Healthwatch North Tyneside - Minutes of Board Meeting

Date and time: Monday 14 July 2025, 18:00 – 20:00

Venue: Healthwatch North Tyneside Office, Wallsend Community Hub and Library, 16 The Forum, Wallsend, NE28 8JR

Present: Chair - Carol Nevison (CN), Jackie Doughty (JD), Bea Groves-McDaniel (BGM), Paula McCormack, Paul McKelvie (PM), Paul Greenway (PG), David Slater (DS), Lindsay Yarde (LY)

In attendance: Paul Jones (PJ), Tracey Hindmarch (TH)

Apologies: Maxine Ulrick Houston (MHo)

Agenda item 1. Welcome, introductions and apologies

CN welcomed all in attendance to the meeting and announced that we would be using Plaud AI for note taking during the meeting.

MuH sent apologies

Agenda item 2. Declarations of Interest

No new declarations of interest were raised

For each item, the Board considered any equalities, Health and Safety and safeguarding issues arising and considered these as part of their decision-making.

Agenda item 3. Minutes from the previous meeting

The minutes from the previous meetings were reviewed page by page:

- The draft annual report was reviewed and finalised.

- JD is to review the pharmacy report, which she has taken away to complete.
- The strategic planning update remains on the agenda, with a subgroup now established to look at the website (PB and BGM).
- Subgroups agreed at the last meeting are still in progress, particularly regarding research.
- Transgender training session has been organised for September.

The minutes were approved as an accurate record.

Agenda Item 4: Chair and Director updates – presented by PJ

- The ICB (Integrated Care Board) restructure has not yet been formally announced, though proposals have been seen. Staff consultation and redundancy processes are expected to launch within the next week, with implementation before Christmas. The ICB is required to implement savings of 32% of their running costs by the end of December, which will result in significant staff reductions and internal consultations.

- The CQC (Care Quality Commission) inspection report for social care has been released after at least a year and a half. The service narrowly achieved a "good" rating, with several areas identified for improvement, especially in carers and safeguarding.

- The scrutiny committee will meet on Thursday, where a 10-minute update on the HWNT annual report and project plans will be presented. The new chair prefers to avoid long-term strategic discussions at this stage.

- All Quality Accounts have now been submitted.

- There is a planned change in the footprint of the PCN supply, specifically involving Northumbria Primary Care GP practices

moving from the North Shields and Whitley Bay PCN areas to the Northumbria Primary Care PCN in Northumberland. The rationale and impact on neighbourhood healthcare arrangements remain unclear, and questions have been raised without satisfactory answers. The change involves practices previously merged and now being moved between PCNs, a process previously attempted but not implemented.

- An ICB meeting discussed the rollout of continuity of care across primary care GP practices, based on a four-year project with significant investment and research input from Newcastle University. The origins of this project trace back to earlier HWNT GP access work during COVID.

- The latest GP patient survey results have been published online, providing a resource for further analysis.

- Healthwatch England published the GP choice report, which included three quotes from interviews carried out by HWNT and highlighted interesting methodological approaches, though findings were largely as expected.

- Northumbria Trust have completed their annual patient and stakeholder engagement work, interviewing 1,000 people and triangulating findings with the annual survey.

- New A&E data shows that NSEC is ranked as the 13th best hospital in the country for ambulance arrivals and response times. The RVI hospital is ranked lower on the same table. The data is collected by the NHS and is available quarterly, though not always in a directly comparable format.

- The government has launched a public consultation on the new dentist contract; details are not yet reviewed, but promotion for

public input is planned. The ICB will launch its dentistry strategy at the end of August, though its influence is limited. The strategy is based on previous work by the group.

- A recent Health and Wellbeing Board meeting included a well-received presentation on pharmacy needs, making complex information more accessible.

Scheduling for Business and People Groups

There is a need to confirm dates for both business and people group meetings due to busy schedules and previous failed attempts.

- Business group meeting scheduled for 11th August, 6:00–8:00 pm.
- People group meeting scheduled for 13th August, 1:30–3:30 pm.
- Details and locations to be confirmed and circulated.
- The business group will address funding and risk management, while the people group will focus on progressing multiple policies and supporting staff through ongoing changes.

Agenda item 5: Escalations and Considerations

- One formal safeguarding referral has been submitted to the council.
- No new escalations or issues were reported regarding GDPR, health and safety, or equalities.

Agenda item 6: Annual Report

The annual report was published at the end of June, fulfilling statutory obligations.

The report is considered well-presented and comprehensive, though there is a need for a new selection of photographs for use in future reports.

The format may change in the future, but current requirements have been met.

Agenda item 7: Carers report

The first draft of the carers report was presented and highlights significant gaps in statutory duties, particularly in identifying, informing, and connecting carers to support. Key points include:

- Many carers remain unrecognised by services, with 25% reporting that nobody knows they are carers.
- Older carers are especially disconnected from available services, and criteria for accessing specialised support (e.g., Admiral Nurses) are restrictive.
- The report is data-heavy, allowing for detailed analysis by carer type (e.g., dementia, learning disability, partner vs. child carers).
- Financial challenges differ by age group, with pensioners less affected due to different benefits.
- Recommendations from the report will form the basis of the Carers Partnership Board delivery plan for the next two years.
- The council has seen the data and expressed concern about the findings.
- There is a need to refine recommendations and circulate them to stakeholders within the week.
- The report underscores the importance of recognising health inequalities beyond early life, especially for carers with multiple health conditions.
- Carers' rights and access to information remain insufficiently addressed by current services and contracts.
- Voluntary sector contracts are limited, often requiring additional grant or lottery funding to meet carers' needs.

Agenda item 8: Ambitions and workplan 2025/26

A new project tracking workbook and accompanying presentation have been developed and shared with the council. This is the first comprehensive completion for the new year, and feedback is requested on its usefulness.

- The group discussed the use of a new budget table and reporting template, which is required for each project and must be completed online for five years.
- Although there was some dislike for the budget table, the structure was appreciated for providing a high-level overview and making it easier to track progress.
- The format allows for quick identification of areas needing attention, particularly those marked as "red" activities.
- The risk register will be integrated into the next phase of work.
- There was mention of reporting on sickness levels, with further discussion planned within the people group to determine appropriate measures.

Project Updates

Cancer awareness grants fund

- The grant fund has now gone live, with one application received and more expected, though the volume is not anticipated to be overwhelming due to the niche nature of the work.

Sexual Health, Continence, and End of Life Projects

- Key contacts within the trust have been established, which will help define project scopes and facilitate engagement with service users.
- Initial outreach has been successful, with prompt responses from contacts.

10-Year Plan

- The scope and direction of the 10-year plan remain undefined and will be revisited in future discussions.

Safeguarding

- Safeguarding is becoming increasingly important, with concerns that the current system does not adequately represent all age groups, especially older people.
- Carers are sometimes wrongly treated as perpetrators in safeguarding cases, with insufficient support for their emotional wellbeing.
- There is an intention to learn from these issues and help shape future safeguarding systems.

Focused Engagement and Evidence Gathering

The team is planning targeted engagement with groups that are underrepresented in current evidence, including those affected by long-term health conditions and children and young people.

- There is an evidence bank based on feedback received so far, but more focused engagement is needed to fill gaps.
- A new group has been set up to coordinate this work, but significant effort is still required to reach different cohorts.
- Funding for Covid-related services has largely ended, contributing to the winding down of support services and exacerbating health inequalities.

Children and Young People Engagement

The group discussed the need for a broad engagement initiative with children and young people to build a stronger evidence base.

- Current understanding is limited, with most engagement happening through individuals already connected to services.
- Stakeholders, including the council, acknowledge that engagement has been limited to a small group of "usual suspects."
- The plan is to conduct general engagement through schools and sports clubs to reach a wider and more representative group.

- Feedback methods will be kept simple and accessible, recognising that young people are unlikely to complete lengthy surveys.
- Mental health and anxiety are expected to be prominent issues, with differences noted in how boys and girls discuss and seek support for these challenges.

Youth Engagement and Research Approaches

The group discussed historical and current models for involving young people in decision-making, referencing the former "children's and people's plan" which included input from young people on health and social care, and broader priorities.

- Previously, young people participated in commissioning teams and provider interviews, but such structures have since been discontinued.
- There was reflection on the loss of these frameworks and the value they brought to service planning.
- Recent initiatives include training sixth formers as researchers who then engage with year seven students to gather insights on their experiences.
- The importance of triangulating data from students, parents, and staff was emphasised to build a comprehensive evidence base.
- The council is interested in expanding this approach borough-wide to identify both expected and unexpected findings.
- The group highlighted the need for young people to help design research questions and surveys, ensuring relevance and accessibility.
- There was agreement that involving young people in research design could become a formalised service offering, potentially extending to adults as well.

Agenda item 9: Finance update and delivery

A finance update was provided, with TH handling most of the figures and JD verifying them.

Organisational Updates and Staffing

Informal interviews have been conducted for a new part-time role (21 hours per week, with flexibility for additional work as needed) where two strong candidates were identified.
The position is intended as a temporary measure until end of March 2026, to support the organisation through a period of change. It will be reviewed thereafter, by which time there is expected to be greater clarity regarding the organisations future direction. The board agreed to offer the role imminently, pending references and standard checks, with a view to starting as soon as possible.
Maddy McMahon - volunteer, was acknowledged for her significant contributions supporting with administrative tasks.

Year end Accounts

The accounts audit is expected to be completed soon with no significant queries being raised by the accountant, and the audit process has been described as straightforward.

Agenda item 10: Any other business

1. DS raised his concerns about the significant gap in long-term support for people with long Covid and other post-viral conditions.
    - Specialist support has diminished, with the last available service closing in March.
    - The NHS is perceived as inadequately addressing these issues, often misclassifying them or failing to provide ongoing support.

- There is a lack of recognition and referral for long Covid, with some GPs reluctant to discuss or record it.

The group discussed the need for scoping work to better understand and address these gaps. It was noted that post-viral syndromes are broader than just Covid, affecting around five percent of people after various viral illnesses.

2. BGM shared her recent election as Women and Marginalised Genders Officer for the Independent Workers' Union of Great Britain (IWGB), which focuses on supporting precarious, part-time, and short-term contract workers.

3. The group discussed potential venues for the next meeting, considering venues throughout the borough including various community centres and churches.
   The next meeting is scheduled **for Monday 8 September 6pm – 8pm**. There was consensus to try new venues and ensure accessibility.

Agreed Actions and timescales

- JD to review the pharmacy report (in progress; report taken away for completion).
- PJ to Share the link to the new A&E performance data online.
- PJ circulate the Healthwatch England GP choice report to the group.
- TH to circulate meeting details and locations for business and people group sessions.
- PJ to Refine and distribute recommendations from the carers report to stakeholders within the week.

- PJ to email the workbook and project tracking documents to all members for feedback.
- People Group to discuss and determine appropriate sickness level measures within the people group.
- PJ to send the PowerPoint presentation to attendees.

- TH to confirm and book the venue for the next meeting.