

Healthwatch Hampshire Advisory Board Meeting

Date: 10th December 2024

Venue: Pavilion on the Park, 1 Kingfisher Rd, Eastleigh SO50 9LH

Attended:

Healthwatch Hampshire Advisory Board: Liz Butterfield (LB), Brian Collin (BC), Jonathan

Chambers (JC), Jackie Orchard (JO)

Apologies from: nil

Healthwatch Hampshire: Siobhain McCurrach (SM) – HW Area Director, Hampshire

Portsmouth, Kate Knowlton (KK) – HWH Manager

Guests: Jonny Smith (**JS**) Deputy Director, Urgent & Emergency Care HIOW Integrated Care Board, Isobel Wroe (IW) Director of Reconfiguration and Strategic Change HIOW Integrated Care Board.

1. Welcome, Introductions Declarations of Interest

Healthwatch Chairperson LB

LB asked the HWH Advisory Board members to introduce themselves.

- Liz Butterfield (LB)
- Brian Collin (BC)
- Jonathan Chambers (JC)
- Jackie Orchard (JO)

LB then asked HWH staff to introduce themselves.

- Siobhain McCurrach (SM) Healthwatch Area Director
- Kate Knowlton (KK) arrived late so no introduction.

LB asked the Advisory Board for any Declarations of Interest for the meeting. None were recorded.

2. Minutes from Previous Meeting

- **LB** asked for any changes to draft minutes from previous meeting, and an action was decided for people's initials to be in bold so it is easier to spot
- LB reflected on the previous meeting and mentioned that there had been a guest speaker Dr Karl Graham who provided valuable insights. Useful connection, he is signed up to monthly bulletins
- It was suggested that meetings might need to be longer, particularly when guest speakers or presentations are involved.

Action: HWH to arrange for 2 1/2 hr Advisory Board meetings in future

3. Discussion on Strategic Planning and Healthwatch Involvement



- Discussed Quality Framework internal review process set of quality markers
 Healthwatch England would like local Healthwatch to achieve SM provided an
 intro for AB members to read and give thoughts. ACTION complete it by early Jan
 – multiple choice (digital version will be emailed)
- **SM** says that HCC have congratulated us on immense progress over the past year and that they are very pleased with activities and outcomes so far
- **SM** showed everyone the workplan on the Excel spreadsheet that is provided to HCC, has multiple sections internal, engagement activity, project work etc. Identified various activities through the year, divided into quarters. So far we have been engaging with NHS trusts, good face to face engagement with the public, media, Dentistry, HHFT review. Project work Youthwatch, wheelchair project, care at home, walkthrough at QA, Action Hants and Circle MSK project

Youthwatch was discussed

- Friend in Need encouraging young people to open up to their friends and providing tools to support friends needing help with mental health - media coverage on radio stations, social media
- o HWH volunteer officer, recruiting and involving them in activities
- KK discussed difficulty with recruitment, as they will often be going off to university and leave. HWH Volunteers Officer recruiting at Barton Peveril College, looking into social care courses where they could volunteer with us for their placement.
- **GP appointments –** more being provided across HIOW, 25% increase in last 12 months. People are confused about when to ask for a GP appointment, even when they not be the most appropriate person to see. There are lots of new roles recruited to in each GP surgery by their local Primary Care Network. The roles, funded under the NHS Additional Responsibilities Reimbursement Scheme will included physician associates, social prescribers etc
- What Matters Most survey will be published in January and used to find out what the public want HWH to focus on for the next year. We will present the results to the March Advisory Board meeting for members to look at and see if anything is missing that you think Healthwatch Hampshire should turn its attention to. We publish results on website and social media. Action Hampshire will be doing a lot of the ground work engagement via the VCSE Network they are being funded by HWH to set up.

4. (Urgent & Emerg Care HIOW ICB Dep Dir) contribution and insights to UEC discussion

- **AB** members introduced themselves to Jonathan Smith
- **JS** introduced himself and role Deputy Director of Urgent Care Transformation for HIOW, fairly new to role and still in creation of whole urgent emergency care team.
- HIOW ICB recognises need to change and modernise urgent care, into a new strategic commissioning plan for next 3-5 years
- **Facts and figures -** attendances to Emergency Departments up by 25%, emergency ambulance services have increased by 10%. Huge rise in demand but



- the capacity isn't there. Sometimes 911 or 111 calls are inappropriate because people don't know where to go for care
- Lots of duplication of services happening which leads to inefficiency and poor experience for patients. Need to have a common and shared patient care record that can be accessed at every contact point.
- JS discussed the process of 111, how a decision gets made and where you get treatment. What they want is for primary care to be able to deal with patients' needs the first time round. Patients are confused, so they get directed to 111.
 Comes down to needing more community care
- Discussed Urgent Treatment Centres as an alternative to Emergency Departments should be open min 12 hours a day connected to 111- having them co-located in hospitals. Urgent Treatment Centres across HIOW 7 contracts currently, 18 integrated urgent care contracts and aligned all of these to end in April 2026 (for non-life threatening care.)
- NHS comms team are meant to be doing a significant marketing exercise to provide an explainer to the public on the different terms within the NHS.

5. Dentistry Update

- **SM** provided an update regarding ongoing concerns around dentistry services in the area. There has been significant feedback regarding accessibility and waiting times for dental appointments.
- Dentaid bus is booking appointments from Feb 2025 they can be contacted directly and we have updated the website
- Discussed problems with it it is a "sticking plaster" rather than a permanent solution.

6. Updates from Board Members and Healthwatch team

- JC attended one of Hampshire Together programmes now only talking about one potential hospital sites. JC feels they are thinking about all the right things for people and patients: location, transport, urgent treatment centres split up into different workshops and the community members attending were able to contribute to the discussions. Huge document 250 pages on decision process, Discussed JC having to sign a Non-Disclosure Agreement document prior to joining.
- **JO** attending adult safeguarding meeting on Monday.
- **JO** is also working with the new NHS trust on how to engage with the public. Raised the fact she hasn't had a date for the Quality Board. Had an informative online meeting with Adrian Ridley intro to the Hampshire Adults Safeguarding Board.
- LB has been to some meetings with SM, chair and Chief Exec of the HIOW ICB. They say they want to involve Healthwatch more (Lena and Maggie chair and chief exec of HIOW ICB.) None of Healthwatch were invited to a very important meeting with clinical leaders so this was flagged to Lena and Maggie as Healthwatch felt it should be involved in health and care system planning. Attended Hampshire Health and Wellbeing Board (shadowing SM).



7. AOB

BC raised that timings of agenda are challenging and raised the possibility of longer meetings. **LB** thinks that if a guest is there, 2.5 hours would give time for everything. **SM** explained that due to the transparency of Healthwatch the public has to be invited to the whole meeting. **SM** explained next meeting will have the What Matters Most survey to go over, and will have hopefully been to the QA emergency department by then.

8. Closing Remarks

- Next meeting decided to be in early March
- LB thanked everyone for their contributions and closed the meeting.