

Healthwatch Sunderland (HWS) Advisory Board
Minutes of the meeting held Thursday, 23 January 2025
Millfield Medical Practice, Sunderland

Attendance – Advisory Board members

Debbie Burnicle	DB	Chair
Paul Weddle	PW	Vice Chair
Gavin Barr	GB	
Chris Colley	CC	
Pauline Scott	PS	
Emma Anderson	AA	Co-optee
Joanne White	JW	Co-optee
Julie Parker-Walton	JPW	Co-optee

Attendance – Healthwatch Sunderland staff

Anna Gillingham	AG	Project Lead
Vicki Cavanagh	VC	Engagement Lead
Wendy Hadlington	WH	Engagement Officer
Natalie Goodwin	NG	Engagement Officer
Clare Render	CR	Administrator (Minute Taker)

		Action
1	Apologies & introductions Apologies were received from Ismaaeel Rashid. DB introduced Vicki Cavanagh, Engagement Lead, and Natalie Goodwin, Engagement Officer.	
2	Declarations of interest/quoracy There were no declarations of interest, and the Chair noted the meeting was quorate.	
3	Minutes of the previous meeting The minutes were agreed as a true record.	

	Action
<p>3.1 Access to Primary Care, patient perspective – DB reported that the Director of Public Health (DPH) noted the Public Health response will be the overall response that the Health & Care Alliance will be providing. The group have looked at the report and suggested a couple of actions however, it was noted that W Thompson, the Primary Care Lead in the Integrated Care Board (ICB), will be collating a fuller response which was due to be presented at the January Place Committee. This has now been delayed to the Place Committee meeting in February. AG said the report had been discussed at the Health & Wellbeing Scrutiny Committee meeting in December. Also owing in part to the findings from our research, the go-ahead has been given to provide a health bus to target areas and groups around the city to tackle those with the greatest health inequalities.</p>	DB
<p>3.5 MP, Lewis Atkinson – AG reported that she hasn't had any further response from Lewis Atkinson. AG to contact Lewis Atkinson again in 2 months.</p>	AG
<p>3.6 Dementia patients and their carers in Sunderland Royal Hospital Emergency Department – PS asked if the video was available on YouTube. JW reported that the video will be shown in a couple of weeks at their Board Meeting, and she will check if this can be shared with the Team after this meeting. WH asked if a shorter version of the video has been produced to enable us to share it on socials. JW replied she would clarify this with the Comms. Team. JW also noted the patient story videos are shared with staff as part of the staff regular newsletter and with the Board, but currently are not on the Trust intranet, and noted she would raise the potential for this with the Trust.</p>	JW
<p>3.7 Body shaming survey – AG to send our report to Wendy Mitchell in public health.</p>	AG
<p>3.8 GP Collective Action – PW briefed the group on the latest position. Most GP practices are now in the second wave which is 25 patient appointments per day and around half of GP practices are also in the third wave which is reducing shared care situations. However, further funding had been offered locally, and discussions were currently taking place about the difference this may or may not make.</p>	

	Action
<p>4 Finance</p> <p>AG went through the quarter 3 finance figures (Sept 24 – Dec 24) for HWS. The quarter 3 finance update paper was circulated to the Board before the meeting. Everything is on target with the forecast. It was reiterated that the surplus current and planned is already committed to funding the current staffing structure over the length of the current contract with the local authority.</p>	
<p>5 Safeguarding</p> <p>AG reported that no safeguarding issues were raised in the last few months.</p>	
<p>6 Stats update</p> <p>The Board discussed the trends data summary for Quarter 3. A copy of which was sent to the group before the meeting.</p> <ul style="list-style-type: none"> GP services – a feedback session was held in a GP practice following negative feedback, particularly regarding some reception staff, no response has been received from the Practice Manager following our engagement. WH to contact the Practice Manager again to request progress made on the feedback received. PW also offered peer practice manager support if the follow-up email did not lead to a response. 	WH
<p>7 Team/work plan update</p> <p>The team update/work plan paper was circulated to the Board before the meeting. The Board was given the opportunity to ask questions relating to the update.</p> <p>7.1 Social care services, where to go for what – our survey is on our website and published on our socials. So far, we have received 45 responses. We have booked engagement sessions with various groups so hopefully we will achieve our target of 100 completed surveys. The deadline for the survey is 14th March 2025.</p>	

	Action
<p>7.2 GP website evaluations – PW reported that he has received the evaluation of his GP practice's website and has returned his support of the proposal with a few slight changes. DB queried the issue of variable use of e-consult was also addressed as part of the work, and AG noted it was, e.g. text was provided to enable each practice to be clear about what level of online consult it was offering.</p> <p>7.3 Northeast Ambulance Services (NEAS) – the team took part in workshops to determine what people's experiences and expectations of NEAS services were. The full report was awaited from VONNE, who are compiling the report, however, when asked about the flavour of any local response, WH reported that people were very appreciative of the service and the staff but waiting times for an ambulance was an issue. NG reported that there were also a couple of issues around patient transport and communication.</p>	
<p>8 Healthwatch new model</p> <p>DB briefed the group on the latest information regarding the new model for Healthwatch. Healthwatch England (HWE) is looking to become the commissioner for local Healthwatch to address the financial sustainability and variability of services.</p> <p>The work is on hold now because of the national Penny Dash review into the operational effectiveness of quality and safety organisations including the Care Quality Commission and Healthwatch has been incorporated into that review. The expectation is when that report comes out the model will indicate the future commissioning model Healthwatch will adopt. However, it was also noted if any change was approved, HWE recognised there would need to be a long transition period.</p>	
<p>9 Development session update/action plan</p> <p>AG updated the group on the development session that was held in December 2024.</p> <p>The development session looked at the principal values that local Healthwatch must have that underpin the work that we do, e.g. equity, independence, truth, collaboration, and impact. The aim was then to self-assess our Healthwatch against these values and look at where we were doing well and where we might improve. As a result of that session, an action plan has been produced. A copy of the action plan was circulated to the Board before the meeting.</p>	

	Action
<p>DB asked if reference to the development session could be included in the title of the action plan to help others and remind ourselves what the action plan was intended to respond to.</p> <p>After a discussion, it was thought that for every piece of work we undertake we should identify who the key people are in the relevant organisation and identify both a senior-executive and project level sponsor. It was also noted that a number of the actions were already ongoing.</p>	AG
<p>10 HWS Advisory Board governance review</p> <p>The Healthwatch Sunderland Advisory Board governance is up for review. A copy of the governance was sent to the Board before the meeting.</p> <p>Presently no Board member shall serve more than two consecutive three-year terms. The development session last year focussed on strengthening the Board, one of the actions agreed was to change this aspect of the governance in support of strengthening the Board for the longer term.</p> <p>After a discussion, it was agreed to change this to continuous service, subject to a three-yearly review with the Chair and HWS Manager (which would include seeking views from Board members). Continuous service will be assumed unless Board members declare that they do not wish to stay on the Board. Board members resigning will not need to serve a notice period. AG/DB to amend the governance policy.</p> <p>Paul Weddle, Gavin Barr, and Chris Colley's second three-year terms come to an end this year. Paul, Gavin, and Chris confirmed that they wished to remain on the HWS Advisory Board after their second terms come to an end. The Board agreed to this subject to any concerns raised outside the meeting with the Chair or Manager - if none received the terms would continue as per the amended governance policy agreed earlier.</p>	<p>DB / AG</p> <p>ALL</p>

	Action
DB reported that Philip Foster is interested in becoming a Board member. Philip is now retired from All Together Better Sunderland and was due to attend today's meeting as an observer before deciding if he wished to join the Board. However, due to personal circumstances, he cannot attend today's meeting but will hopefully attend the next meeting. The Board were asked for their support in line with the governance framework. The Board were supportive of Philip becoming a Board member if he wished to do so.	
11 NHS 10-year plan consultation <p>The NHS 10-year Health Plan is part of the government's health mission to build a health service fit for the future.</p> <p>AG reported all the local Healthwatch have been asked to deliver a workshop and ours will take place on Thursday, 30th January 13:30 pm to 15:30 pm at the Bede Tower, Sunderland, and Board members/volunteers are invited to attend.</p>	
12 Any other business <p>12.1 North East and North Cumbria (NENC) Healthwatch conference – a conference is to take place to showcase the impact we have made regionally/locally across the 14 NENC Healthwatch.</p> <p>This will take place on Monday, 31st March 2025 10:00 till 15:00 at the Royal Station Hotel, Newcastle. AG to send information about the conference to Board members.</p> <p>12.2 Informal Advisory Board meeting – our next Informal Advisory Board meeting will take place, on Monday, 17th March 2025, from 10:30, am to 11:30 am via Teams. CR to send calendar invitations to Board members.</p>	 AG CR
13 Date and time of next meeting <p>The next meeting will be held Thursday, 24th April 2025, from 10:00 am to noon, Millfield Medical Practice, 63-83 Hylton Road, Sunderland, SR4 7AF.</p>	