

Joint Meeting of HWST Board and Community Champions

Thursday 18 March 2021 via Teams

Present:

Board	Community Champions
Paul Crawshaw (Chair) Ian Holtby (Vice Chair) Jen Olver Andrea Latheron-Cassule Kevin Franks Lesley Spaven	Anya Deputat Ellie Lowther Rachel Gault Carole Marshall Jan Donnelly Caroline Nakachwa Jane Harvey Sarah James Katie Cramphorn
HWST Staff	PCP
Lisa Bosomworth Sarah Corrigan Gill Durdan Linda Sergeant Chris Adamson	Toni McHale

Purpose:

The purpose of this meeting was to influence the direction of future work, highlighting priority areas and suggesting actions for HWST to fulfil during 2021-2022.

A virtual joint Board meeting, attended by members of the HWST Board and some of our Community Champions, was held to discuss topics identified from the recent analysis of our GP's, Treatments & Wellbeing survey.

The group split into two locality areas, to discuss proposed solutions in relation to the issues raised of GP access and increasing poor mental health, representing the views and experiences of the communities they reach and support.

The suggestions discussed from this meeting have been collated into a separate Action Planning document below. Relevant and achievable actions are to be included in our priorities and workplan for 2021-2022 through the production of a Theory of Change outcomes based approach.

The final document has been shared with all Board members and Community Champions for accuracy and to identify their potential involvement and awareness in order to support these actions.

Action Planning - Joint HWST Board & Champions meeting 18.03.2021

(Additions need to be made to reflect intelligence received from alternative sources e.g. I&S, partnerships and reports etc)

Access to GP's

Problem	Solution	HWST Actions	External Recommendations
Accessibility			
<p>People find it hard to access GP appointments.</p> <p>Options that reduce barriers for those patients who find it difficult to book GP appointments through a generalised single point system - not one size fits all.</p> <p>Cultural complications surrounding access to GPs for trans people is an issue. I.e. transphobia</p> <p>Waiting on a list to be seen by your GP can have a negative impact on mental health. The only answer may be to provide more services or GP access in order to</p>	<p>Could more support to those with impairments and disabilities, especially when accessing on own, e.g. help to guide in new layout of surgeries as adapted to COVID, call out system for appointments and guidance to room?</p> <p>Could there be more ways for people to access GP appointments other than via a phone?</p>	<p>Raise awareness of accessibility issues linked to the Accessible Information Standards (AIS) (01.08.2016) - reasonable adjustments:</p> <ul style="list-style-type: none"> • text service? • What support is offered for a visiting visually impaired patient? Any changes to this practice since layout in surgery has had to changed due to COVID? <p>Collect experiences of local people who have received reasonable adjustments to share stories/case studies - reduce fear/share examples/reduce barriers/share good practice.</p> <p>Research and explore possible alternative solutions, with surgeries and patients, for booking appointments in different GP surgeries:</p> <ul style="list-style-type: none"> • separate number for older age range? • alternative for digitally excluded deaf community? 	<p>Encourage better use of 'out of hours' appointments.</p> <p>Link recommendations for accessibility to AIS</p> <p>Share case studies to encourage change and good practice/examples.</p> <p>Make recommendations based on research of alternative solutions.</p>

<p>avoid this. However this may not be possible.</p>		<p>How do GP surgeries utilise NHS app for booking appointments? - link sent to submit symptoms.</p> <p>Better understanding of the logistics of booking an appointment from a GP surgery perspective.</p> <p>Better understand the role of 'Care Navigator' - promote TVCCG - training for receptionists to raise awareness of the needs of carers and to highlight identification/better understanding).</p> <p>Highlight this with relevant body (TVCCG/LMC).</p> <p>Better communication to inform where a patient is in the queue when telephoning for an appointment.</p>	<p>Influence what is required from this role - including the negative impact on mental health dependant on what health issue is -</p> <p>Highlight feedback we receive where carers needs aren't being met.</p> <p>Possible promotion of this work.</p> <p>Recommend improvements</p> <p>Include in HWST recommendations</p>
	<p>Could the role of volunteers, e.g. GP Ambassadors support this work? It's already working well with the queuing system for pharmacies and to help in the roll out of vaccinations</p> <p>Volunteers work extremely well in the Trust in helping those</p>	<p>Explore how this role has helped pharmacies and vaccination centres in order to potentially build on this and expand into GP surgeries.</p> <p>Explore the production of an alternative options sheet for seeking health care before seeing your GP - pharmacist, 111, trauma centre etc - CCG?</p>	<p>Suggest/encourage how this role can support GP surgeries based on the evidence and information gleaned from our exploration of this role.</p> <p>Share produced information/leaflet to professionals, organisations, groups and the public.</p>

	<p>with impairments and are currently benefitting pharmacies - could be rolled out to help in other facilities.</p> <p>Could volunteers, including Patient Participation Groups, support GP surgeries by promoting, encouraging and also offering support in installing and setting up the app so that more people use it.</p>		
<p>Some young people have issues accessing GPs because they are afraid to tell people what's going on with them. Normalising things like autism on social media or on posters/marketing, may ease their worries and enable them to come forward.</p>	<p>Maybe simple signposting isn't done enough?</p>	<p>Feed community intelligence into relevant forums</p> <p>Consider/explore working with local young people/ youth providers to produce simple images/messages to reduce anxiety of visiting their GP and raising awareness of existing support for health needs e.g. what a school nurse can offer, pharmacies, STD testing to your home.</p>	<p>Raise awareness and share images/messages and information</p>
<p>VCS</p>			
	<p>Can the VCS do anything to take the pressure off the GPs and health professionals, e.g. signposting and stewardship roles?</p>	<p>Share the contribution from HWST in the development of the TEWV MH Community Framework Model with Board and Champions and identify potential areas of support.</p>	

NHS App

The NHS app can be quite overwhelming to set up and this may put people off from installing it

The NHS app should be promoted more widely for the general public to use - while this is not suitable for everyone, if more of the general public were aware of it and used it, then this would reduce the pressure on the telephone booking system for those who only have this option.

Ideas included:

- Quick guide on how to install and set up the app, e.g. what you will need for process: passport.
- Videos on how to set up guide and how to use.
- HWST Campaign - raise awareness of the app and how it can be used and what it can do.
- Clarify difference between this app and COVID-19 app.
- HWST staff members to trial downloading and registration following the videos to highlight any 'sticking points' and inform how we promote to local people.
- Request that Champions get one of their community members to also repeat above action and feedback experience to inform promotional approach/messages.
- Promote the use of this app with honesty and benefits.
- Promote through Pharmacy network.
- Explore if AGE UK 'digital explorers' could support older people to access this app.

Encourage receptions staff of health and care services to let people know of the NHS App.

Promotion and awareness raising of this content.

If people were supported in doing this initial step, then it is easy to use after this and can offer multiple functions which would save both professional and patient time, e.g. email GPs, book appointments, order prescriptions.

Volunteers, including Patient Participation Groups, could support GP surgeries by promoting, encouraging and also offering support in installing and setting up the app so that more people use it.

How can we increase awareness of mental health and wellbeing support services and community groups to local people?

Problem	Solution	HWST Actions	External Recommendations
Awareness of services			
<p>More people needing mental health support but not knowing where to go and not being told of alternative support when having to wait for services</p>	<p>Raise awareness of services and community groups that people can access to support their wellbeing and mental health. Particularly focussing on activities such as calm crafts and how creative crafts can have a positive impact on people's wellbeing.</p>	<p>Promote mental health services and local activities.</p> <p>Highlight the need to promote community groups with service providers when initially engaging with people/patients and assessing need.</p> <p>Encourage commissioners to monitor this happens with the services they commission.</p> <p>Explore how the new South Tees Health & Wellbeing Network can support this approach.</p>	<p>Alternative support options need to be shared during initial contact, especially if there is a waiting list.</p>
	<p>All feedback received highlights the need for the public and professionals to be able to access mental health and wellbeing information (from high level support, to grassroot community groups), via a single platform. Campaigns - simple messaging for members of the public to understand the range of services that are available for different levels of support and</p>	<p>Explore the potential to connect relevant stakeholders (HEA, TEWV, H&WB Network) to identify if there is an existing platform that can be developed and better utilised.</p>	<p>Gain feedback, interest and potential alternatives with external stakeholders</p>

	<p>consider;</p> <ul style="list-style-type: none"> • Accessibility: e.g. text only, online, face to face, telephone, virtual. Not everyone is comfortable admitting they need help / talking to people on the phone, especially strangers and especially about mental health concerns; • Raise awareness of the steps required to access support, as uncertainty can further increase anxiety and worry about asking for help, e.g. what questions will be asked and what to anticipate. 	<ul style="list-style-type: none"> • Promote and encourage health and care providers to use this resource. • Share and promote with local people and utilise the South Tees Health & Wellbeing Network. 	<p>External stakeholders to explore options collectively</p>
<p>Young People (health inequalities)</p>			
<p>There is very little intervention to ensure mental health services are delivering great things on a consistent basis. This needs to change.</p>	<p>There needs to be earlier intervention and quicker responses to young people's mental health. Stigma can be taken away by talking to students at a very young age and providing them with the solutions needed - should they ever need to reach out.</p> <p>There needs to be more 'joining up' of services in the area to avoid duplication of services...as this can only confuse matters.</p> <p>The 'powers that be' need to invest more into early intervention services. School curriculum needs changing to incorporate mental health for example. Until we do this, we'll always see issues.</p>	<p>Feed community intelligence into relevant forums</p> <p>Consider/explore working with local young people/ youth providers to produce simple images/messages to raise awareness of existing support for health needs e.g. what a school nurse can offer, pharmacies, STD testing to your home.</p>	<p>Promote and raise awareness of HWST actions with relevant partners, services and commissioners including those highlighted important by young people</p>

	<p>Research or evidence gathering with student researchers could generate powerful ideas, but its also not about re-inventing the wheel, as there are examples we can take from current research and apply it to new practices.</p>		
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Ethnic Minority Communities (health inequalities)			
<p>Many black and ethnic minority groups are isolated in their own communities at the moment, and they wonder how this might change. There aren't enough services reaching out to help these groups.</p>		<p>Build on initial intelligence received to gain further insight and understanding of the experiences of these diverse communities.</p> <p>Through established and new relationships with key professionals, groups and partnerships address ways to further engage with relevant local people to identify key issues for these communities based on their experiences and understanding of mental health services.</p> <p>Produce relevant actions from engagement opportunities and link to relevant key decision makers and service deliverers.</p>	<p>Encourage relevant key decision makers and service deliverers to consider recommendations made.</p>

The use of collaborative groups from all walks of life can remove stigma. Larger events which incorporate Ethnic Minorities, LGBTQ, disabilities, older groups and younger groups, can develop relationships and 'normalise' any issues people have from different walks of life. A lot of mental health issues derive from bullying or pigeon-holing, so this approach may help to educate and remove stigmas.

- **Maybe this can be used as an approach to a large event once restrictions are lifted to welcome back HWST with a focus on mental health (Share & Care).**
- **Speakers from different communities talk about good or bad experiences that helped them.**
- **Services can have stalls/speaks about how they can support those in attendance.**
- **Encourage Community Champions and new networks to engage.**