

Healthwatch Sheffield Strategic Advisory Group business meeting (in public)

Date & Time: 02/05/23, 2 pm – 4pm

Location: Online, Zoom

Present: Judy Robinson (Chair), Verni Tannam, Tim Furness, Trish Edney, Mark Gamsu, Lucy Fox

In attendance: Mina Clarke, Lucy Davies

Apologies: Janet Harris

Meeting notes: Mina Clarke

| Item | |
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| 1 | <p>Welcome and apologies</p> |
| | <p>Apologies were received from Janet Harris</p> |
| 2 | <p>Declarations of interest</p> |
| | <p>None declared</p> |
| 3 | <p>Public questions</p> |
| | <p>There were no members of the public in attendance. The SAG agreed to hold a meeting in public with more notice on the 5th September with a provisional time of 3 pm – 5 pm.</p> |
| 4 | <p>Matters arising from the previous meeting</p> |
| | <p>The previous minutes were agreed as a correct record.</p> <p>Matters arising:</p> <p>Pharmacy</p> <p>Lucy Davies, Trish Edney, and Laura Cook have now met with Jo Tsoneva and Chris Gibbons. The meeting was held to discuss a potential piece of work by Healthwatch on pharmacy. It was decided that Healthwatch would not pursue a piece of work on pharmacy at this time due to difficulty finding a lens with which to approach the project. The challenges faced by community pharmacy were also discussed.</p> <p>GP website health check</p> <p>The SAG heard that the ICB has responded to the GP website health check. The ICB recognise the importance of improving the websites of GP practices and has approved a plan to commission an independent agency to complete an audit of the websites as well as provide resources (e.g., standard templates and pages) and support for GPs.</p> <p>The GP website health check has been discussed at the Health and Wellbeing Board, with particular regard to new patients having to submit proof of ID and/or address at some GPs despite NHS England guidance that this should not be required. Health and Wellbeing</p> |

Board members have agreed to take this up further. Dr Leigh Sorsbie may organise for Healthwatch to attend a meeting with GPs to discuss the issue.

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Reports from meeting representatives

Meeting representatives fed back to the SAG about the meetings they currently attend.

Trish Edney – attends the [Learning Disability Partnership Board](#), Area Prescribing Group, and Primary Care Commissioning Group

Learning Disability Partnership Board

- The board is working to increase their user participation.
- It is appreciated that Healthwatch are in attendance.

Area Prescribing Group

- Trish has raised the issue of gluten-free prescribing at the Area Prescribing Group.

The Primary Care Commissioning Group

- The Primary Care Commissioning Group are positioned to make recommendations to the ICB about commissioning.
- Healthwatch are currently a member of the group's attendees and have so far been present at the private section of the meetings.

Lucy Davies – attends the Health Scrutiny Sub-Committee, the ICB Board Meeting, and the ICB sub-committee for Quality, Performance and Engagement

The Health Scrutiny Sub-Committee

- The sub-committee has seen a change in responsibility from its original statutory role of scrutinising the provision of local health and social services since moving to its committee structure in the council.
- Embracing its new role, the sub-committee is seeking to increase its effectiveness within NHS South Yorkshire structures.
- Lucy commended the current chair of the sub-committee, Ruth Milsom.
- Membership fluctuates due to changes in councillors which can present a challenge to the meeting structure.
- The sub-committee recently lost its support officer.
- Historically, the sub-committee and Healthwatch have had a productive relationship with the sub-committee often involving Healthwatch in conversation and proactively seeking a Healthwatch perspective on their projects. Healthwatch are happy to provide these insights.

ICB Board Meeting

- Lucy is the South Yorkshire Healthwatch representative at the ICB Board Meeting.
- The primary concerns of the meetings at present are governance and budget.
- The role of Healthwatch in this meeting is still evolving, but currently takes on the position of ensuring the inclusion of patient and public voice as well as providing an equity angle to discussions. The board recognises both of these as important and is

planning a workshop centred around how best to incorporate qualitative information into the performance report for the ICB.

Sub-Committee for Quality, Performance and Engagement

- The primary focus for the sub-committee has been quality up until the most recent meeting when engagement and experience was given dedicated time on the agenda.
- The sub-committee will need to consider a framework for the use of information around engagement and experience.

Judy Robinson – attends the Sheffield Health and Care Partnership Board and the Health and Wellbeing Board.

Sheffield Health and Care Partnership (HCP)

- The HCP is a Sheffield-based sub-committee of the ICB.
- Primary foci of the group in recent sessions have been governance, budget, development sessions, and devising priorities.
- The HCP has solid representation from a number of parties – the NHS and key trusts, Healthwatch, voluntary sector, and local authorities.
- Healthwatch Sheffield has not taken up voting rights within the HCP. This decision was made by Healthwatch Sheffield and Healthwatch England in order to retain the independence of Healthwatch Sheffield.

Health and Wellbeing Board

- The Health and Wellbeing Board is a local authority board and reports to the council.
- A letter will be sent to the ICB from the board in response to ICB budget cuts to say that the hope is that reducing costs doesn't reduce the ability of the Sheffield Place to continuing working on areas such as equality and engagement at a place-level.
- Judy now gives a report on the [What We've Been Hearing](#) monthly briefings from Healthwatch Sheffield which are gaining significant attention from the board.
- Key pieces of work by the board highlighted by the SAG included a piece on learning disability and autism in response to an earlier report and another piece on commercial determinants of health
- A conference on inequality will be taking place at 12pm on the 14th June at St Mary's Church & Conference Centre organised by the board with Donna Hall CBE as a speaker. Members of the SAG will be invited – please see the following link for more information: [Working Together Differently To Address Health Inequalities](#)
- Judy had met Sharon Mays recently and both has agreed to develop links between Healthwatch Sheffield and the Trust. They also discussed whether Healthwatch could assist with widening the diversity of people the Trust engaged with and how Healthwatch's experience can be fed in to inform decision making processes.

A gap in how Healthwatch insights are informing quality was noted by the SAG – whilst there is a Healthwatch presence at South Yorkshire-wide meetings concerning quality assurance, there isn't a Sheffield-specific meeting.

Lucy presented a PowerPoint detailing the Sheffield Place Framework Governance Structure to the SAG, and where Healthwatch is represented within this.



Sheffield Place
Proposals_ Overarch

Healthwatch are currently represented in a number of areas within the Sheffield Place Framework Governance Structure, including various organisational boards and committees across Sheffield and South Yorkshire. Healthwatch is also represented at a number of voluntary sector meetings in Sheffield. The SAG also considered any board/committee meetings that Healthwatch currently attends on an irregular basis or has been invited to, but not currently in attendance of.

Discussion mainly pertained to the value of a Healthwatch presence, maintaining the profile of Healthwatch, and how best to utilise Healthwatch's current capacity within the framework.

- Healthwatch brings an outside perspective as well as a view around inclusion and diversity.
- Healthwatch currently attends one of the six workstreams within the new South Yorkshire/Sheffield place governance structures. The capacity at Healthwatch would not allow for a meeting representative to be present at all six of the workstreams, Healthwatch must therefore carefully consider which of the six can be attended.
- Healthwatch has previously attended the Mental Health, Learning Disabilities, Dementia and Autism Delivery Group.
- The SAG considered the value of being on the Sheffield Transformation Committee and/or the Sheffield Oversight Committee of the HSCP.
- The SAG agreed it was important for Healthwatch to attend at least one meeting for every care provider within Sheffield.

The SAG considered the following criteria for where meeting representatives would be best placed to influence and impact within the Sheffield Place Framework Governance Structure (= key criteria):

- Key boards/committees where Healthwatch is not currently in attendance
- Whether or not Healthwatch can have an impact within certain spaces
- Who is best placed to attend specific boards/committees?
- Align with Healthwatch's current interest, expertise, and priorities
- Whether external bodies are already present
- Areas where Healthwatch's input is missing
- Link to each trust

Actions:

- Produce a refined list of criteria for the SAG to consider where to place meeting representatives within the Sheffield Place Framework Governance Structure.
- Produce a list of potential committees/boards for Healthwatch to attend, including their purposes and when they are held.
- Maintain an open channel of communication between meeting representatives by filing monthly reports and making these available. This enables the meeting representatives to

assess the information exchanged at other meetings and understand themes within current conversation.

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Setting our priorities for 23-25

Lucy presented the final proposal for the Healthwatch 2023-25 priorities to the SAG.



Priorities 23-25.pptx

The SAG agreed unanimously on the four priorities proposed. The Healthwatch 2023-25 priorities will be: Long Covid; End of Life Care; Children's Health Services; and a neighbourhood view of health and care. In keeping with the Healthwatch strategy, themes of equity and improving health outcomes will be a focus throughout all the chosen priorities. Long Covid and End of Life Care are ongoing pieces of work.

An overview of Healthwatch Sheffield's rationale for not selecting certain frequently mentioned topics was provided (i.e., GPs, dentistry, mental health, pharmacy, hospital discharge, cost-of-living). The rationale included an assessment of what work Healthwatch had completed previously in an area, what value a project in an area could add, and how an area might be incorporated into Healthwatch's everyday work.

The SAG indicated they were happy for the Priorities 23-25 document to be public. A suggestion was made to reframe the column title 'What value would a project add?' on slides three to seven to more accurately reflect the content. Another suggestion was to add a column about what a successful project might look like on slides nine to twelve.

Children's Health Services

- This work will take place from autumn '23 onwards, but planning will begin just before.
- Healthwatch recognises that its recent work has focused more on adults and older people, and would like to demonstrate that it represents people of all ages, including children and younger people.
- The area is timely with a strong focus in the ICB Partnership Strategy on early years.
- There are significant inequities within a number of child health measures.
- The Children's hospital expansion into the community presents Healthwatch with an opportunity to assess the impact of these services and, importantly, their accessibility.

A neighbourhood view of health and care

- Healthwatch wants to create a piece of work that explores experiences of health and care through the eyes of a specific geographical community in order to understand how services work together for local people and find out about a range of services simultaneously.
- This work will take place from autumn '23 onwards, and will involve identification of an area, the formation of partnerships to help link Healthwatch with local people, asking people what is important to them, mapping local services, and exploring experiences of services.

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| | <ul style="list-style-type: none"> • A “compare and contrast” approach may be useful to employ in this work in order to formulate a benchmark for how local services operate best for communities – there may be data already available to help build a picture of what the ideal looks like, but ultimately what works in practice may differ from theory. • There is a potential link with the Health and Wellbeing Board strategy. • When selecting an area of focus, the work already taking place in the North East of Sheffield by the Community Inclusion Group needs to be taken into account. |
| 8 | Any other business |
| | None |
| 9 | Date of next meeting and forward plan |
| | <p>The next meeting will be held on 6th June at 5 pm – 6 pm on Zoom. Mina will send out the dates of further meetings which will be held on the first Tuesday of each month, alternating between in-person and online.</p> <p>Future Meetings:</p> <ul style="list-style-type: none"> • 4th July (in-person) 10 am – 12 pm • 3rd August (Zoom) 5 pm – 6 pm • 5th September (in-person, public) provisionally at 3 pm – 5 pm |