Healthwatch Sunderland (HWS) Executive Board Minutes of the meeting held Thursday, 3 August 2023 St Luke's Terrace, Sunderland

Attendance - Executive Board members

Debbie Burnicle	DB	Chair
Emma Anderson	EA	
Gavin Barr	GB	
Chris Colley	CC	
Pauline Scott	PS	
Paul Weddle	PW	

Attendance – Healthwatch Sunderland staff

Tara Johnson	TJ	Project Lead
Anna Gillingham	AG	Engagement Coordinator
Gemma Wilkinson-Rush	GWR	Research & Information Officer
Wendy Hadlington	WH	Engagement Officer
Natalie Goodwin	NG	Engagement Officer
Clare Render	CR	Administrator (Minute Taker)

Attendance - other attendees

Amber Clark AC Sunderland People First (support for Gavin Barr)

			Action
1	Apo	logies & introductions	
		apologies were received. DB introduced Emma Anderson who ttending the meeting today as a new Board member.	
2	Dec	larations of interest/quoracy	
		re were no declarations of interest, and the Chair noted the eting was quorate.	
3	Min		
	The minutes of the meeting were agreed as a true record.		
	3.1	Dental stats – all feedback we have has been shared with the Integrated Care Board (ICB) as part of the national piece of work they are involved with, therefore there is no need to contact the Dental Association at this moment.	

		Action
	DB took this issue up with Scot Watson, Director of Place for ICB. Scot is aware of the issues and has put us in touch with Pauline Fletcher in the ICB to discuss this issue further. Our feedback and our response we give to members of the public was given to Pauline and she has agreed that this is an appropriate response. She has sent us some stakeholder information which has been circulated to the Board.	
	The ICB has produced a report on the pressures of dental services and their initial recovery plan/first steps to deal with this issue across the whole region. This report can be found on the ICB website.	
	The Healthwatch Network have agreed with the ICB to prioritise two areas. One is the ICB public involvement strategy and the other is dentistry – details of the ask of each H/W are awaited.	
4	Safeguarding	
	We have received two safeguarding issues. TM & WH briefed these to the Board. These have been taken up with the Safeguarding Team. TM to check with Pioneering Care Partnership (PCP) what their abusive client policy is.	тм
5	Data stats update	
	The trends paper was circulated to the Board prior to the meeting. GWR went through the data with the Board. This paper is only a snapshot of what data the HWS office receives. If any Board member would like this data in greater detail to let the office know.	
	GWR noted at the last meeting, members had asked for a summary of key points and less details hence the latest version. DB noted the team had also previously flagged the change in Healthwatch data collection systems would temporarily affect the format of the reports.	
	CC had looked at some of the previous reported and drafted and shared some ideas for future reports which prompted further discussion.	

			Action
		t reports the Board would like was discussed. Initial gestions that future reports could include are:	GWR
	•	Six months' worth of data for comparison purposes.	
	•	Percentages in figure and graph format.	
	•	An overview summary sheet of key points.	
	•	further suggestions on how the Board would like this data to presented to be passed to the HWS team.	ALL
6	Tea	m update/engagement stats update	
	mee	team update paper was circulated to the Board prior to the sting. The Board were given the opportunity to ask questions ting to the update.	
	6.1	Youthwatch – PW asked about the Youthwatch survey he received recently as he was unclear about how this should be completed. AG reported that we are working with masters' students from Northumbria University to devise a marketing plan for our Youthwatch and to find out how many people are aware of Youthwatch. The students have devised the survey themselves. As a result, it needs to be completed from the perspective of contact with young people.	
	6.2	GP Access – we have been asked to engage with people who do not access primary care services to find out what is preventing them from doing so and if there is anything that would overcome these problems.	
	6.3	Hospital Discharge Report – our report has now been published. PS asked if there was anything in this report in relation to NEAS. AG reported that patient transport is mentioned in relation to the discharge lounge but nothing about the ambulance service.	
		Now that our report is published the Board need to decide how they wish to monitor what improvements the Trust has said they would take. Following discussion, the overall sense from the Board was that more clarity was needed from the Trust about next steps, in particular clear timeframes. DB to write to the Trust.	DB

			Action
	6.4	Medication labelling – The HWS team briefed the group on our accessible information piece of work. This is following feedback we have received regarding medication labelling for people with sight loss. We have been made aware that some medication labels have covered over information provided in braille which makes it a struggle for people with sight loss issues to understand their medications and dosage instructions. Also, we have found that people are not aware that they can request their medication labelling in different formats.	
	6.4	Hospital care – AG briefed on our hospital care work. Following the completion of our engagement work in the Royal Hospital outpatient's department we have asked if we can go onto hospital wards. The areas we are looking at are:	
		The older person improvement collaborative (TOPIC).Nutrition and Hydration.	
7	Wor	k plan 23-24	
	A copy of the work plan for 2023/2024 was circulated to the Board prior to the group.		
	•	Accessible Information (Priority 3 agreed with Board) – this isn't on the work plan yet as no timescales have been set for this piece of work.	
	•	Maternity evaluation – we have been approached by Maternity Services to look at why people were going to Sunderland more than they were going to South Tyneside. However as South Tyneside midwifery lead unit is not operational yet there is nothing to evaluate but we have left this on our work plan.	
	•	Dentistry – at our Board development session, we agreed a watching brief be kept on this and it may need to be added to the work plan for 24/25.	
8	Oral	health and care review	
	next	ICB has agreed to do an overall review of Oral Health over the few years. A copy of the paper outlining this review was ulated to the Board prior to this meeting for their information.	

		Action
9	Policies for sign-off	
	The policies for Board approval were circulated to the Board prior to the meeting. The Expenses & Finance Policy was circulated to the Board and agreed prior to this meeting. The remaining policies to be agreed are:	
	Complaints policyEnter & view policy	
	After a brief discussion the Board agreed these policies.	
10	Date and time of next meeting	
	The next meeting will be held Thursday, 26 th October 2023, 10am-12 noon, venue to be advised.	