## Healthwatch Sunderland (HWS) Executive Board Minutes of the virtual meeting held via Zoom Monday, 14 September 2020

## **Attendance - Executive Board Members**

John Dean	JD	Chair
Paul Weddle	PW	
Gavin Barr	GB	
Amanda Brown	AB	
Andrew Carton	AC	
Chris Colley	CC	
Liz Highmore	LH	

## Attendance - Healthwatch Staff

Anna Gillingham AG Engagement Co-ordinator Wendy Hadlington WH Engagement Officer

## Attendance - Other

Andy Fox AF Supporting Gavin Barr

Debbie Burnicle DB Attending as a member of the public

			Action
1	Apologies & introductions		
	Apol	ogies were received from Mick Butler and Susan Pinder.	
2	2 Declarations of interest		
	No d	eclarations of interest were made.	
3	New	vice chair	
	John announced the appointment of Paul Weddle as the new Vice Chair.		
4	4 Minutes of previous meeting		
	The minutes of the meeting were agreed as a true record.		
	4.1	Domiciliary Care - this has been raised with Graham King. He has promised he will reiterate the correct use of Personal Protective Equipment (PPE).	
		Liz reported that she is still seeing instances of domiciliary carers incorrectly using PPE. John to raise this at the next Outbreak Control Board meeting.	JD

			Action
5	Safeguarding		
	Anna reported that no safeguarding issues were raised in the last two months.		
6	Exte	rnal board meetings attended	
	6.1	Public Involvement Committee - these meetings are starting up again and will be held virtually on a bi-monthly basis. This to be added to the meetings list.	HWS staff
	6.2	Integrated Assurance Committee - John briefed the group on the last meeting he attended.	
		A report on the extent of patient and public engagement carried out by the Clinical Commissioning Group (CCG) was given at this meeting by Debbie Cornell.	
		An external contractor has been appointed to conduct online focus groups.	
		Liz raised concerns about only online consultations being held as this excludes a lot of people. It was reported that paper copies of the survey are available and a leaflet was distributed around the city publicising it and how members of the public could get hold of the survey.	
		Liz replied that there are some complex living areas around the city that do not get leaflets and again raised concerns that a lot of people would not get the opportunity to be involved in this consultation.	
		Items discussed was the finance position, the setting up of a flu prevention board, and performance implications as a result of COVID-19.	
		This committee was a temporary committee because it was hard for the others to meet however plans are being looked at to re-establish some of the normal committees, ie the Quality & Safety Committee, Primary Care Committee and the Public Involvement Committee.	
	6.3	Best Start in Life - Chris reported that the next meeting is to be held on the $22^{\text{nd}}$ September via Teams and she will be endeavouring to attend.	

			Action
7	Team Update		
	Anna briefed the group on the new items in the team update. A copy of the team update paper was sent to the group.		
	The layout has changed slightly. Some of the items that are not being looked at currently due to the COVID-19 pandemic have been removed. If anyone has any questions on any of the items contact the HWS office.		
	7.1	COVID-19 survey reports - our reports have now been published and we have shared our findings with various service providers. We have asked for them to let us know what improvement actions they have taken or changes that have been made following our survey reports.	
		We have received some unofficial responses, one of which was quite negative, but to date we have not received any official responses.	
		After a discussion it was agreed Anna should contact the provider who gave the negative response to ascertain if this if an official response.	AG
		John will draft an email to be sent to the other providers who have not responded requesting an official response.	JD
	7.2	Engagement - it has been a challenge to come up with ways of engagement during the COVID-19 pandemic. We have started to arrange meetings virtually and join any virtual 'get together' that we are informed about. We are looking at producing an engagement plan in terms of who we are going to approach. One idea is to recruit volunteers who would work within their own community and we have already approached the BAME community.	
	If anyone has any ideas/suggestions pass them on to the HWS office.		
	7.3	Statistics/Website/Newsletters - a lot of work has been put into producing our social media statistics, all of which have risen.	
		We are reviewing the content on our website and trying to make the information as accessible as possible. Once these changes have been made we will ask our volunteers to review the pages.	
		We are also sending out our newsletters more frequently but they are shorter in length. This is working really well.	

		Action
8	Digital accelerator - digital GP appointment	
	John briefed the group on the last meeting he attended. Copy of his feedback from the meeting was sent to the Board.	
	The Board's aim is to determine the patients who will be able to use digital consultations and determine the benefits for GPs and practices.	
	John has suggested that district nurses could assist with digital consultations for homebound, frail and elderly people and this is being considered.	
9	Outbreak Control Board	
	John briefed the group on the latest meeting he attended. Copy of his feedback from the meeting was sent to the Board.	
	When supported by sufficient evidence this Board has the powers to take the necessary actions to manage the spread of COVID-19.	
	Instances have been reported of people inappropriately turning up at COVID-19 test centres. Sunderland is the 6 <sup>th</sup> highest in England for the number of COVID-19 infections. This is a worse rate than Birmingham had when it went into lockdown.	
	Unannounced visits are regularly being made to pubs, clubs and events to ensure current rules are being adhered to. It has been decided to stop all events and further enforcement action is also being considered.	
	The number of COVID-19 infections in care homes is rising which is a great concern.	
10	0 Any other business	
	10.1 Flu vaccine - the question around how members of the public who are home bound are going to get their flu vaccine was discussed. It was reported that the district nursing service will be undertaking this role.	
	10.2 Issues of concern - Liz raised some issues of concern that have been brought to her attention by members of the public. One is the shortage of a certain size of epilepsy medication, another is someone had to wait several months for a scan after having their first seizure and another issue is what are the local policies for pregnant women when they come to the hospital to deliver their baby, ie are they allowed to have a birthing partner.	

		Action
	With regards to the local policy for birthing partners, it was reported that although currently there are visiting restrictions at the Sunderland Royal Hospital women can still have a birthing partner with them during delivery.	
	With regards to the scan issue, it was reported that the hospital is trying to work through their waiting lists so hopefully we should start seeing an improvement. However if we go back into a lock down situation the position will change again. It was suggested that people should contact their GP if they have any queries.	
	Anna replied that it would be easier if Liz could obtain contact information for anyone who passes on their concerns to her so that the HWS team to get in touch with them personally in order to gather all the information needed.	LH
10.3	Virtual annual health checks - Andy Fox reported that there are some GP practices holding annual health checks virtually. This is a concern. How much information can you get out of a virtual appointment, particularly with vulnerable people who have underlying health issues? This was not why they were originally set up. It was to have face to face conversations with patients to reassure them and to cover all the criteria within the Cardiff Health Check template.	
	There are however some GP practices who are sending out easy read information inviting their patients for their annual health check face to face. There seems to be an inconsistency around approaches that GP practices have made.	
	Paul reported that guidance was sent to all GPs about two months ago from the Learning Disability Team at the CCG advising them to send letters to all their patients on the learning disability register and arrange their annual reviews virtually. Some practices followed the CCG guidance and some didn't.	
	His practice followed this guidance but following patient reviews it was decided to go back to holding annual reviews face to face. Virtual appointments or whatever method of appointment that best suits the patient can be organised if the patient feels more comfortable.	
	This has been fed back to the Learning Disability Team in the CCG.	

			Action
		Andy Fox reported that it is important that organisations provide information in an accessible format. If information is provided in a timely way it would support people.	
	10.4	Assistive technology for patients with sight loss - we have received information from a gentleman regarding his work in raising the level of awareness and understanding of assistive technology for the visually impaired.	
		This information will be sent to the Board for their opinion. It will also be shared with the Health & Wellbeing Board and the CCG.	AG / JD
11	Date of	next meeting	
	The next meeting will be held:		
	Date: 9	hth November 2020	
		2.00:4.00pm to be confirmed	