.</p>	<p>Providing adequate services closer to home for those at end of life.</p>
		<p>Access to GPs (more appointments)</p>	<p>GPs not prescribing medicines for more than one month at a time.</p>
<p>Triage to another service when A&E isn't appropriate for people.</p>		<p>Domiciliary care</p>	<p>Make people aware of what services are available for them to access.</p>
		<p>How to embed the prevention agenda.</p>	<p>Consultation on the Friarage Hospital for Paediatrics and the Maternity closure and how it will impact on the services at James Cook Hospital.</p>
<p>Consultation appointments locally rather than at James Cook Hospital.</p>		<p>Promotion of community hospitals.</p>	<p>Reduce the stigma of those who have misused drugs and alcohol and improve opportunities available for them when they are on recovery.</p>
		<p>Support between discharge to home.</p>	
<p>Urgent care</p>	<p>Stroke support</p>	<p>Be aware that some GP practices are now charging for space used by support services.</p>	<p>Criteria for being able to get a parking pass for families visiting patients with a long term condition is hard to achieve.</p>
<p>Patient transport in rural areas.</p>	<p>Do not attend appointments- wasting time and money.</p>	<p>Welfare cuts on people's health and wellbeing.</p>	<p>Look at issues that Healthwatch can actually make a change with- what's the point otherwise?</p>

Assessment of support- People who have a long term condition getting assessed every year for the level of support they are permitted. Same questions asked e.g. someone with cerebral palsy "Can you walk 50 yards?" How much money is spent on unnecessary assessments?

Social housing- People with a disability are allocated 3 bids. A viewing is classed as a bid so if someone views a house 3 times and none are suitable, the person will go to the bottom of the list. If someone does not use a computer, someone else has to bid on their behalf. This has a real impact on the health and wellbeing of the individual.

More understanding and work shops are needed with social workers so they can empathise with people with a disability.

How should the Healthwatch Board prioritise the work programme?

How should the network meet?

Vulnerability

- “Look at what affects vulnerable people most, they are the ones who don’t how to say there are problems and how to help change things”
- “Significant impact for smaller number”
- “Vulnerable over mass”
- “Prioritise by vulnerability”

Be cautious following HWB and CCG objectives

Same aims as CCG and HWB

Utilise research and look at national issues

Variety of meetings

The Board should decide

Various times and locations across Redcar and Cleveland

Ensure no duplication

Be flexible

Urgent issues

Hold themed meetings to discuss specific topics

Mass Look at the number of people the issue affects

Look at where the biggest gaps in services are

The Board should decide

Be mindful some issues are specific to one area but can have an impact on a few people

An overarching approach can sometimes tackle more than one issue at a time

Consider time restraints and feasibility of achieving an outcome

All members do not need to be involved with every

Meet regularly to keep people interested

How should Healthwatch engage with the people you know or represent?



Closing comments from the discussion

We need more time to discuss topics at the next network meeting

Can we have more information about how Healthwatch members and Board members will be accountable?

Board members should have to demonstrate how they meaningfully represent people

Have both local organisation representation and larger organisations that may cover across Tees

How is impact measured in service design?

Small groups and interactive nature of the meeting was very positive

Who will be on the panel for appointing the board?

Use a different venue- Loftus

The most significant role Healthwatch can play in improving the general level of healthcare across the area is in giving the service user/ patient a voice in the design of services

The transition from LINK to Healthwatch needs to have a definite end point and starting point for Healthwatch. There should be no automatic continuation from LINK to Healthwatch

How can we involve more working people?

Show people the online health options

Online is important

It is important that Healthwatch is able to represent lesbian gay bisexual & trans (LGBT) and people with the other protected characteristics effectively. Many of these hidden groups find it difficult and problematic to get good service from NHS organisations for fear of prejudice and discrimination

The work plan is the most important element of the discussion- we need to allocate more time to this

Qualitative data is more important than 'meaningless statistics'

Next steps

All the information from the network discussion will be compiled and submitted to the Healthwatch Board including methods of engagement, work programme suggestions and how the network should meet. The information gathered around what people want from Board members will be considered by the panel when interviewing candidates for the Board.

Responses to questions asked throughout the network discussion will be answered and published on the Healthwatch website www.healthwatchredcarandcleveland.co.uk

Contact

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