



Gateshead

LINK

Involving
Local People
in Health and
Social Care



**Gateshead LINK Annual Report
April 2009-March 2010**

Gateshead LINK contact details	3
Host Organisation contact details.....	3
1. Introduction from Gateshead LINK Steering Group.....	4
2. Gateshead LINK Governance Structure.....	7
2.1 Gateshead LINK Steering Group Members.....	8
2.2 Steering Group Members' Profiles	9
2.3 Steering Group Roles and Responsibilities	10
2.4 LINK Working Group Membership	11
2.5 LINK Policies	13
2.6 Gateshead LINK Values	13
2.7 Gateshead LINK Membership.....	14
3. LINK Representation at Partnerships, Forums, Networks and Meetings.....	17
4. Training.....	19
5. Partnership working.....	19
5.1 LINK Partners Stakeholder Event.....	20
6. Public Engagement and Communication	21
6.1 Communication and information methods	22
6.2 LINK Annual Conference	24
7. Demonstrating our impact.....	26
7.1 Hospital Discharge Working Group	26
7.2 Mental Health Working Group.....	38
7.3 Residential Care Working Group.....	38
7.4 Carers' Working Group	38
8. LINK Requests for Information	40
9. Gateshead LINK Financial Report April 2009 - March 2010	41
10. Future Work Programme 2010-2011	42
10.1 The Mental Health Working Group	42
10.2 Hospital Discharge Working Group	42
10.3 The Personalisation and Independent Living Group.....	43
10.4 The Transition to Adult Services Working Group.....	43
10.5 LINK Annual Event (October 2010):.....	44

10.6 Involvement..... 44

11. Glossary of Terms 45

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8/9 Gladstone Terrace
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Kim Newton

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1. Introduction from Gateshead LINK Steering Group

We are delighted to present our second LINK Annual Report.

We are clear that our role is to assist the public, carers and service users to influence health and social care services in Gateshead.

This has been a very busy and productive year for our LINK. We now have **200 members** who have an interest in a variety of Health and Social Care issues. (See page 14)

Our LINK website www.gatesheadlink.org.uk went live in January 2010 and we would encourage you to visit the site regularly to stay in touch with our work and up to date Health and Social Care developments.

Members Activity

During 2009-10 LINK members have

- attended **20 public events** in local communities to raise awareness of the LINK (see page 22)
- attended **38 conferences and seminars** on a wide variety of health and social care topics (see Page 17)
- attended **11 local partnerships, forums and networks** on health and/or social care issues (see page 17)
- had face – to - face contact with **1568** members of the public
- undertaken **4 training courses** – Islam Awareness Training, Charing Meetings, LINK Enter and View Training and PEANuT (Participatory Appraisal).
- established **4 Themed Working Groups** that meet every 6 weeks to examine in detail Hospital Discharge Procedures, Residential Care, Carers and Mental Health (see page 26)
- organised the second LINK Annual Conference that was attended by **81 local people** (See page 24)

- organised a Stakeholder event for partner organisations that was attended by **29** delegates (see page 20)
- made **8** requests for information from Health and Social Care organisations in Gateshead (see page 40)

Our key achievements this year

LINK members have concentrated on 4 key areas of work this year, based on issues identified by local people through our public engagement work. The 4 Working Groups have met regularly throughout the year and we are proud of what they achieved.

Hospital Discharge Working Group

We researched the pharmacy provision at the Queen Elizabeth Hospital and contributed to the evaluation of a **Pharmacy Pilot** there. (See page 27)
We distributed a **Hospital Discharge questionnaire** to all GPs across Gateshead (See page 32)

Mental Health Working Group

We held meetings with Gateshead Health NHS Foundation staff to discuss the work of the **urgent care and home care team**, looked at how mental health networks and partnerships fit together in Gateshead and discussed self referral into crisis intervention services. (see page 38)
We contributed to the development of a **Gateshead Mental Health Directory**. This is now widely available across the borough and is available as a community resource.

Residential Care Working Group

Through research and partnership working we have established the **range of residential care providers** and the assessed standards of providers across Gateshead. (see page 38)
We gave information and evidence to the **Care Quality Commission** inspectors during their visit to Gateshead.

Carers Working Group

We began to focus on advocacy support for carers and gaps in services.

We worked with Gateshead Advocacy and Information Network (GAIN) to find out where the service gaps are. This led to the decision to organise an open

public event to raise awareness of **personalisation**. The aim was to let people know about personalisation and direct payments without either selling it or criticising it.

Partnership Working

We are also committed to working constructively with Health and Social Care partners, including commissioners of services, so that local people can receive the type and style of services they require. Consequently we have established **very positive working relationships** with the key Health and Social Care organisations in Gateshead and within the North East region. (See page 19)

LINK Host Support Structure

Gateshead Voluntary Organisation Council, as Host, has 3 members of staff to support the development of the LINK:

- i) Co-ordinator (full-time), Julie Whitehouse
- ii) Communications and Engagement Officer (full-time), Ruth Dodds.
- iii) Administrator (full-time), Kim Newton.

Future work programme 2010-2011:

We will continue with our work on Hospital Discharge and Mental Health. However, following our Annual Conference in October 2009 we have established two new Working Groups on **Personalisation** and **Transition from Children to Adult Services**.

2. Gateshead LINK Governance Structure

Gateshead LINK has a Steering Group that was elected by the LINK membership in September 2009.

The Steering Group makes decisions on behalf of the LINK. The Steering Group meets monthly to discuss the work of the Working Groups, monitor progress against their work plans, agree priorities for future action, regularly review Policies and Procedures and monitor the LINK budget.

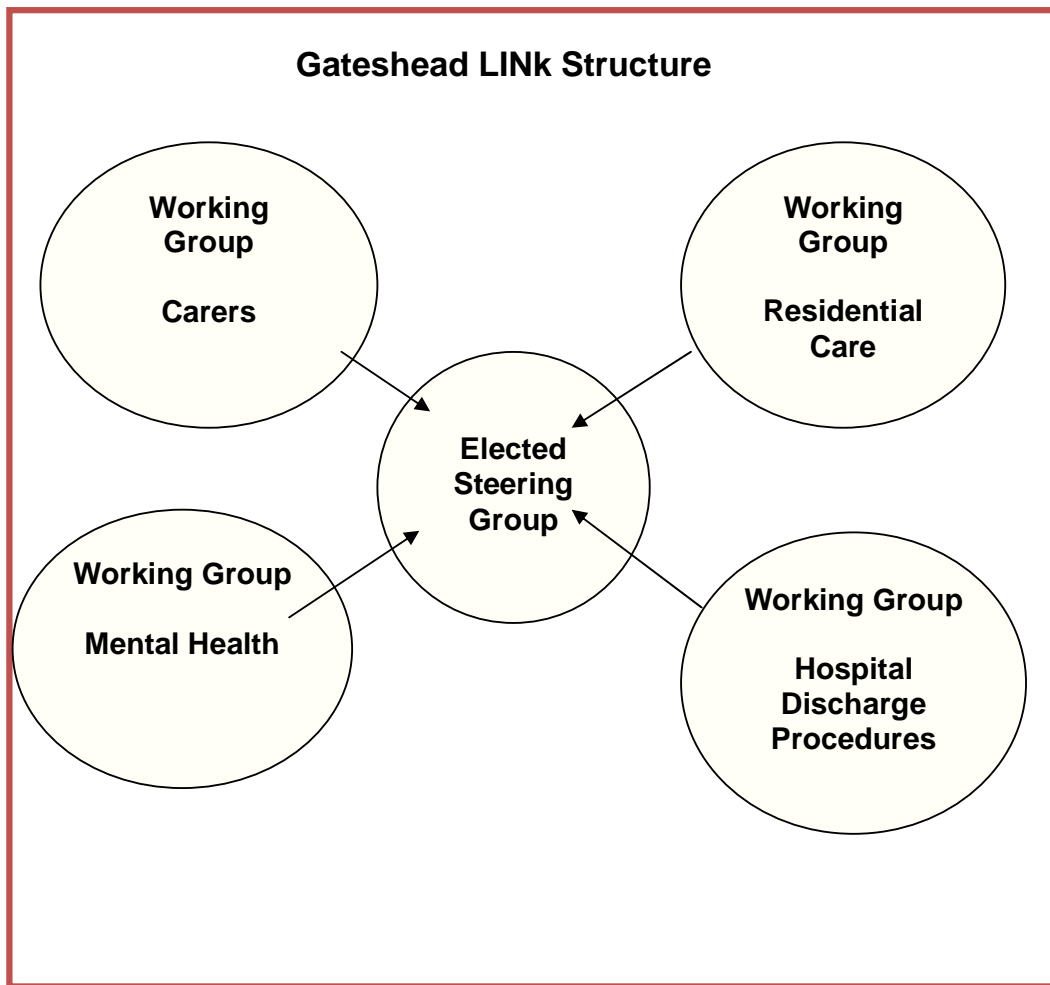
Steering Group members are elected on an annual basis and any member of Gateshead Link can stand for election to the Steering Group.

The Steering Group took the decision in October 2009 not to appoint a Chair. They felt that given the workload of the LINK and the fact that all members are volunteers it was unfair to expect one person to take on sole responsibility for the LINK business with partners and stakeholders. In addition individual Steering Group members have specific knowledge of key areas of health and social care and therefore the Steering Group would decide who was the most appropriate member to represent the LINK at key strategic and policy meetings with partners and stakeholders. This process has worked very well to date.

Four themed Working Groups have been established following wider consultation with communities in Gateshead:

Mental Health
Carers
Residential Care
Hospital Discharge Procedures

Each Working Group has its own Terms of Reference and meets every six weeks. Recommendations or planned future actions are taken to the Steering Group for decision.



2.1 Gateshead LINK Steering Group Members

Elected

Kay Parker	Resident
Dave Wallace	Resident
Julie Hope	Resident
Christine Squires	Resident
Ethel Donnelly	Resident
Alan Davison	Age Concern Gateshead
Gretel Keadell	Resident

Co-opted LINK members

Bill Llewellyn	Resident
Anya Simpson	Development Worker, Mental Health User Forum Gateshead

***Co-opted partner organisations**

Norah Stevens	South of Tyne and Wear Primary Care Trust Public Involvement Locality Lead Gateshead
Lucia Hiden	Gateshead NHS Foundation Trust Involvement Lead
Susan Joyce	Learning & Change Lead Provider Services NHS South of Tyne and Wear
Andi Parker Gev Pringle	Gateshead Council Involvement Officer Chief Executive, Gateshead Voluntary Organisations Council

**Co-opted members do not have voting rights*

2.2 Steering Group Members' Profiles

Alan Davison (Age Concern Gateshead)

Alan has been a member of various planning groups within the voluntary and statutory sector on a local, regional and national level and has many years social care experience, knowledge and qualifications. "I am a practicing advocate for older people and Co-ordinator of an Advocacy Project. I am passionate about the aims of the LINK and its potential."

David Wallace (Resident)

David has twenty years experience working in the N.H.S. and has for the past five years volunteered for various organisations including Age Concern, Active Age and Turning Point. David's particular interest is mental health and he has a vast knowledge on the subject. "I have a great interest in health and social care and with my experiences I would like to make a difference."

Ethel Donnelly (Resident)

Ethel is a retired college lecturer with many years experience of working with students who have learning difficulties, including helping them with their social, legal and health problems. Ethel is particularly interested in people who are socially isolated and has completed research on this subject. "I would like to gain an insight into services provided for Gateshead residents and cascade this information to individuals to enable them to gain access to the provisions of the Health Services according to their needs."

Julie Hope (Resident)

Julie is a Magistrate, bringing her into contact with all sections of the community. Julie is also a volunteer with Pathways Advocacy; this role brings her into contact with NHS patients and their carers. "I agree wholly with what the LINK stands for and I want to extend what I am doing to make a difference to the local community."

Christine Squires (Resident)

Christine is an ex Patient and Public Involvement PCT Forum member and Chair and attends various meetings in the voluntary sector to improve social care services for the people of Gateshead. Christine is a qualified teacher who has a vast amount of knowledge and personal experience spanning over thirty years in both health and social care. “The LINK has the capability to explore a variety of health and social care services and I am very keen to ensure the voice of Gateshead’s residents are heard and acted upon.”

Kay Parker (Resident)

Kay has twenty - five years experience working as a professional in social care specialising in mental health and has facilitated mental health carers groups throughout this time. Kay has recently completed training to become a volunteer with the local NHS Primary Care Trust. “I have been involved in the LINK from its inception and I would like to use my professional experience within health and social care to help both improve and recognise good practice within Gateshead health and social care services.”

Gretel Keadell (Resident)

Gretel is an educational ambassador for Gateshead Council and is a volunteer Holistic Therapist for Queen Elizabeth Hospital and Dunston Hill Day Unit. “I have been involved in the LINK from the very beginning and I have a great interest in health provision nationally and in particular Gateshead’s.”

2.3 Steering Group Roles and Responsibilities

- Ensuring the health and social care needs of the people of Gateshead are addressed
- Making key decisions regarding the direction of LINK work, including monitoring of resources
- Ensuring Gateshead LINK is effective in engaging with Gateshead communities, especially under-represented groups
- Ensuring members act within their LINK mandate and speak on behalf of the LINK only when a LINK position is agreed
- Making colleagues and LINK staff aware of issues they think are relevant to the LINK

2.4 LINK Working Group Membership

The Working Groups membership is made up of LINK members and others from partner organisations with an interest in a specific issue.

Carers

Ian Atkinson	Gateshead Access Panel
Brenda Cawton	Home Manager – The Whinnies, Sunniside
Steve Cowan	GAIN
Laura Dixon	Carers Action Forum
Emma Foggin	South of Tyne & Wear PCT
Janet Holliday	Resident
Audrey Horton	Resident
Gretel Keadell	Resident
Joe Lewis	Gateshead Crossroads
Younis Malik	Gateshead Muslim Society
Maria Hall	Resident
Gill Morton	Resident
Martin Mulvaney	Gateshead Crossroads
Kay Parker	Resident
Diane Sandford	Gateshead Carers
Janice Todd	Resident
Joanne Watson	Gateshead Cerebral Palsy Group
Jane White	Resident
Shayne Wilson	Gateshead Alzheimer's Society

Residential Care

Ian Atkinson	Gateshead Access Panel
Alan Davidson	Age Concern
Penny Davidson	Community Services & Joint Commissioning Gateshead Council
Ethel Donnelly	Resident
Steve Hopkins	Tranwell Unit
Joan Kane	Resident
Gretel Keadell	Resident
Maria Laben	Carer/Service User Network
Alistair McDonald	Headway Gateshead
Annie Osbourne	Alzheimer's Society
Kay Parker	Resident
Richard Scott	Community Services & Joint Commissioning Gateshead Council
Christine Squires	Resident
Pauline Wallace	Resident

Mental Health

Ian Atkinson	Gateshead Access Panel
Ruth Donnan	Services for Older People
Stuart Dexter	Mind in Gateshead
Jean Francombe	Tranwell Unit
Maria Hall	Cedars School & Resident
Olive Jack	CASA
Joe Lewis	Gateshead Crossroad
Bill Llewellyn	Resident
Mish Loraine	Gateshead Mental Health User Forum
Younis Malik	Gateshead Muslim Society
Nicole McKay	Gateshead Citizen's Advice Bureau
Alison McLellan	Resident
Andrew Moore	Sight Service
Bill Moran	Age Concern
Kay Parker	Resident
Stephen Gerard Scullion	Gateshead Older People's Assembly
Emma Seagrave	Pathways Advocacy Service
Anya Simpson	Pathways
Christine Squires	Resident
Brenda Tierney	Resident
Susan Tubman	Resident
Joanne Watson	Gateshead Cerebral Palsy Group
Jane White	Resident
David Wallace	Turning Point/Age UK

Hospital Discharge

Ian Atkinson	Gateshead Access Panel
Robert Buckley	Resident
Doreen Dabrowski	Tyne and Wear Fire Service
Ethel Donnelly	Resident
Jeff Gray	Gateshead Crossroads
Maria Hall	Resident
Gretel Keadell	Resident
Rachel Meenan	Pathways Advocacy Service
Kay Parker	Resident
Lyn Patterson	Resident
Mavis Smith	PMR-GCA UK NE Support
Christine Squires	Resident
Dave Wallace	Turning Point/Age UK
Pauline Wallace	Resident

2.5 LINK Policies

The following policies and procedures of Gateshead LINK are regularly reviewed by the Steering Group in accordance with our terms of reference.

- *LINK Aims and Objectives*
- *Code of Conduct*
- *Communications and Engagement*
- *Equality and Diversity*
- *Governance Document*
- *Ground rules for meetings*
- *Member Training*
- *Members' Report*
- *Membership*
- *Protocol re Working Relationship between Overview and Scrutiny Committee and LINK*
- *Received Complaints about LINK Volunteers*
- *Register of Members' Interests*
- *Representatives Handbook*
- *Rotating Chairs for Steering Group and Task Groups*
- *Terms of Reference*
- *Travelling and Subsistence Allowances*

2.6 Gateshead LINK Values

Gateshead LINK will :

- Be open and transparent
- Respect and value diversity
- Act only in the best interests of its membership, in line with these core values
- Be accountable to its membership
- Give equal consideration to all health and social care issues whilst recognising the need to prioritise LINK activity
- Focus on achieving outcomes that include

Services which are shaped to meet people's needs

Service improvement in response to people's experiences

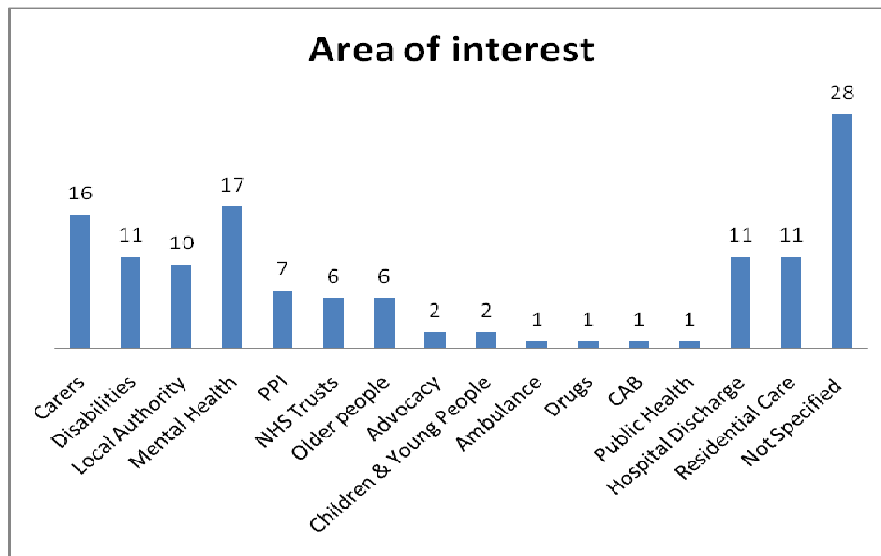
Increased confidence in the validity and transparency of the decision making processes used by health and social care services

2.7 Gateshead LINK Membership

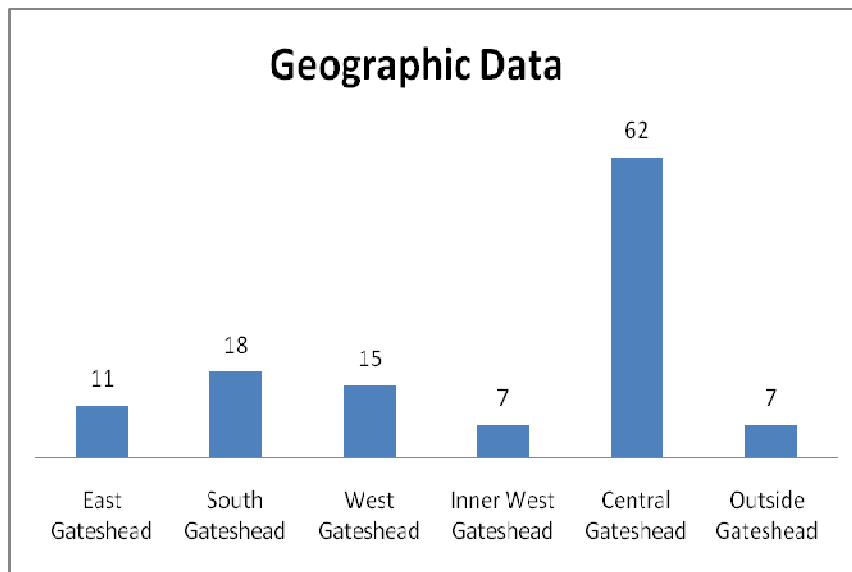
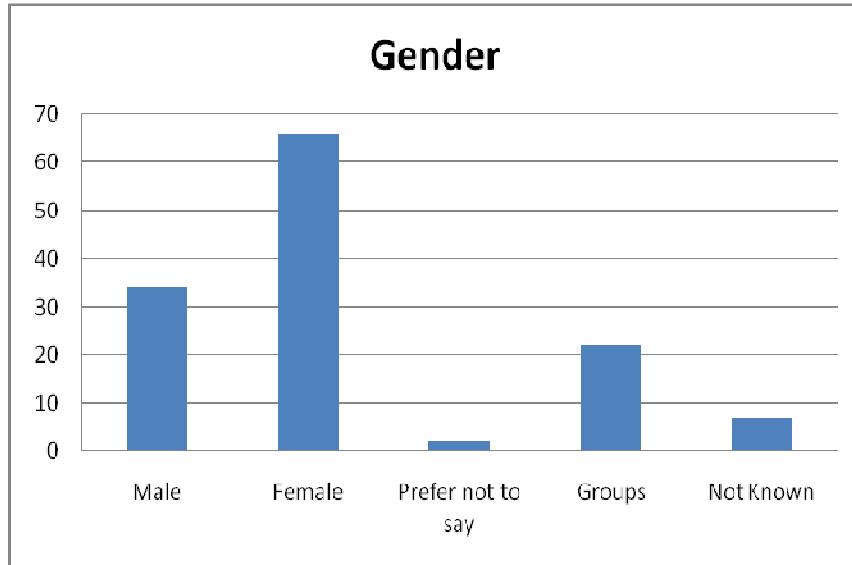
In 2008-09 our membership totalled 132 registered members consisting of 110 Gateshead residents and 22 organised groups from within the voluntary and community sector of Gateshead

In 2009- 10 we now have **200** registered members consisting of **167** individual Gateshead residents and **23** organised groups from within the voluntary and community sector.

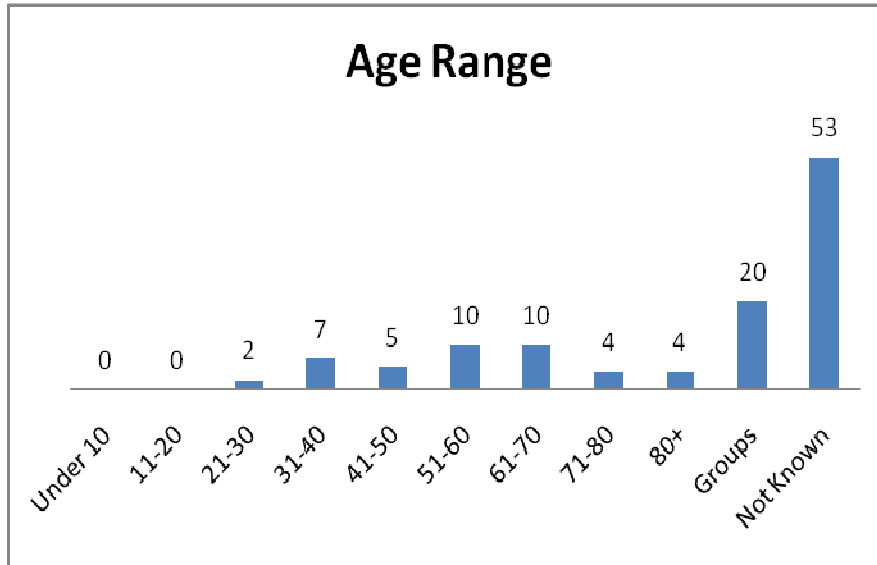
The following charts illustrate the area of interests of members, gender, geographic data and the age range.



As this chart illustrates our members have a broad range of interests that span both Health and Social Care.



Our membership consists of individuals and groups and the majority of these groups are based in the Central area of Gateshead, however our individual membership covers the whole of Gateshead. As part of our ongoing outreach and engagement work we are targeting specific areas of Gateshead to ensure that our membership reflects all communities in Gateshead.



As a volunteer led organisation Gateshead LINK anticipated that its core and active membership would consist of people who are either retired, not currently working or with some capacity to volunteer their time to the LINK. However we are continually exploring with the economically active population ways in which they can be involved in the Link without giving up their valuable leisure time. To this end we have targeted existing community and voluntary sector groups, leisure facilities, shopping areas etc where we can make contact with people who are employed during the day to ensure that they have the opportunity to find out about the LINK and also contribute their opinions and concerns about Health and Social Care.

3. LINK Representation at Partnerships, Forums, Networks and Meetings

We have achieved representation on a number of important voluntary and statutory sector forums and networks where the LINK can influence decision making, service design and policy development. In 2009-2010 LINK members and/or LINK staff have attended the following:

Partnership, Forum, Network	LINK Representative
North East Ambulance Service Board	Dave Wallace
Carers' Partnership Board	Maria Hall
Patient Users Carers Public Involvement Forum	Kay Parker
Gateshead Council Overview & Scrutiny Committee	Gretel Keadell Dave Wallace Kay Parker
Gateshead Council Involvement Forum	LINK Communication & Engagement Officer
Joint Strategic Needs Assessment Group	Dave Wallace
Gateshead's Health & Social Care Partnership	Maria Hall
Harm Reduction Alcohol	Dave Wallace
Overview and Scrutiny Committee Harm Reduction Alcohol	Dave Wallace
Voluntary Sector Mental Health Forum	Dave Wallace Gretel Keadell
Viewpoint Gateshead Council	Dave Wallace Gretel Keadell

Meetings/Conferences	LINK Representative
PDSI Launch	Christine Squires
PCT Engagement Board	Christine Squires
Alcohol Balance Forum	Gretel Keadell
PCT Health in Schools Forum	Gretel Keadell
Registration of Residential Care and Social Service Provision	Gretel Keadell
Mental Health Day	Gretel Keadell Kay Parker
PCT AGM	Gretel Keadell Christine Squires
Personalisation- Voluntary Sector Event	Christine Squires
PCT Strategy for Healthcare in Gateshead	Gretel Keadell
Impact of Social Care and Independent Living Care Plans	Christine Squires
CQC Inspection of Gateshead	Kay Parker
BME & Community Development Conference	Kay Parker Gretel Keadell

Gateshead NHS Trust Information Event	Kay Parker
Older Peoples Assembly AGM	Kay Parker
Women's Mental Health	Kay Parker
Living and dying with dignity	Gretel Keadell
Smoking Cessation	Christine Squires
LINK Conference York	Dave Wallace Gretel Keadell Kay Parker Christine Squires Ethel Donnelly
Link Annual Event	Steering Group & all LINK members
JSNA Conference London	Dave Wallace
National Association of LINK members Conference London	Ian Mason Dave Wallace
Consultation on new combined Primary Care Centre & Leisure Centre Blaydon	Gretel Keadell
Big Care Debate	Kay Parker Christine Squires
Emotional & Wellbeing Strategy	Gretel Keadell
Gateshead Older People's Assembly AGM	Kay Parker
Gateshead NHS Trust & LINK information sharing event	Kay Parker
<i>Testing the impact of our health</i> EHRC event	Christine Squires
Human Quality & Care event	Gretel Keadell
Assisted suicide Interim Policy for Prosecutors Northumbria CPS	Kay Parker
Inequality & Mental Health Seminar London	Dave Wallace
Launch of State Care CQC London	Dave Wallace
Dementia and Older People's Social Care	Gretel Keadell
LINK Regional Chairs Network meeting South Tyneside	Ethel Donnelly Dave Wallace
Market Place & Social Care Personalisation	Gretel Keadell
Social Marketing – Principles of Social Marketing Strategic Health Authority	Gretel Keadell
Alcohol Conferences SOTW PCT Gateshead Sage Stonehills Media Centre	Dave Wallace
NICE Conference Centre for Life	Dave Wallace Gretel Keadell

4. Training

Training courses	LINK member
Enter & View Training	Christine Squires Gretel Keadell Pauline Wallace
Islamic Awareness	Gretel Keadell Kay Parker Ethel Donnelly Dave Wallace
Chairing meetings	Kay Parker Ethel Donnelly Dave Wallace Christine Squires Julie Hope Gretel Keadell Alan Davison Bill Llewellyn Maria Hall
Participatory Appraisal (PEANuT)	Dave Wallace Ethel Donnelly Kay Parker Bill Llewellyn

5. Partnership working

We have continued to build positive and productive working relationships with

Commission for Social Care Inspection (CSCI)
Gateshead Council: Networks and Forums
Gateshead Joint Strategic Needs Assessment
Gateshead NHS Foundation Trust
Gateshead Overview and Scrutiny Committee
Healthcare Commission
North East Ambulance Service
Northumberland, Tyne and Wear NHS Trust
South of Tyne and Wear Primary Care Trust
Voluntary and community sector groups in Gateshead

We have established a positive working relationship with the **Chairs of Gateshead Council's Overview and Scrutiny Committees**. We agreed a joint protocol for these meetings that clearly details the formal relationship between the LINK and OSC.

We meet quarterly with this group to discuss the OSC's work plan and keep them up-to-date with the LINK progress. This year we have attended a total of 4 meetings, in June, September, December 09 and March 10.

5.1 LINK Partners Stakeholder Event

In its first year of development the LINK considered it appropriate to report to all stakeholders on LINK progress at the Annual Conference.

The LINK are deeply committed to involving local people in identifying LINK priorities and influencing health and social care practitioners, providers and commissioners

The Steering Group is also committed to working in partnership with its statutory partners, but it does not feel it is appropriate that they should have a role in determining the LINK's priorities. Therefore this year we decided that the LINK conference should be aimed at LINK members and the general public, and that we would hold a separate event for statutory partners. This event was held on 23 October 2009 and was attended by **29 delegates** from a range of partner organisations.

Organisation	Representative
South of Tyne and Wear Primary Care trust	Liz Allan Judith Brown Emma Chapman Geoff Graham Norah Stevens Susan Joyce
Care Quality Commission	Lee Bennett Jeannie Eschle-Bell Suzanne McKean
Gateshead Council	Margaret Barrett Hazel Cuthbertson Paul Gertig Victoria Holliday Andi Parker Alison Routledge Andrea Tickner
North East Ambulance Service	Sahdia Hassen
Gateshead NHS Foundation Trust	Lucia Charnock Debbie Scorer Joanne Williamson
Gateshead LINK Steering Group	Dave Wallace Kay Parker Bill Llewellyn Gretel Keadell

	Julie Hope Ethel Donnelly
Gateshead LINK staff	Julie Whitehouse Ruth Dodds Kim Newton

LINK members presented reports on the work of the LINK and its four working groups. Delegates concluded that the event was a useful way of keeping partners informed, increasing their understanding of the LINK's work and enabling them to identify where they might effectively and positively contribute to the LINK's work. They also agreed that it was a good idea to hold 2 separate events for LINK members and the public and for partners. Partners were interested in the LINK work and wanted to be kept informed, but they did not think it was appropriate for them to influence the LINK's agenda and they often did not have the time to attend full day events.

6. Public Engagement and Communication

Outreach work

LINK members and LINK staff have taken information about Gateshead LINK into local communities and informally engaged with local people in a wide variety of settings. This engagement has involved face - to - face contact and the opportunity for local people to learn about the LINK's work and inform LINK members and staff of issues that affect them in health and social care. As a result of this informal approach the LINK has had contact with a total of **1568** local people. We know this because we keep a record of how many of our information packs are taken to events and how many are actually given out to local people on the day.

In addition LINK members and/or LINK staff go to scheduled meetings of voluntary and community sector groups across Gateshead to tell them about the LINK and encourage people to register as a member.

Outreach undertaken this year includes:

Community Settings	Location
Branch libraries	Blaydon Low Fell Birtley Sunderland Road Rowlands Gill Pelaw Crawcrook Felling Wrekenton Dunston
Community centres	Teams Bensham Whickham Winlaton
Community Fire Stations	Swalwell
Voluntary Sector events	Saltwell Park – Picnic in the Park Northern Pride Gateshead Carers' Week Way Out in Gateshead Mental Health Week

6.1 Communication and information methods


We provide regular information to our membership and the wider public via:

The LINK E-Bulletin is produced weekly and is sent electronically to all LINK members. It keeps them up to date with local, regional and national news in relation to Health and Social Care

Gateshead LINK Members e-bulletin
Week ending 12th March 2010

Gateshead LINK Website.....

Is now up and running to find out more or have your say on our on line blog visit
<http://www.gatesheadlink.org.uk/index.html>




Gateshead LINK would like to invite you to
A Rough Guide to Personalisation

Are you still confused around personalisation?
Do you want to cut through the jargon?
Come along for an informal information session to find out what it's all about in plain English!!!

Place:
GVOC, John Haswell House, 8/9 Gladstone Terrace, Gateshead, NE8 4DY

Date:
Tuesday 13th April 2010

Time: 10.30 - 1.00 including lunch
To book, log on to the website or ring Angie Maidment on 0191 4784103



The LINK newsletter is produced quarterly and is distributed to all LINK members and is sent to local community centres, libraries, schools, GP surgeries, Health Centres, Children’s Centres, the Queen Elizabeth Hospital and all voluntary and community sector groups who are registered with Gateshead Voluntary Organisations Council and Gateshead Community Network.



**Gateshead
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Newsletter Issue No 4 Winter 09/Spring 10

GATESHEAD LINK ANNUAL EVENT 09

The LINK held its second annual event in October 09. The morning was mainly about updating the membership on activity and checking if were still relevant.



The first elected Steering Group were welcomed and presented on the work of the LINK so far.

The afternoon was dedicated to the most important part of the day gathering opinion from the membership and public.

Opportunity was offered for local people attending to advise the LINK of emerging health and social care issues that have become a priority since the previous event in October 08.

Those attending the event said they thought the four working groups set up after the last conference were still relevant to the people of Gateshead.

Find out more on the work of the groups inside.....



What is a LINK ?

The Department of Health says

"Local Involvement Networks (LINKs) aim to give citizens a stronger voice in how their health and social care services are delivered. LINKs are run by local individuals and groups and independently supported. The role of the LINK is to find out what people want, monitor local services and to use their powers to hold them to account"

If you would like someone to come and talk to you or a group about the work of the Gateshead LINK and how to get involved please contact us today!

On 0191 4784103

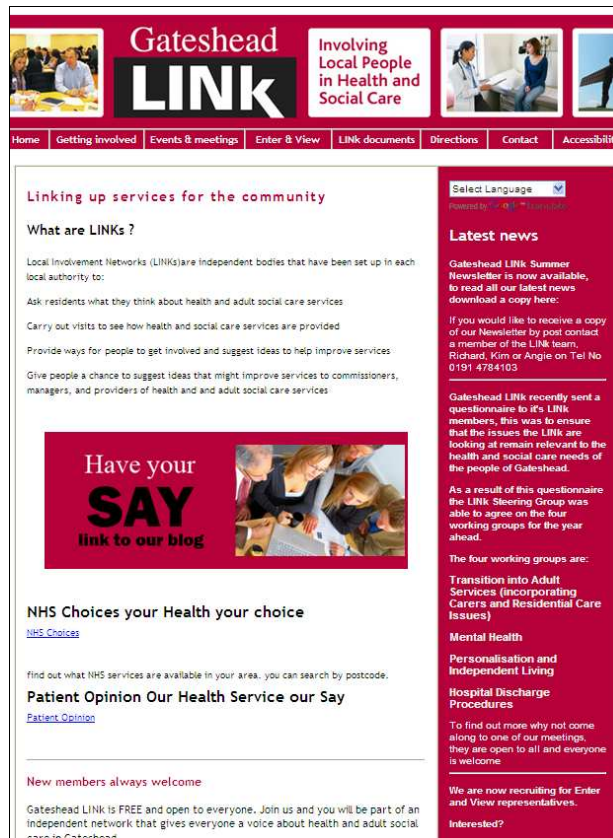
email : gatesheadlink@gvoc.org.uk



The LINK would like to express a big thank you to The Lawnmowers Theatre Group, who kicked off our afternoon session with a selection from the drama 'Heroic Feets'. This explores, in part, the actors' experience and views regarding 'personal budgets'.

The newsletter lets people know what we have been working on and any progress made. It also contains information on relevant local health and social care policy developments and publicises all LINK meetings for the coming quarter.

The LINK website www.gatesheadlink.org.uk is updated weekly and people can access all LINK meeting papers including minutes, LINK policy documents, LINK events and a calendar of all LINK scheduled meetings. In addition we post details of relevant Health and Social Care events in Gateshead that are open to the public. Local people can also post issues and comments on Health and Social Care on the website forum.



6.2 LINK Annual Conference

We held our second public event on 8 October 2009 at the Gibside Arms Whickham. The objectives of the event were:

- To introduce the elected Steering Group
- Update the membership and members of the public on the work undertaken in the last year
- To gain feedback on the appropriateness of the LINK work
- To advise the LINK of any emerging health and social care issues
- To raise the profile of LINK

The invitation to this meeting was extended only to LINK members and members of the public and the voluntary and community sectors.

A separate event was held for statutory stakeholders on 23 October 2009. We did this because it is LINK members and members of the public who the LINK seeks to involve and respond to. (see page 20)

The LINK Annual event was publicised in the following ways:

- Approximately 3000 flyers were distributed via partner data-bases and physically circulated to community venues
- Publicity material was distributed to various voluntary and community sector groups and to GP surgeries, hospitals, schools, community centres and libraries

81 people attended the event. A small number of statutory partners attended who were unable to attend the later Stakeholder event

In the morning session Steering Group and Working Group members updated the conference on the activities and progress of the four LINK Working Groups. (see page 26)

The afternoon session was dedicated to gathering opinion and information from LINK members and members of the public in relation to the current LINK Work plan and its future focus.

The outcome of the discussions was that the conference acknowledged the hard work and dedication of the Steering Group and Working Groups and that the focus on Carers, Residential Care, Mental Health and Hospital Discharge was still very relevant and should continue to be the LINK's focus. However the discussions also highlighted a number of other health and social care issues that the LINK could consider investigating further. These are as follows:

- Personalisation Agenda
- GPs/health centres
- Social Care delivery
- Health and Social Care staff training needs
- Information and communication between users, carers and health and social care professionals
- Autism

Many of these issues, such as Social Care delivery, GPs, staff training and information and communication already form part of the work plans of the 4 Working groups. However the Personalisation Agenda is clearly a new area of work for the LINK and the Steering Group subsequently decided to establish additional Working Groups **on Personalisation and Transition from Children's to Adult Services** (see page 43)

7. Demonstrating our impact

The four LINK working groups have each met at 6 weekly intervals throughout the year and have approached their work in a variety of ways: requesting information from partners, inviting relevant speakers from Health and Social Care organisations and undertaking informal visits to providers and commissioners.

7.1 Hospital Discharge Working Group

Key outcomes

7.1a We worked with Gateshead NHS Foundation trust to re-design **Hospital Discharge leaflets** for patients at the Queen Elizabeth Hospital

7.1b We researched the pharmacy provision at the Queen Elizabeth Hospital and contributed to an evaluation of QE's **Pharmacy Pilot**. On admission, the patients are supplied with a "green bag" by their GP which encourages the patient to bring their own medicines in from home. This is a key step in making the system more efficient and allows for an accurate "drug history" to be confirmed with the patient. Each patient has their medications confirmed by a pharmacist, within 24 hours of admission to hospital. This has significantly reduced the number of medication errors at the point of admission. The pharmacy team are also piloting a "Mobile Dispensing Unit" for use by the clinical pharmacists at ward level. This is a bedside dispensing trolley, with the aim of dispensing any required medication, at the patient's bedside. The mobile dispensing unit, uses the latest technology, and includes a lap top for remote access to all the hospital and pharmacy computer systems. In addition, the trolley is stocked with the top 30 drugs that are supplied on discharge. The LINK considered this to be an excellent scheme and have disseminated information about the Pharmacy Pilot to all our members and the wider community via our e-bulletins, newsletters and website. The involvement of LINK members was acknowledged in a press article in the Newcastle Journal newspaper. See over for press release.

23rd March 2010

Local hospital pharmacy makes medicines mobile

WITH PIC: Pharmacist Andrea Watt and Sister Dawn York with the mobile dispensing unit on a surgical ward at the Queen Elizabeth Hospital

THE pharmacy team at the Queen Elizabeth Hospital in Gateshead has developed a revolutionary system to help patients get home quicker.

The team has created a mobile dispensing unit (MDU) made up of an encrypted laptop, a wireless and Bluetooth enabled printer, and a compact trolley containing 30 of the most commonly prescribed drugs.

The secure unit allows the team to access information about patients' medication, create labels for their medicines and give patients their medicines straightaway, all at their bedside.

And the system – thought to be the first of its kind in the country – is proving so successful there are now four trolleys in use in the QE's surgical and general medical wards.

Gateshead Health NHS Foundation Trust Pharmacist, Mark Thomas, explained: "Historically, medicines were prescribed by the ward doctor, and checked for accuracy and safety by the ward pharmacist. The prescriptions were then delivered to the main dispensary at the main entrance of the hospital by the porters, where they were dispensed and delivered back to the ward. This whole process often meant that patients had to wait for their medication when they were told they could go home.

"Our aim in developing the mobile dispensing units was to provide better care and service to our patients by giving them more face-to-face consultation time with our team of highly skilled, clinical pharmacists and technicians and a fast, efficient and safe dispensing system.

"This is a really exciting initiative for us as we have already shown that up to 70% of discharge prescriptions can be processed at the bedside by using this system, which has got to be better for patients and means pharmacists time can be used helping other patients. It also means patients are more involved in decisions and discussions about their medication."

The initiative has also been hailed by nursing staff as being positive in terms of improving patients' experience, with Joanne Coleman, Modern Matron for Surgical Services at Gateshead Health NHS Foundation Trust saying: "Patients who are told they can go home by the doctor can now go much quicker than before thanks to this system, as their prescription can be dealt with on the ward and the pharmacist is on hand to explain their medication to them, meaning they don't have to wait around or go anywhere else for advice."

In February 2010 **patient representatives** from the **Gateshead Local Involvement Network** (LINK) group, which involves local people in health and social care, were invited to attend the pharmacy for a tour of the department, and to see a demonstration of the MDUs in operation.

Gateshead LINK member Lynne Patterson took part in the pharmacy visit and said: "It was very interesting as I didn't realise how much went on behind the scenes.

"The mobile dispensing unit is an excellent idea. It will be great for patients, as half the day can be spent waiting for prescriptions in hospital when you are anxious to get home, but this system should help bring that to an end."

7.1c Hospital Discharge Questionnaires

As part of our research into user's experience of hospital discharge procedures we have designed two distinct questionnaires: one for users and the other for GPs.

7.1c(i) Patients and users

The patient and users questionnaire was distributed to all LINK members, members of Gateshead Community Network and GVOC. It has also been distributed to GPs surgeries and LINK members have taken it to local health centres and hospitals to have face-to-face discussions with patients and record their experiences.

Patient and User Questionnaire

Gateshead Local Involvement Network (Gateshead LINK) has been set up to help local people influence or change the way their local Health and Social Care services are delivered.

Gateshead LINK has been told that not everyone is entirely satisfied with their discharge from hospital. The LINK would like to hear about your views and experience on the subject.

We want to hear everyone's views,



Good or not so good.

This is your chance to help decide which areas of hospital discharge are looked at by Gateshead LINK

If you have views on the following questions please fill in the boxes and return this form to us. If you are interested in joining the group who will be looking at this issue in more detail, please fill out the contact details section at the back and return to the address below:

**Gateshead LINK
GVOC
Freepost NEA3819
John Haswell House 8/9 Gladstone Terrace
Gateshead NE8 1BR**

Are there any particular issues around hospital discharge which you think Gateshead LINK should look at?

Transport

GP follow up

Social Care provision after discharge

Information you receive about your discharge

General after care

Other

You can tell us more here:

.....
.....
.....

**How was your experience of discharge?
(This could be also be as a Carer)**

Bad 1 2 3 4 5 Good

You can tell us more here:

.....
.....
.....
.....

Do you have anything else you would like to tell us?

.....
.....
.....
.....

Could you tell us how long you were in hospital?

What year was this?

Which hospital were you in?

Thank You

Date.....

Contact Details
(Provide as much information as you want)

Name.....

Address.....

.....

Post Code.....

Phone no.....

Mobile no.....

E-mail

How do you prefer to be contacted?

Data Protection Act 1998: The information provided will be held by Gateshead LINK and GVOC for future contact and monitoring purposes. It will only be shared with approved representatives and approved project auditors, and will not be passed to any other third party, individual or organisation.
Tick the box if you do NOT want us to share your information in this way.

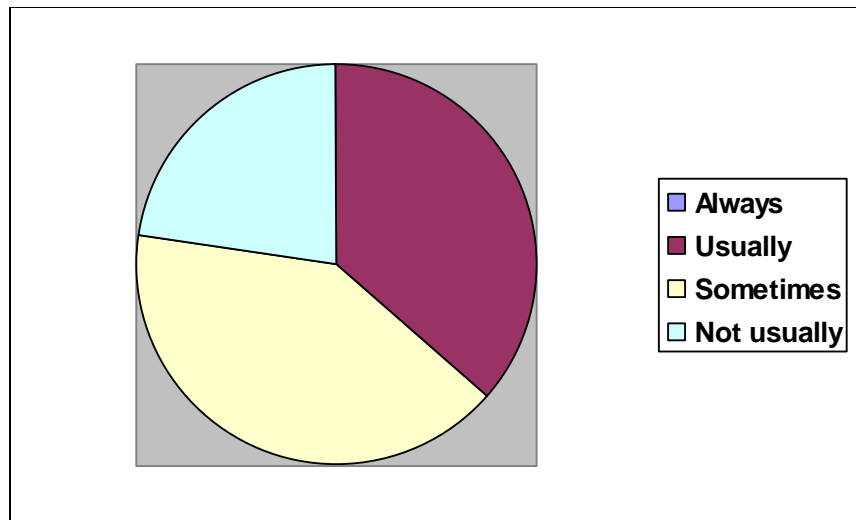
7.1c(ii) GP Questionnaire

We distributed the **GPs questionnaire** to all Gateshead GPs (39) and were delighted to get a 56% response rate.

We wanted to establish how well informed GPs were about their patients' discharge, the timeliness of discharge information and how complete this was from the GPs perspective. The results of this questionnaire are as follows:

Q1. We receive Discharge notices from hospitals as soon as the patient is released.

	Number	%
Always	0	0
Usually	8	36
Sometimes	9	41
Not usually	5	23



Comments received in response to question 1.

“We receive Discharge notices from hospitals as soon as the patient is released.”

4 GPs regard discharge as consistently being a problem and they made the following comments:

Often several weeks/months late.

Usually 2- 3 weeks late- can be several months.

Quite often a delay.

Major problem for all concerned discharge nurse, carer, GP (who is trying to co-ordinate medicines) and patient.

8 GPs see the service as inconsistent and made the following comments:

Need to standardise

Sometimes not early enough. Problem if patient needs medicine.

Some department are. better than others.

Completely variable.

Usually good but variable.

Very variable between departments

Could benefit from standardisation

Occasionally have to chase letters

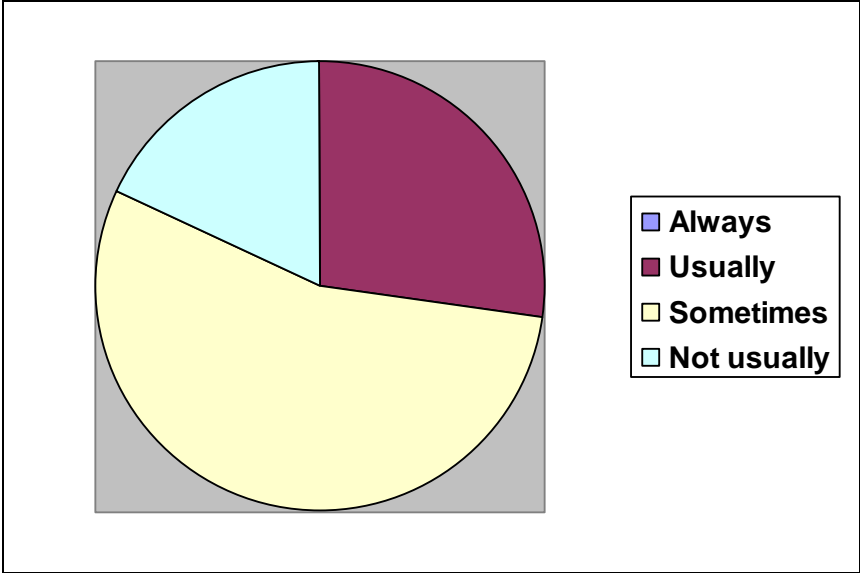
Other comments:

Gateshead prompt - Newcastle not.

Information hard to understand- should be typed onto discharge letters.

Q2. The information provided on the Discharge Form is clear and unambiguous.

	Number	%
Always	0	0
Usually	6	27
Sometimes	12	55
Not usually	4	18



Comments received in response to question 2.

“The information provided on the Discharge Form is clear and unambiguous.”

11 GPs commented on the illegibility of the letters:

Often hard to read and contain little information- we have to contact them for more.

Some of poor quality- poor writing.

Handwriting difficult to decipher, would be better if they were electronic. Can sometimes refer to 2 different areas (e.g. left or right) & need contacting to clarify.

Often poor quality- not easy to read.

Sometimes illegible

Sometimes unreadable

Writing is not always legible

Letters not written clearly for practice to read.

Sometimes unreadable- short relevant information better than long letter.

Poorly written at speed

2 GPs made specific comment about the use of carbon copies

Paediatrics good- flimsies (carbons) awful.

Dr's handwriting could be clearer. Sometimes receive illegible carbon copies.

There were 3 other comments

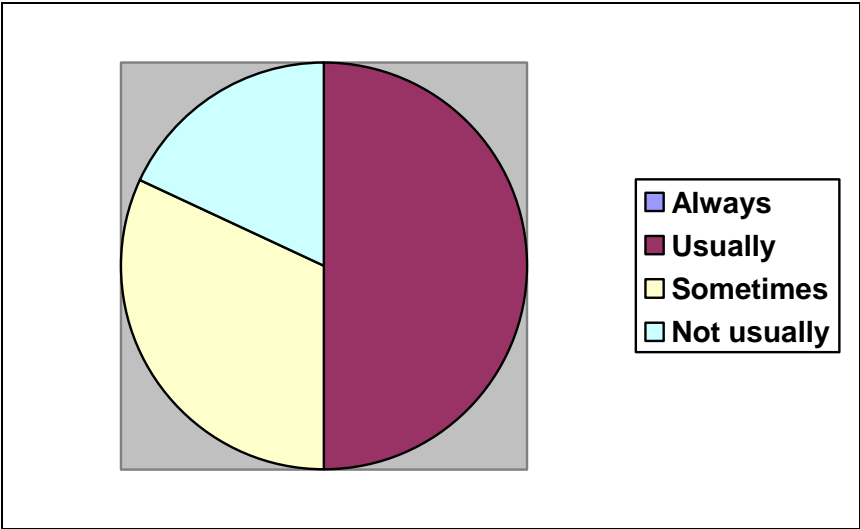
Very variable- sometimes adequate sometimes nothing at all.

Variable between departments

Hospital should contact surgery by phone if complex discharge.

Q3. The information sent to us on the discharge form is complete.

	Number	%
Always	0	0
Usually	11	50
Sometimes	7	32
Not usually	4	18



Comments received in response to question 3.

“The information provided on the Discharge form is complete.”

9 GPs commented

Can sometimes need chasing up for further information

Pharmacy details usually reliable

Date, medicines, diagnostics, diagnosis missing

Usually more information and results required

Details of treatments sometimes missing

Very variable- sometimes adequate sometimes nothing at all

Very variable

Follow up arrangements unclear

Could benefit from standardisation

The results of this survey will be matched with the results of the **user questionnaire**, which is still ongoing. We want to ensure that we get a good range of responses to our user questionnaire and the Working Group have decided to extend the timeframe for completion beyond March 2010.

7.2 Mental Health Working Group

Key outcomes

We contributed to the development of a **Gateshead Mental Health Directory** that is now widely available across Gateshead and is available as a community resource.

We held meetings with Gateshead NHS Foundation Trust staff to discuss the work of the **Urgent Care and Home Care Team** to gain a better understanding of how people access their services.

We examined how mental health networks and partnerships fit together in Gateshead and **self referral into crisis intervention services**.

We held a meeting with South of Tyne and Wear NHS Trust to clarify the processes and procedures that need to be followed by people and their carers in a **mental health crisis**.

We held discussions with Gateshead's Overview and Scrutiny Committee regarding their investigation into and subsequent report on **Mental Health in Gateshead**.

7.3 Residential Care Working Group

Key Outcomes

Through research and partnership working we have established the **range of residential care providers** in Gateshead.

We gave information and evidence to the **Care Quality Commission** inspectors during their inspection of Gateshead Adult Social Care provision.

We invited the Care Quality Commission and Gateshead Council's Adult Social Care Contracting Team to explain the **National and Local Standards** for assessing the quality of residential care homes in Gateshead.

7.4 Carers' Working Group

Key outcomes

We began by looking at the priorities identified by local people at our Annual Conference and concluded that some of these were already being considered by Gateshead Carers Association. Consequently our work has focussed on.

- Examining the level of **advocacy support** available to carers. We worked with Gateshead Advocacy and Information Network (GAIN) to establish gaps in services. As a result of this work we decided to hold an open event to raise awareness of **Personalisation and Direct payments**. This is scheduled for April 2010.
- We invited Gateshead Council to tell us how the money for care packages will be decided within the **Resource Allocation System**.

8. LINK Requests for Information

We have made **8 requests** for information from partners to progress the work of the LINK's priorities.

Date of request	Request	Response
19.5.09	To Gateshead Council seeking LINK representation on Learning Disabilities Partnership Board	Representation achieved
2.7.09	To Queen Elizabeth Hospital asking for information on Hospital Discharge Procedures	Meeting between LINK members and QE Hospital staff
2.7.09	To North East Ambulance Service Board seeking information on their expenses policy for LINK members who attend the Board meetings	Clarification of policy received
6.8.09	Request to CQC for the LINK to be involved in their work at a local level	Received invitation to contribute to CQC Inspection into Adult Social Care provision in Gateshead
21.9.09	To Northumberland NHS Trust requesting information about the self referral process for people with learning disabilities/mental needs	Received letter outlining policy and member of the Trust attended March meeting of Mental Health working group to give a presentation about self referral
6.10.09	Request for information from QE Hospital about their Pharmacy Pilot	Response was to invite LINK to visit the pharmacy and see the Pilot in action
4.2.10	Request for LINK involvement in Joint Strategic Needs Assessment process	LINK invited to contribute to JSNA. LINK submitted report that was included in JSNA Report. The LINK is now represented on Gateshead's JSNA Working Group
4.3.10	To QE Hospital to enable LINK Steering Group member to visit and meet with the Patient Advice and Liaison Service	Agreed to arrange visit in April

9. Gateshead LINK Financial Report April 2009 - March 2010

Budget		Actual	April - March 2010	
			Budget	Variance
	-			
	-			
	-			
	Income			
130000	Grant	130000	130000	
51359	B/F	51359	51359	
181359	-	181359	181359	
	Expenditure			
84004	Salaries	79743	84004	4261
5000	Additional staff time to set up LINK	2646	5000	2354
592	Insurance (cost for extra PI insurance)	592	592	0
642	Capital equipment	166	642	476
17000	Management, finance and infrastructure support	17000	17000	0
515	Audit	515	515	0
15000	Post,stat,phone,ICT,publicity,marketing,subs	16926	15000	-1926
5150	Rent/Service charges	5150	5150	0
7500	Room hire, catering, events	5147	7500	2353
7000	Staff training & travel	1367	7000	5633
10000	Members travel/training/CRB/translation/ins	3120	10000	6880
2000	Annual Report, design, print & distribution	1943	2000	57
154403	Total Expenditure	134315	154403	20088
	-			
26956	surplus	47044	26956	
	* incl website			

10. Future Work Programme 2010-2011

LINK Working Groups will continue to explore and evidence key issues with Gateshead communities.

10.1 The Mental Health Working Group

We will work in partnership to produce an Urgent Care Leaflet in order to raise awareness in Gateshead of what the provision in this area is. This will involve looking at the role of the police for service users in a crisis.

We also will learn more about Northumberland NHS Trusts “green light toolkit” system and do further research into where service users with dual diagnosis go to for help in a crisis.

We will learn more about the service that Gateshead PCT’s 24/7 Team provides for service users with drug/alcohol problems and will use our powers to enter and view to enable visits to Services.

On October 7th 2010 we will be holding our first Gateshead LINK Mental Health conference. This will look at the Review of the Mental Health Act document and its impact so far, with particular reference to the South of Tyne & Wear Mental Health Model of Care document.

10.2 Hospital Discharge Working Group

The group has negotiated with the Gateshead Health NHS Trust to ensure that every patient discharged from the Queen Elizabeth Hospital Gateshead will be given the opportunity to complete the Gateshead LINK questionnaire. The results gained from this will be combined with the excellent information already obtained from GPs and a report will be produced which will be disseminated to those who can effect change.

The LINK has been invited to be represented on the Gateshead NHS Trust’s *Franks Report Board* and on a Hospital Discharge group formed by Gateshead Council in response to a Care Quality Commission inspection into Adult Health and Social Care in Gateshead.

This will provide the LINK with the chance to influence and formulate policy and to effectively represent the people of Gateshead.

10.3 The Personalisation and Independent Living Group.

This group is still formulating its work plan for the next year and has decided to concentrate on the following 5 objectives:

To raise awareness of the 'personalisation agenda' amongst the people of Gateshead.

To establish a set of principles that should apply to all people and agencies involved in personalisation and independent living.

To research and discover what the existing policies are in Gateshead and who are the delivery agents.

To actively recruit those involved in personalisation and independent living, to become members of the LINK. This will help us be better informed and raise our credibility in this field.

To ensure LINK representation and influence on the relevant partnerships and bodies.

10.4 The Transition to Adult Services Working Group.

This group is still formulating its work plan for the next year and has decided to concentrate on the following 6 objectives-

To raise awareness of the needs of young people and their carers in relation to transition.

To establish a set of principles that should apply to all people and agencies involved in the transition to adult services.

To research and discover what the existing policies are in Gateshead and who are the delivery agents.

To actively recruit those involved in transition, both young people and their carers to become members of the LINK. This will help us be better informed and raise our credibility in this field.

To ensure LINK representation and influence on the relevant partnerships and bodies.

Liaise with partners to promote advocacy services related to transition and encourage it's take up.

10.5 LINK Annual Event (October 2010):

This event will report back to the wider public on LINK achievements to date and ask the public to re-assess LINK priorities for the coming year.

10.6 Involvement

We have decided to **prioritise** the following areas of work in the coming year

- young people
- older people
- BME groups
- Learning Disability

We have already made contacts through various existing forums to identify specific areas of work which include:

- Working with Gateshead Youth Assembly and the PCT to produce an information flyer designed by young people, in line with *Your Welcome Quality Criteria* (Dept of Health) guidelines.
- Working with Older People to have their voice heard using electronic media by linking in to the Generations Together Project (Gateshead Older People's Assembly).
- Working with Development Workers in the BME community, particularly in Mental Health to ensure input into the Working Groups.
- Working with Learning Disability agencies to promote the LINK using appropriate software for publications. We've also achieved representation on Gateshead Disability Partnership Board and it's subgroups.

Acknowledgements

The Steering Group would like to thank the LINK staff for their hard work, dedication and continuing support of all LINK members.

We also acknowledge the dedication of Working Group members who have given their time freely to ensure that the work of the LINK continues to concentrate on the priorities of local people.

11. Glossary of Terms

BME	Black and Minority Ethnic
CPS	Crown Prosecution Service
CQC	Care Quality Commission
CSCI	Commission for Social Care Inspection
GCN	Gateshead Community Network
GP	General Practitioner
GVOC	Gateshead Voluntary Organisations Council
JSNA	Joint Strategic Needs Assessment
NEAS	North East Ambulance Service
OSC	Overview and Scrutiny Committee (Gateshead Council)
PALS	Patient Advice Liaison Service
PCC	Primary Care Centre
PCT	Primary Care Trust
PDSI	Physical Disability and Sensory Impairment
PEANuT	Participatory Evaluation and Appraisal in Newcastle Upon Tyne
PPI	Patient and Public Involvement (Forum)
QE	Queen Elizabeth Hospital
SOTW	South of Tyne and Wear