

Minutes of the Healthwatch Northumberland Board meeting held on 14 October 2025 at Adapt NE, Burn Lane, Hexham

Present: Hugh McKendrick (HM) Chair, Hannah Harniess (HH) Adapt NE, Denise Robson (DR) Patient Advice and Liaison Service, Debra Blakey (DB) Carers Northumberland, Sue Taylor (ST) Independent Member, Mike Allport (MA) Independent Member, Gillian Robinson (GR) Independent Member, Peter Standfield (PS) Independent member

In attendance: Derry Nugent (DN) Project Coordinator, Tim Hakim (TH) Engagement and Insight Officer, Laura Haugh (LH) Digital Marketing and Content Creator

Apologies: Angela Merrie (AM) Independent Member, Jim Brown (JB) Public Health NCC, Caroline Rogan (CR) Northumberland CVA

Minutes recorded by: Laura Haugh

1. Introductions, apologies and declarations of interest	Action
<p>1.1 HM opened the meeting and welcomed everyone. There was a round of introductions.</p> <p>1.2 Apologies noted above.</p> <p>1.3 PS reminded the board of his involvement with Abbeyfield Northumbria, which provides residential care and sheltered accommodation for older people on a not-for-profit basis in Newcastle and Northumberland.</p> <p>HM reminded the board he is a board member for The Charlotte Straker Project and a governor for Newcastle Hospitals.</p> <p>No other interests were declared pertinent to items at this meeting.</p>	
<p>2. Minutes of last meeting</p> <p>The minutes of 17 June 2025 were agreed as a true record.</p>	

<p>3. Action points</p> <p>All action points marked as complete except item 7.4 – amendments to the risk register are in progress. DN noted the risk register needs to be looked at in more depth to reflect the current dynamic situation Healthwatch is in. DN shared a timeline document with members. There are two Healthwatch England events coming up for Chairs and Lead Officers with the DHSC. Questions can be submitted by the network.</p>	
<p>4. Matters arising</p> <p>There were no matters arising from the minutes.</p>	
<p>5. Questions from the public</p> <p>No questions had been received from the public.</p>	
<p>6. Presentation: Engagement – Persistent Physical Symptoms Project</p> <p>TH gave a presentation about the Persistent Physical Symptoms (PPS) Project. He explained PPS refers to bodily complaints not explained by obvious medical causes alone and which have been a problem for months or even years. This affects around 1 million adults in the UK.</p> <p>The study aims to better understand this complex issue and draw on multiple sources of expertise to improve available support for people with PPS and the way services work together.</p> <p>The study is focused on people’s experiences of PPS in Blyth, Ashington and Newbiggin-by-the-Sea, and what community-based health and wellbeing support is available for people living with PPS.</p> <p>TH gave an overview of the phases of the project, who is involved and key dates. The project is due to be completed in April 2027.</p>	

Questions and comments

- The Board agreed this was a valuable project to be involved in.
- GR asked about TH's time commitment. 5% of TH's time is paid for, however actual time spent has been around 9%. This is something to keep an eye on, but time has decreased slightly since the Research Assistant started. HM asked if there is more money available for TH's time. There is a finite grant so it important to be mindful of how TH's time is used.
- GR asked if the Research Assistant is embedded in the community. TH said she is not based in the community but she does go out into the community. Ade from Heart of Blyth has been a key contact to make connections with the community.
- HH spoke about people being dismissed for very real undiagnosed symptoms and the importance of uniformed terminology for unidentified conditions. Members agreed it is important for people to feel listened to and supported.
- ST asked if participants are from a specific age group. TH said any adult over 18.
- PS asked why the catchment area was chosen. TH said this was chosen before he started working on the project but there is a higher level of deprivation in South East Northumberland and higher levels of missed appointments and people presenting at A&E.
- GR asked if this is a local or national project. TH said this is a localised project. Members discussed how many projects starting in the North East are used as models for national projects.
- HM thanked TH for his presentation.

7. Chair's update

- HM referred to his email updates previously shared with members.
- HM thanked the team and AM for a successful annual event.
- Two board members have resigned due to other commitments. Sharon Jacques and Alison Killen will continue to be advocates for HWN.
- HM attended the HWE Chairs meeting in September. The network was encouraged to focus on strengths – ability to get into hard to reach communities, drives change and impact, doesn't split health and social care, committed volunteer network and independent.
- HM will continue to feed back relevant HWN insight to Newcastle Hospitals.
- HM said his role is to look after the team, be an ambassador for HWN and mobilise the board. He will continue to meet with DN monthly and provide updates.

8. Operational, risk and financial update

DN asked for questions on the circulated paper. The team is continuing to move forward on the operational plan agreed in June. The plan will be adapted as new projects come up.

8.1 Here to Hear drop-ins – DN said it is important for people to know we are still here and open for feedback. Members can contact Helen Brown to find out more about the drop-ins or suggest venues.

8.2 Carers respite report – This report will be published soon. There were 167 responses to the survey. DB noted issues with pre-booking respite beds are ongoing. PS discussed some possible solutions. When the report is published, the recommendations will shape next steps.

8.3 Upcoming projects include digital access and another school project with Bede Academy in Blyth.

<p>9. Future of Healthwatch</p> <p>Members discussed the future of Healthwatch and potential timelines.</p> <ul style="list-style-type: none"> • DN referred to response from Wes Streeting. Local Healthwatch are working on a response. • Members agreed the regional NENC Healthwatch network is a strength and HWN feels valued by the local authority and ICB. • The workplan is set for the next 18 months. • Members discussed how to strengthen the board. DN will circulate a list of potential organisations which could be approached. The board is keen to have more individual members with lived experience. • Members discussed the possibility of grant funding. • DN has updated the format of the risk register to include new risks. 	<p>DN to circulate a list of potential organisations which could be approached to join the board.</p> <p>DN to update Risk Register.</p>
<p>10. Board partner organisation updates</p> <p>10.1 Carers Northumberland</p> <p>DB sent an update which was shared with the meeting papers. Key points included:</p> <ul style="list-style-type: none"> • Carers Northumberland attended an event organised by Carers Trust on 4 September in Parliament. This was an opportunity for carer organisations to talk to MPs and Members of the House of Lords about the financial challenges carers face and the support that local carer organisations provide. • Successful consortium bid for NE Combined Authority economic inactivity trailblazer project. 	

- Pre-bookable respite is an ongoing issue. HWN respite survey will provide useful feedback.
- Day services – talks ongoing with Alan Curry about day service provision.
- Regional schools work – working with organisations across the NE Combined Authority who offer young carer services to standardise monitoring and enable consistent feedback and impact monitoring. It is hoped this will lead to an increase in funding for specific work in schools across the region.
- Carers Northumberland AGM will be held at East Bedlington Community Centre on Thursday 16 October.
- Carers Rights Day event will take place at Berwick Leisure Centre on Thursday 20 November.

10.2 North of Tyne Patient Advice and Liaison Service (PALS)

- 2,548 issues were raised with PALS in quarter 1 2025–2026, across the North of Tyne area, which compares to 2727 from the previous year.
- Top concerns continue to be communication, care and treatment, and appointments.
- Email was the most popular means of contact during quarter 1 and the Freephone was the second most popular means of contact.
- A new PALS Officer has been recruited to be based at St Nicholas Hospital and she will be joining the team on Monday 20 October 2025.

10.3 Northumberland CVA

There was no update from Northumberland CVA.

10.4 Public Health

There was no public health update.

11. Governance issues update – Policy Review

Seven policies were reviewed at the latest Policy Review Group meeting. There were no substantive changes. The next meeting will be in Spring 2026.

<p>12. Any other business</p> <p>MA raised an issue with lack of transport to the RVI and Freeman for early morning appointments. DR said this is a funding issue, patient transport doesn't start until 8am. DR suggested contacting PALS or the hospital department to see if a later appointment could be arranged. DN suggested raising with the Patient Experience team. DN suggested HWN could do a call-out for feedback about patient transport.</p> <p>ST noted that the new audiology drop-ins run by RNID on behalf of Newcastle Hospitals seem to be working well and the sessions have been well-attended. MA said there still seems to be an issue with new patients being prioritised over those already in the system.</p> <p>PS asked about communications regarding Healthwatch's future. DN referred to the statement on the HWN website.</p>	<p>LH to do a call-out for experiences of patient transport.</p>
<p>13. Close</p>	

Date of next meeting – 16 December 2025

Dates of meetings for 2025/26

16 December 2025

17 March 2026