

Equality, Diversity, and Inclusion Network

Tuesday 4 February 2 – 4pm Bede Tower, Burdon Road, SR2 7EA

AGENDA

1.	Welcome, Introductions and Apologies	A Sharmeen	Verbal			
2.	Action Log	L Anderson	Enclosed			
3.	Terms of reference	A Sharmeen	Enclosed			
4.	Overview Framework	L Anderson	Verbal			
5.	Sunderland Involvement Partnership	D Cornell	Verbal			
6.	CCG engagement for 2020	L Anderson	Verbal			
7.	Consultation strategy	A Sharmeen	Verbal			
8.	Podiatry	Rebecca Crowe	Verbal			
9.	Seriously Resistant campaign	G Donovan	Enclosed			
10.	Any other business	All	Verbal			

Date and Time of Next Meeting

Date and venue to be confirmed – March 2019

Equality, Diversity, and Inclusion Network: 4 February 2020

Agenda, notes, action log, register

Notes from the meeting:

Attendance:

- Dorothy Elliot
- Liz Highmore
- Helmut Izacks LGBT Forum
- Sandra Watt FODI
- Neil Graham Changing Lives
- Lisa Anderson NECSU
- Gemma Donovan CCG
- Victoria Casey CCG
- Rebecca Crowe CCG

Welcome, introductions, and apologies

- Lisa Anderson (LA) welcomed group members and encouraged members to continue to invite more representatives they know who would be interested in attending the group.
- LA asked all attendees to introduce themselves.
- LA apologised for papers not being emailed / posted out prior to the meeting, and emails not being sent. LA explained how Anisah Sharmeen (AS) had been away from the office on sickness. LA told the group how she wanted to go ahead with the meeting rather than cancel it, because of staff sickness. She agreed with the group to provide comments on all provided paperwork within two weeks of the meeting, as there had been a delay in sending it out.
- The group discussed the success of the first aid training event which replaced November's physical EDIN meeting. LH attended the training and said how useful it had been.
- LA asked the group if they would be happy to move the agenda around slightly, listening to the 'Seriously Resistant' campaign update first and the Podiatry update second, before moving to the bulk of the meeting. This was because attendees needed to attend other meetings. The group agreed.

Seriously Resistant Campaign Update

- Gemma Donovan (GD) gave an update on the seriously resistant campaign. GD updated the group on 2019 activity, and informed the group how this area had had one of the more successful campaigns run. Because of the success of the campaign, the CCG were looking to extend it for 2020, and making it better. The original campaign was around behaviour change, and was measured through pledges. GD explained how each pledge made represented a conversation with a person. For the extended campaign, GD said they wanted to start educating people more about why behaviour change was needed. GD asked the group for their thoughts an input to help inform the campaign in 2020.
- Liz Highmore (LH) thought the campaign was a very good idea, as education was needed.
- Dorothy Elliot (DE) asked GD whether the campaign had made a
 difference. GD said they were waiting for some prescribing
 statistics to be published where they could look at whether the
 numbers had reduced. She explained that they would also be
 looking at surrogate measures as well as raw data, such as
 qualitative data collected from patients to measure whether the
 campaign had made a difference. GD agreed to update the group
 with this information.
- GD asked the group who the targeted audience should be for the extended campaign. LH suggested the campaign be brought to sheltered accommodation, which can be arranged through contacting housing associations (Gentoo, Housing 21, anchor housing). Gentoo sends out regular newsletters, and this can be used to communicate the message.
- Sandra Watt (SW) suggested the message be in plain English to help communicate it to refugees. She also said the information needed to be available in alternative languages. She agreed to email LA / AS a list of main languages the information needed translating into. She also said there would be different attitudes to this campaign from different cultures.
- The group agreed that plain English information would help communicate the message to a wider audience.

Podiatry

- Rebecca Crowe (RC) explained how the CCG commission podiatry services for the community, hospitals, and care homes. She explained that the service needed recommissioning as it had reached the natural end of its contract, so the CCG wanted to use this as an opportunity to review the service and make sure they have the service specification right. Through the initial scoping exercise, they discovered that some people had access to the service who had no clinical need. She also explained that they discovered some people did not have access to the service, or had been self-funding podiatry services privately, who was entitled to this service. She said the review had uncovered some high-risk patients in care homes who needed access to the service but who were not currently receiving treatment. RC made clear that this was not about cost cutting, but redistributing the funding to make sure people who need it were able to access it. Rebecca made clear that people with a health need included people with physical, mental, or medical needs.
- DE suggested a multi-disciplinary holistic approach to care-homes, where podiatry would be addressed through other medical appointments, or by GPs who go into care homes to offer other treatments.
- LH mentioned how the pathway for referral needed to be really clear, and Helmet Izacks (HI) added that signposting needs to be really clear for staff and patients, so patients know they can access the service without paying.
- DE suggested they link with social workers for this pathway.
- RC explained the pre-engagement work so far, which included three workshops, of which LH had been part of. There was also a patient survey which had gone out to explore thoughts on the current service provision. She explained that more engagement work would follow, and were keen for the EDIN group to be part of this. She asked the group to feed back any thoughts or comments from their service users, which would be fed into the review.
- SW said there may be confusion with terminology, and the difference between podiatry and chiropody

Action Log

- The group reviewed the action log from July 2019. The delay was due to the November meeting being replaced with first aid training.
- The group agreed to close several actions. LA would speak with AS when she returned to work about outstanding actions in her name. LA to contact Emma Taylor (ET), Rachel Macdonald (RM) and Ruth Frostwick (RF) again for an update on outstanding actions. LA to speak with Matt Thubron about an update on how equalities and diversity issues are addressed through procurement.

Terms of reference

- LA informed the group that the Terms of Reference had reached its review date. She went through the Terms of Reference with the group and they discussed how most of the document still stands. The group agreed to look at the meeting date, as Wednesday PMs were no longer suitable for the majority of attendees.
- Group agreed to give LA thoughts and comments on the Terms of Reference within two weeks.

Overview Framework

 LA discussed the Overview Framework and evidence with the group. She explained how the submission date was 10 February. The group were asked to let LA know of any key pieces of evidence to use for the assessment.

Website development and feedback pages

LA told the group how improvements had been made to the
website to support the evidence for the assessment. This included
more feedback on the Get Involved webpages. LA demonstrated
the webpages to the group and read out some of the feedback,
including for Urgent Care and for Wheelchair Services.

Urgent Care - we're still listening

 LA told the group how urgent care engagement is ongoing. She explained how 380 people had been surveyed in the street to find out awareness of changes to urgent care services in Sunderland, and also any ongoing concerns.

Urgent care – Pallion and car parking

- She also mentioned that a number of improvements had been made to the waiting area at Pallion and to parking provisions, but that the CCG would do follow-up engagement on this.
- The group discussed car parking at Pallion / the hospital. The discussed how it is a stressful time, and that parking should not add to that stress. SW discussed the difficulties of asylum seekers accessing services. She mentioned a language and communication barrier through NHS 111, and that there is sometimes a barrier with asking for language translation services. She also mentioned the financial hardship asylum seekers face if they need to get a taxi to the Urgent Treatment centre at Pallion, perhaps with a sick child, as the cost of the taxi would be equivalent to their weekly funding. DE asked how the parking was going at Pallion, and whether parking had stopped / affected people attending. LA mentioned that this would be investigated with follow-up engagement.

Sunderland Involvement Partnership

LA told the group about the Sunderland Involvement Partnership.
 She explained how the aim of the group is to work in partnership, sharing examples of best practice as well as resources, with the coordinated aim of bringing better health to Sunderland residents.
 This group will also provide assurance to partners on how they involve members of the public. LA discussed te partners who were part of this group, and asked the group to thing about any gaps.

CCG Engagement for 2020

- LA told the group how they were starting to plan the involvement activity for 2020. This includes working in partnership with other organisations. The CCG will be part of the active Sunderland events, starting with the Big Indoor event on 19 February. The CCG will also be part of the summer event.
- LA told the group how the CCG was looking to work in partnership with the Sunderland Involvement Partnership as much as possible, to share resources and engagement methods.
- There was some discussion around the 2019 Better Health Roadshows. It was agreed that the content was very good for these events, but attendance was low. LA reported that each attendee tended to spend an hour at the events, taking part in each activity and speaking with each provider. She said that feedback received was overwhelmingly positive. Although attendance was low, it was agreed that the quality of conversations had were important for those people who attended. LA agreed to bring some updated numbers on the Roadshow activity to a future meeting.

Involvement strategy and Involvement Toolkit

- LA shared a copy of the CCGs Involvement strategy and Involvement Toolkit, and asked for some comments in the next 2 weeks.
- For the Toolkit, LA discussed how this would be an evolving document. She explained that a copy was included on the website, but this version would be updated with thoughts, comments, and suggestions from the group and other stakeholders. She asked the group to look through the document and to share some thoughts.
- For the Involvement Strategy, LA explained how she wanted to develop this in partnership with the group. She was keen to get their thoughts and ideas about what would be included in the strategy, to help develop the document for 2021. Although LA shared the last version with the group, she invited the group to be creative with layout and content. LA asked for initial thoughts

within two weeks, with the intent to co-design the document throughout the year.

Any other business

Ageing well event

• LH thanked LA and AS from the CCG for providing materials for the Aging Well event. Materials included mini first-aid packs, antibacterial hand gel, and information leaflets.

Maternity event

 LA provided an update on behalf of ET for a maternity Path to Excellence event. The Event was asking people to help develop maternity services in South Tyneside and Sunderland. The event will take place on Thursday 13 February between 11 – 2pm at Hebburn Central, Glen Street, South Tyneside. An information sheet was provided to attendees where were asked to share the message with their service users.

Social prescribing

• SW asked about social prescribing, and if the CCG could speak at a future EDIN meeting around this. She was interested to know about timescales and the CCGs plans for VCSOs with social prescribing. SW was concerned about the capacity of VCSOs to support people, if there wasn't funding available. There was also some group discussion around consistency of funding for VCSOs, where funding is cut annually, yet VCSOs are asked to deliver the same level of service. The group agreed that social prescribing can work well if the correct resources are in place, in terms of staff and funding.

Action log

Table 1: Live actions

No.	Action	Whom	Update	Completed
1.	GD to recirculate the antibiotic guardian bulletin to AS.	LA / AS	LA to check with AS if this information was circulated	
2.	AS to recirculate bulletin on antibiotic guardian and to share with the EDIN group.	LA / AS	LA to check with AS if this information was circulated	
3.	Group to make contact with AS around any resource requests for the seriously campaign.	All	Done	Yes
4.	Group to share messages back to services users around the seriously campaign.	All	Done	Yes
5.	AS to email JN about the article from the social isolation work, and to ask for alternative council representation at meeting.	AS	Third article to be published soon. AS to circulate link when ready	
6.	LA & AS to re-read notes and remove acronyms.	LA / AS	Done – table included with register at end of notes	Yes
7.	AS to make contact with Vivienne Metcalf from council re. VCSO database.	LA / AS	LA to check with AS if this contact was made	
8.	Group to think about locations for roadshows and to email AS with suggestions.	All	Done	Yes
9.	AS to share campaign links with group.	LA / AS	LA to check with AS if this information was circulated	
10.	AS to share patient story information on website with group.	LA / AS	LA to check with AS if this information was circulated	
11.	Matt Thubron to attend group to provide more information around procurement and ED duties.	LA / MT	LA to speak with CCG about someone attending to discuss or to provide an update	
12.	ET to share outcomes on stroke stats with AS & LA to forward onto the group.	LA / ET	LA to re-contact ET about this	
13.	ET to share presentation with group.	LA / ET	LA to re-contact ET about this	

No.	Action		Update	Completed
14.	ET to bring further update on Path to Excellence to August meeting.	ET	An update will be brought to the March 2020 meeting dedicated to P2E	Yes
15.	RM to check data from 10 years ago to see if there had been any change.	LA / RM	LA to re-contact RM about this	
16.	RM to link in with KH around time to change.	LA / RM	LA to re-contact RM about this	
17.	RF to pass on feedback to team and explore issue around hoist.	LA / RF	LA to re-contact RF about this	
18.	RF to take feedback to the team and to look into details around PPG success rates.	LA / RF	LA to re-contact RF about this	
19.	GD to update group about difference seriously resistant campaign has made	GD		
20.	SW to email LA/AS list of alternative languages	SW		
21.	Group to feedback any thoughts on seriously resistant campaign	All		
22.	Group to feedback any thoughts on podiatry review	All		
23.	Group to give thoughts and comments on ToR within 2 weeks	All		
24.	Group to let LA / AS know of any other examples to use in the overview framework assessment.	All		
25.	Group to let LA / AS know of any partners to invite to the Sunderland Involvement Partnership.	All		
26.	LA agreed to bring some updated figures on the Better Health Roadshow event to a future meeting.	LA		
27.	Group to disseminate message about the maternity event.	All		
28.	LA to ask someone to speak around social prescribing	LA		

Table 2: Rolling actions

29.	All to think about who should attend future meetings, particularly from protected characteristic groups and umbrella organisations.			
30.	All to think about suggestions of new meeting venues	ALL		
31.	AS to post out documents to DE & LH one week in advance	AS		
32.	LA to obtain executive summaries for large documents	LA		
33.	LA & AS to manage E&D attendance lists and contacts	AS / LA		
34.	AS to map and gap who we are missing, and reach out proactively for representation at the group			
35.	Everyone to email LA & AS team updates 1 week before.			

Table 3: Attendees

Attended Feb 20 meeting	Name	Initials	Organisation	Physical disability	Learning disability	Mental health	Younger people	Older people	Sexual orientation	Gender (male / female only groups)	Gender reassignment	Race / ethnicity / nationality	Pregnancy and maternity	Marriage and civil partnership	Carers	Other
Yes	Dorothy Elliot	DE	PPG				Χ	Χ								
Yes	Liz Highmore	LH	Various	Х	X	Х	Х	Х	Х		Χ	Χ	Χ	Χ	X	Х
Yes	Helmut Izacks	HI	LGBT Forum						Х		Χ					
Yes	Sandra XXXXX		FODI													
	Kim Hunter	KH	Headway Wearside	Х	Χ	Х									Χ	Х
Yes	Neil Graham	N	Changing Lives													Х
	Anna Gillingham	AG	Healthwatch	Χ	Х	Х	Χ	Χ	Χ	Х	Χ	Х	Х	Χ	Χ	Х
	Tracy Buck	TB	Age UK Sunderland	Χ		Х		Χ								
	Melanie Dunn	MD	Age UK Sunderland	Х		Х		Х								
	June Robson	JR	Independent	Х												
	Linda Oliver	LO	Guide dogs	Χ												

Add in apologies above