

Healthwatch South Tees Partnership Board Meeting

Minutes of the meeting held on Wednesday 29 September 2020 Virtual - Zoom

Present: Partnership Board Members:	Paul Crawshaw - Chair (PC) Dr Ian Holtby - Vice Chair (IH) Harsh Argawal (HA) Andrea Latheron-Cassule (ALC) Lesley Spaven (LS)	
In attendance:	Jen Olver - Guest (JO) Lisa Bosomworth (LB) Toni McHale – Guest (TMc)	
		Action
1.	Apologies for absence Mike Milen (MM) Mel Metcalf (MMe) Locardia Chidanyika (LC)	LB to contact LC to ensure attendance at next meeting
2.	Declaration of interests None	
3.	Welcome potential new Board members and introductions <ul style="list-style-type: none"> • TMc – PCP representative • JO – potential new Board member. Introduction of role at JCUH and lead of Patient Experience. • Potential new Board member who has sent apologies, LC, represents Women Today North East. 	
4.	Minutes of the last meeting held on 11th March 2020 <ul style="list-style-type: none"> • Agreed as an accurate record. 	
5.	Matters arising from previous meeting (action log) – circulated <ul style="list-style-type: none"> • Update on the outcomes of the JCUH Audiology Department Enter & View – while HWST haven't been able to visit the department and speak to patients about impact of changes, due to current circumstances, LB has received update from Peter 	

	<p>Craggy via email – recommendation of screens in waiting area have been put in place.</p> <ul style="list-style-type: none"> • Analysis of the Young People & Mental Health report is being used by The North East Commissioning Support team in their CCG applications for funding to support young people and their mental health. • LB now attending Health and Wellbeing Board and Executive, as IH has other engagements at moment. 	
<p>6.</p>	<p>PCP Update</p> <p>TMc introduction:</p> <ul style="list-style-type: none"> • Thank you to MVDA and RCVDA for help and co-operation in handover of contract, especially in circumstances of lockdown and with equipment. • Accommodation update: HWST was due to move into Live Well Centre, Middlesbrough and RCVDA, Redcar. This hasn't been possible due to COVID-19 restrictions. Currently there are no plans to get back to offices until April next year. PCP has notified the building manager about potential options for future plans. • LB and TMc in discussions about budget and savings made from office accommodation. Working to ensure staff have everything to work from home safely and can communicate with the public, e.g. desk risers, and licenses for online platforms and tools e.g. Mentimeter. • Teams installed on all PCP laptops. All staff members have PCP laptops and phones. • PCP have contract for several HW in this region, enabling joint work, support for teams, and upskilling, e.g. around communication plans. Each HW will continue to remain independent. • Working with Philip Kyle, Academic Health Science Network (AHSN), around virtual GP appointments. HWST research data has fed into regional level. <p>Discussion: 'HWST Board' or 'Partnership Board' – is this inherited?</p>	<p>TMc to circulate findings from Philip Kyle meeting about people's experiences of GP</p>

	<ul style="list-style-type: none"> • PC - Explanation of link to each local authority commissioning HW, 'partnership' of Middlesbrough, and Redcar and Cleveland. 'Relaxed' to call it HW Board. • HA - 'Good to get in line' with other HW under PCP. <p>It was agreed that we will now refer to this meeting as the Board and new governance being developed will reflect this.</p> <p>Discussion: Paperwork to Board</p> <ul style="list-style-type: none"> • HA - Prefers the way it is currently, as gives the time to go through it all at once. • PC - Better to get bundle all together so things don't get lost. • LS – Happy with level of information give; information is what we need to know as Board members. Trusts Lisa's judgement. <p>Comments:</p> <p>IH, through role in Track and Trace, has heard about people's difficulties in contacting General Practices during lockdown – is this something HW, locally or generally, want to look at?</p> <p>Discussion took place around the relationship between GPs and the patient, during these times and the increase of virtual appointments.</p> <p>LB raised awareness that HWST Lockdown Report responses and I&S enquiries show that GP access is becoming a concern, e.g. virtual appointments and access to triage system.</p> <p>Discussion around the role of HWST – to give recommendations on virtual appointments, to raise awareness of the GP process in current times for public, and to make GPs aware of patient issues to consider.</p>	<p>HWST team to pull out key themes from research data and I&S to steer workplan and update Board at next meeting of direction around GP access</p>
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<p>7.</p>	<p>Feedback from each member – changes to service delivery and community intelligence</p> <p>LB explained how HWST don't currently have eyes and ears within the community, so team is dependent upon established networks and relationships for community feedback.</p> <p>Board members requested to share any local intelligence they have been picking up which could feed into HWST.</p> <ul style="list-style-type: none"> • ALC – Working at a national level for the Department for Education, has seen additional grants being made for children's wellbeing. In other areas of the UK there is data clearly showing the impact of lockdown on children's mental health. • HA – Raised awareness of the impact of COVID and lockdown for international students at Teesside University. Distressing time during initial two months of lockdown; struggling with funds and asking for groceries, losing jobs in hospitality sector, didn't have money and couldn't get funds from home. Charity asked for donations and collected around £11,000 and had deals with local supermarkets, helping around 350 students (largely Asian community). • JO – Detailed overview of PALS - quiet when COVID first started, giving the opportunity to catch up on complaints. Surge in complaints and queries about rescheduled appointments. Rise in COVID patients resulted in restricted visiting following NHS guidelines, and using technology to maintain contact between patients and families. Patient surveys, patient stories, and restricted visitors surveys. Found that many people liked the allotted times in comparison to open visiting, and findings will be taken forward for future learning. • LS – VCS representation; organisations are struggling with finances as funding streams and 	<p>ALC to share information with LB relating to the health and wellbeing of children and LB to circulate relevant materials</p> <p>JO to share findings from patient survey</p>
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	<p>criteria are COVID orientated, meaning it is difficult to identify what funding will support them. Predictions of shrinking. Many organisations have suspended work for volunteers, or volunteers are in 'vulnerable' and 'shielding' groups. New organisations in response to COVID, coming to MVDA for support to get charity status.</p> <ul style="list-style-type: none"> • IH – Raised awareness of people with low incomes and zero hour contracts who are voluntarily put into isolation and have to apply for statutory sick pay. If this is not sufficient then they have to apply for universal credit. Many continue working. 	
<p>8.</p>	<p>Community Champions update</p> <p>LB raised awareness that Community Champions is the main way of how HWST are collecting community intelligence at present.</p> <ul style="list-style-type: none"> • HWST are recruiting members of the public and/or people who are linked to frontline delivery services. • Seven new Champions have been recruited from a number of different backgrounds and organisations. • Currently developing a track analysis document to look at which communities / localities are not being represented. Targeted pieces of work are planned to fill identified gaps. <p>Discussion: LB suggested linking Board Members' updates to Community Champions intelligence and requested members to feed into HWST whenever collecting community intelligence so that LB can discuss with Board where relevant.</p> <p>Ideas to link Board members with Community Champions:</p> <ul style="list-style-type: none"> • PC, as Chair, to attend virtual coffee morning to formalise link? 	<p>Board to share with LB any relevant community intelligence they are picking up.</p> <p>LB to inform PC of next virtual meeting.</p>

	<ul style="list-style-type: none"> Board members to work with proactive Community Champions and have joint session – build on locality focus groups to feed into Board? <p>Comments:</p> <p>TMc explained how locality focus groups are part of the PCP contract to have local intelligence come from each local authority.</p> <p>PC confirmed he is happy to attend one of the virtual events.</p> <p>LB detailed another opportunity to build on Community Champions through connection with Richie Andrews, Public Health - Once the Health and Wellbeing Network group is set up, as organisations become part of the network, they must identify and provide HWST with a Community Champion as part of process.</p>	<p>HWST team to develop a joint session/workshop</p>
<p>9.</p>	<p>Programme management report – circulated</p> <p>No comments raised from Board members.</p>	
<p>10.</p>	<p>Any members feedback to note from documents shared</p> <p>No comments raised from Board members.</p>	
<p>11.</p>	<p>HWST STAR Awards</p> <p>Discussion: How to celebrate STAR Awards in Lockdown?</p> <ul style="list-style-type: none"> Online event with virtual time slots for categories? Emails and phone calls to alert winners and produce dedicated STAR Awards e-bulletin and run social media campaign throughout week? <p>Comments:</p>	<p>HWST team planning and LB to keep Board updated.</p>

	<p>HA – Can we wait couple months to do it physically? LB – Annual event, so would clash with next year’s event and nominations.</p> <p>ALC – Virtual events take a lot of organisation. COVID nominations will overtake next year’s awards – difficulty matching in “going above and beyond”.</p> <p>LS – Nominees and nominators been left in limbo during this time. 2020 STAR Awards need to go ahead. 2020 winners can be invited to present next year’s winners and be celebrated in an awards ceremony in 2021.</p> <p>LB suggested an extra category to be introduced next year to recognise people going above and beyond throughout COVID / Lockdown.</p>	
<p>12.</p>	<p>Any Other Business</p> <p>None raised.</p> <p>Discussion: JO becoming Board member through formal recruitment process.</p> <ul style="list-style-type: none"> • JO been very proactive in working with HWST – as part of Patient Experience, regularly challenges the Trust. <p>Comments: Board in agreement that JO would be useful member with her background and role.</p>	<p>LB to go through formal recruitment process with JO.</p> <p>LB to talk to LC and representatives from Age UK and Youth Focus North East and keep Board updated on recruitment status.</p>
<p>13.</p>	<p>Date and time of next meeting 14.12.20 Virtual</p>	