

Healthwatch South Tees Partnership Board Meeting

Minutes of the meeting held on Thursday 11 October 2018 in the
MVDA Board Room at St. Mary's Centre, Middlesbrough

<p>Partnership Board Members Present: Harsh Argawal (HA) Paul Crawshaw (PC) Ian Holtby (IH) Andrea Latheron-Cassule (AL) Mel Metcalfe (MMe) <i>(part-only)</i> Mike Milen (MMi) Lesley Spaven (LS) Wade Tovey (WT) Orianna Wilcock (OW)</p> <p>In attendance: Natasha Judge (NJ), Dev't & Delivery Manager</p>	<p>Apologies: Lisa Brett (LB), Organisational Dev't. Consultant</p>
	Action
<p>1. Welcome and introductions PC welcomed everyone to the first meeting of the Healthwatch South Tees Partnership Board.</p> <p>An overview of the way local Healthwatch structures have evolved since established in 2013/14 was provided. Introductions were made.</p>	
<p>2. Declarations of interest None declared.</p>	
<p>3. Governance HW South Tees Partnership Board - Terms of Reference (ToR) The draft terms of reference were presented for approval, which outlined the HWST vision, purpose, approach, tactics, roles and responsibilities and governance. It described the role of the Partnership Board, values, membership, meetings, reports and reference to the Code of Conduct (which was also circulated for comment).</p> <p>It was agreed that all members of the Partnership Board will review the ToR and Code of Conduct, providing comments to NJ by 19.10.2018.</p> <p><i>Further discussion took place with regards to the wider governance arrangements associated with Healthwatch South Tees:</i></p> <p>A question was raised as to who decides who has a seat on the Leadership and Delivery group, who is the Chair of HWST and who is the representative attending the Live Well South Tees Board? It was noted that the constitutional arrangements were determined</p>	ALL

	<p>through the contractual arrangements that govern Healthwatch South Tees, which included the transitional arrangements from the previous model to the current one. As part of this, a Leadership and Delivery Group was established to ensure consistency and to ensure alignment between the different aspects of the HWST operating model. Membership of the Leadership and Delivery is the former chairs of Healthwatch Middlesbrough (PC) and Healthwatch Redcar & Cleveland (IH) together with the CEOs of MVDA (Mark Davis) and RCVDA (MMi) and the HWST Development and Delivery Manager (NJ). Through the Leadership and Delivery Group, it was determined that PC chair the HWST Partnership Board and IH will represent local Healthwatch on the Joint Health and Wellbeing Board and Executive for South Tees.</p> <p>It was noted that PC is currently a member of the Council of Governors at South Tees Hospitals NHS Foundation Trust and NJ attended the last meeting on his behalf. PC reported that local Healthwatch has an appointed seat and although the time commitment is significant, sees this as a key representative role. PC has discussed HWST representation at the Council of Governors when he is unavailable and proposed that a representative from HWST be identified to attend when required. It was agreed that Mark Davis and MMi to discuss in the first instance.</p> <p>It was noted that a review of the current interim decision-making policy will be undertaken imminently.</p> <p>It was suggested that a summary of who the representatives are and their roles would be useful, together with establishing links between the Partnership Board and other strategic forums.</p> <p>The discussion continued with regards to the process to determine HWST priorities and associated issues:</p> <p>It was recognised that HWST has a role in ‘leading the way’ with regards to engagement and gathering meaningful information. It was proposed that a suite of questionnaires be compiled to encompass varying demographic areas and for these to be developed in collaboration with partners and stakeholders.</p> <p>It was reiterated that HWST needs to ensure independence and impartiality, while supporting collaborative working.</p> <p>NJ informed the Partnership Board that in terms of local people and their engagement with HWST, feedback is provided in a variety of ways - including through summary reports, social media and Healthwatch websites etc.</p>	<p>MD/MMi</p> <p>NJ</p> <p>NJ</p>
<p>4.</p>	<p>Programme Management Report</p> <p>NJ talked through the Programme Management Report, focusing on several key areas:</p> <p>4.1. Staffing Following the recent changes in the team, Sarah Corrigan and Jake Graham have joined us over the last few weeks.</p> <p>4.2. Current work plan and engagement activities:</p>	

<p>4.2.1. Dementia We have produced a report about people’s experiences of living with dementia in Redcar & Cleveland. HWST (staff and two volunteers) are now trained Dementia Champions and have delivered three sessions across the South Tees area.</p> <p>A discussion followed about the way in which information is collated, which includes: engagement with local community groups, the provision of drop-in sessions, the production and circulation of information and signposting, representation at local multi-agency partnership and forum meetings.</p> <p>It was noted that a challenge for HWST is the breadth of health and social care priorities and services, together with the associated demands and expectations of external stakeholders on local Healthwatch, which significantly outweighs the reality based on the funding provided.</p> <p>It was agreed that this work plan item would be reviewed on an ongoing basis.</p>	<p>NJ/ALL</p>
<p>4.2.2. Care Homes We have worked with Middlesbrough Council to conduct Enter & Views at local care homes to determine the suitability of the environment for people living with dementia. This is based on a tool that is being implemented locally from Sterling University. The first Enter & View visit is complete, and the findings will be published after a 20-day response is received.</p> <p>This area of work was identified as being an opportunity for HWST volunteers to take this work forward with care homes across the South Tees. It would provide service users with the opportunity to speak to someone independently, raise awareness of local Healthwatch, identify other groups to capture further feedback from local people/service users, family and friends etc.</p> <p>A discussion followed about the additionality that could be achieved by HWST undertaking this work. It was agreed, based on the above points, that HWST would continue with the rollout of this work and review as required.</p>	<p>NJ/ALL</p>
<p>4.2.3. Mental Health A HWST engagement survey in late 2017 identified mental health as a priority for local people. Subsequent information has been received regarding people’s experiences of mental health, including for example: issues in accessing services, waiting times and crisis intervention. Other local work has reinforced these issues, such as the Middlesbrough Community Conversations.</p>	

<p>Mental health is currently a national priority, though it was suggested it might be worth waiting for the publication of the NHS 10-year plan before determining next steps for HWST.</p> <p>It was agreed that questions around mental health will be embedded into future consultation activities.</p>	<p>NJ</p>
<p>4.2.4. HWST Roadshow</p> <p>It is proposed that we will focus on the rollout of a HWST roadshow with a presence in generic places, for example shopping centres, to engage with a wider audience. This will provide an opportunity to reach people who may not engage directly with services and to help us determine barriers. Agreed to progress.</p>	<p>NJ</p> <p>JG</p>
<p>4.2.5. Young people’s panel</p> <p>It was noted that Jake Graham (HWST Strategic Development and Communications Officer) is to progress this area of work, which will result in proposals being considered by the Partnership Board in the future and establishing mechanisms to link with young people in a variety of ways. We will also capture learning from other similar models.</p>	
<p>4.2.6. Communication and Intelligence Group</p> <p>It is recognised that there is a need to continually gather information from various organisations and representatives and one way of addressing this has been the proposal to introduce a Communication and Intelligence Group, however existing capacity does not allow for the intensive contact required to continually visit groups and organisations. It was therefore agreed by the Partnership Board to postpone this approach in favour of other priorities.</p>	
<p>4.2.7. Hearing loss</p> <p>We have conducted a piece of work with Middlesbrough Deaf Centre, gathering feedback on issues raised by those living with hearing loss and the impact of accessing health and social care services. Issues as we understand it based on feedback:</p> <ul style="list-style-type: none"> • Accessibility standards not being rolled out • Interpreters not being available at GP practices • Patients names being shouted in the waiting areas of James Cook University Hospital for their appointments and interpreters not being available. 	<p>NJ</p>
<p>It was agreed that an Enter & View be carried out at the James Cook University Hospital Audiology Department to gather additional feedback from service users and staff at the point of service delivery.</p>	

	<p>In addition, it was suggested that Healthwatch visit local funded providers in terms of hearing aids to see what is happening and capture people’s views.</p> <p>4.2.8. Life experiences of people with learning disabilities We have been undertaking a piece of work to look at people’s experiences of people with learning disabilities in the context of reduced funding, changes to services and indication of gaps in service provision. Craig Duerden (MVDA) has been undertaking this work on behalf of HWST and the report is currently being finalised.</p> <p>4.2.9. Other:</p> <ul style="list-style-type: none"> • Carole Marshall, HWST Community Engagement and Development Officer is leading on volunteer engagement strategy, working with other stakeholders. • HWST is working with other local Healthwatch programmes in terms of the Sustainability and Transformation Partnership (STP). It was agreed that Alan Foster, STP Lead, be invited to attend a future meeting of the Partnership Board. • HWST is working closely with the Independent Complaints and Advocacy (ICA) Service to ensure any issues and trends are identified. An agreement is in place to share data. • Regular meetings take place with various other local stakeholders, including South Tees Hospitals NHS Foundation Trust, NHS South Tees Clinical Commissioning Group, Tees Esk and Wear Valleys NHS Foundation Trust and various groups associated with local government Overview and Scrutiny. Discussion from these meetings support HWST with collaborative working. • It has been agreed that the South Tees Health and Wellbeing Executive will receive HWST reports going forward, which will include an overview of what has happened to date, planned next steps, any actions that need to be addressed and/or escalated to the Health and Wellbeing Board. 	<p>CD</p> <p>NJ</p>
<p>5.</p>	<p>Partnership Board Development Session: draft notes and development plan Lisa Brett, Organisational Development Consultant, facilitated the Partnership Development session and produced the notes that were previously circulated. Following discussion, it was agreed NJ arrange for Lisa Brett to attend the next meeting of the Partnership Board to allow for a detailed discussion on this item to take place.</p> <p>WT to email NJ with his thoughts on what is missing from the report shared at today’s meeting.</p>	<p>NJ</p> <p>WT</p>
<p>6.</p>	<p>Healthwatch South tees Future Priorities - overview of intelligence and current health and social care priorities</p>	

	<p>A briefing note providing an overview of the current local and national priorities of the local health and social care landscape was shared with the intention of this providing the context for discussion in determining HWST priorities.</p> <p>It was agreed that:</p> <ul style="list-style-type: none"> A) NJ will develop and circulate a draft Communications Strategy to the Partnership Board; and B) The Healthwatch South Tees Staff Team will propose items for consideration as part of the workplan going forward, based on intelligence gathered to date, including discussions from today’s meeting. 	<p>NJ</p> <p>NJ</p>
<p>7.</p>	<p>Any Other Business</p> <p>7.1. The Partnership Board were introduced to Sarah Corrigan and Jake Graham and welcomed to the team.</p> <p>7.2. It was agreed that all Partnership Board members would send their biographies to NJ by 18.10.2018 for inclusion on the websites. Photographs were taken at the meeting.</p>	
<p>8.</p>	<p>Forward planning</p> <p>It was noted that the following items would be included on the Forward Work Plan for the Partnership Board:</p> <ul style="list-style-type: none"> • A revised decision-making policy to reflect the establishment of the HWST Partnership Board • Partnership Board Skills Audit • Stakeholder mapping • SWOT analysis • Enter & View Strategy and training session • Volunteer strategy and associated workplan • Annual event 	
<p>9.</p>	<p>Date of next meeting</p> <p>Wednesday 28 November 2018, 10am-12noon at The Palace Hub, Esplanade, TS10 3AE</p>	