

Notes from Citizens' Assembly Meeting

Held on 15th December 2020
Virtual Teams Meeting

Meeting Notes

Present:

Nick Pennell, Healthwatch Plymouth and CHAIR	Ajike Alli-Ameh, Interim Head of South West Clinical Senate
Trish Trim, South West Clinical Senate Administrator	Fiona Baldwin Assistant Director Clinical Programmes / Networks
Ann Harding, Healthwatch BaNES	Joanna Parker, Healthwatch BaNES
Lance Allen, Healthwatch BNSSG	Tricia Godfrey, Healthwatch BNSSG
Suaad Walker, Healthwatch BNSSG	Catherine Fuller, Healthwatch IoS
Tessa Trappes-Lomax, Healthwatch Devon	Kevin Dixon, Healthwatch Devon (Torbay)
Louise Bate, Healthwatch Dorset	George Soars, Healthwatch Gloucestershire
Maisy Griffiths, Healthwatch S Gloc	Paul Greensmith, Healthwatch Swindon
Nazma Ramruttun, Healthwatch Swindon	Sheila Burrige, Healthwatch Somerset
Judith Goodchild, Healthwatch Somerset	Trish Lyons, Healthwatch Wiltshire
Meg Newbery, Healthwatch Wiltshire	Peter Buttle, Wiltshire
Heath Cormack, Head of Digital, NHSE/I	Oonagh Quinn, Healthwatch Lincolnshire
Bren McGowan, Healthwatch England	

Apologies:

Richard Foxwell, Healthwatch Devon	Jon McLeavy, Healthwatch Cornwall
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1	OPTIONAL - MS Teams support	
2	Welcome	Action
	NPennell (Chair) welcomed meeting participants as per the list above.	
3	HW England: Patient and Public Engagement during COVID-19	
	<p>Bren McGowan Healthwatch England Representative / Oonagh Quinn, Healthwatch Lincolnshire. Presented:</p> <p>A national and an example regional perspective around: “What Healthwatch <i>needs to do</i> doesn’t change, but <i>how it can do it</i> must change.</p> <ul style="list-style-type: none"> • Collect people’s views • Provide information • Tell services what they need to know” <p>Engagement during COVID-19: What we learned</p> <p>Discussion generated post presentation included:</p> <p>PGreensmith (Paul) flagged that not everyone has access to the internet and this precludes inclusion in accessing and informing Healthwatch organisations business;</p>	
4/5	Digital engagement with local populations and How has COVID-19 impacted patient and public engagement in your local area?	
	<p>Kevin Dixon, Healthwatch Devon, Plymouth and Torbay Presented:</p> <p>Engagement in a time of Covid</p> <p>A local perspective of the challenge for Healthwatch Devon for inclusion and effective communication.</p> <p>Discussion generated post presentation included:</p>	

NRamruttun (Naz) asked how HW Devon communicated with residents where English is not their first language?

KDixon (Kevin) responded that all communications were disseminated across the geographical area to pertinent contact representatives of e.g. BAME, other ethnic minorities and to date this aspect had not specifically flagged as an issue in response (ditto hearing impaired residents); but it always needs to be addressed and responded to, wider inclusion of all sectors of the population is a primary driver of HW business . As an example, Devon has a large Polish population with a named Outreach Worker who liaised with HW Devon to ensure communication, information is also prepared in Polish and circulated via the Outreach Worker to shops, community centres in the Devon areas high in Polish population.

PButtle (Peter) flagged that many people on the margins, particularly financially, are precluded from participation and representation because they cannot afford/ have access to the internet. To raise awareness Peter flagged that he is aware that BT offer packages specifically tailored for low income households to access services and that HW can signpost such schemes. NPennell (Nick) agreed that from the outset of the COVID-19 pandemic access to information and guidance / advice via the internet was not available to all residents in Devon

MNewbery (Meg) flagged a gap in representation and inclusion in the area of 16-18 year olds Mental Health Services although schools have commenced to make improvements in access it still leaves that age range under served and in Wiltshire, HW is liaising with CAMHS to improve access. TLyons (Trish) concurred highlighting the use of Peer Listening Groups within FE Colleges in their locality.

OQuinn (Oonagh) flagged it is about what is feasible and that is challenging. Representative Organisational collaborations are required with robust communications to widen access and ongoing changes are being adopted continually to improve performance... Oonagh related the adage "... do 5 things well rather than 50 things badly". Kevin concurred, this is the mantra for HW Devon.

SWalker (Suaad) flagged that within Bristol City there are officially 92 mother tongues recorded and that the BAME population is a

	<p>community severely affected by COVID-19; if information is only disseminated in English it compounds that proportional affect. Health Professionals need to encompass and actively include the specialisation of their Communications Departments to be effective in disseminating information.</p> <p>Nick suggested that the extremely positive public responses to Health and Social Care services may face some challenges as we come out of the pandemic.</p> <p>Several HW representatives flagged that Dentistry and being able to access services has been severely impaired during the pandemic and compounds the further underlying risk of other health issues picked up normally through strong Oral Hygiene services.</p> <p>LAllen (Lance) promoted the efficacy of responsible social media employment to help inform the public.</p> <p>JParker (Joanna) highlighted that the SW Clinical Senate, uniquely has regional HW representation in its Citizens' Assembly and is in a position to raise and share emerging themes with other English Senates.</p> <p>The idea of an Asset Based Approach was raised- funding delivered through various community "pots" encouraging a wider input of funds. The example given was of "SWALLOW", a charity providing user-led support of teenagers and adults with learning disabilities whose funding model is seeking potential partners to explore collaborative working opportunities.</p>	
6	ToR Approval/ AOB	
	<p>These agenda items are postponed until the January 21st 2021 meeting as the previous agenda items filled the allocated time for the meeting.</p>	
	<p>Nick thanked CA members and invited guests.</p>	

Next Citizens' Assembly 21st January 2021 10:00 – 11:30

CA Meetings 2021

- Thursday 21st January 10:30 – 11:30
- Thursday 25th February 10:30 – 11:30
- Thursday 29th April 10:30 – 11:30
- Thursday 20th May 10:30 – 11:30

Thursday 10th June 10:30 – 11:30
Thursday 29th July 10:30 – 11:30
Thursday 9th September 10:30 – 11:30
Thursday 14th October 10:30 – 11:30
Thursday 4th November 10:30 – 11:30
Thursday 9th December 10:30 – 11:30
SW Clinical Senate Assembly Annual Conference Thursday 18th March 2021