

Health Ambassadors Action Points

Meeting: Health Ambassadors

Date: Monday 30 April 2018

Time: 2.00pm – 4.00pm

Location: Trades Club, Frenchgate, Doncaster

Members Present: Dennis Atkin (DA) – Chair
Curtis Henry (CH)
Carmelle Harold (CHa)
Mary Jones (MJ)
Cath Fox (CF)
Julia Burnes (JB)

Apologies: Shell Arliss (MA)
Andrew Goodall (AG)

In Attendance: Emily Green (EG) – Business Support Officer, Healthwatch Doncaster
Stacey Marshall (SM) – BSL interpreter
Sarah Cox (SC) – BSL interpreter
Carolyn Ogle (CO) – Associate Director of Primary Care, NHS CCG
Lisa Lee (LL) – Transmission
Rufus (?) – Transmission

Welcome, Introductions and Housekeeping	DA welcomed everyone to the meeting and introductions were made.	
Apologies	Shell Arliss (SA) Andy Martin (AM)	
Minutes of the last meeting and matters arising	The minutes from the last meeting held on 26 March 2018 were agreed and set as a true record by those present at the last meeting.	
Carolyn Ogle – Associate Director of Primary Care NHS CCG	CO attended the meeting to provide responses to questions raised by ambassadors, regarding issues relating to primary care interpretation/ translation service provision. The ambassadors raised their viewpoint around access to translation, interpretation, BSL and other forms of 'communication support'. JB highlighted the following issues with translation services for asylum seekers and refugees	

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	<ul style="list-style-type: none"> • GPs reluctance to utilise translation services • Hospital translation provision was 'patchy'. • Telephone translation/access to hospital services was not consistent across all departments. • No offer from DBH for face-to-face translation provision – patients often asked to bring an English speaker with them. • Dentists do not routinely use interpreters. <p>MJ re-iterated her concerns about Deaf community and the continuous problems they experience when accessing health services. MJ highlighted some resources are good, some not so good. One-to-one communication with medical staff partially doctors is problematic. More needs to be done to raise awareness of GPs about the requirements for Deaf service users.</p> <p>CO provided an explanation of how/ who provides translation and interpretation services locally. Also, clarify on how this should be provided by health service providers.</p> <p>CO also explained how GP services will be provided in future and the plan for them to operate on a 24/7 basis from the 1 October 2018.</p> <p>DA thanked CO for her input and time to the meeting which had been well received by those present.</p> <p>Action: CO to attend a future meeting to provide an update.</p> <p>Consideration by Ambassadors to be given to identify issues around communication processes or lack of being a part of the difficulties being experienced by the groups they represent. This may be appropriate to forming a 'task and finish' process addressing particular issues identified. Agenda item next meeting.</p>	
<p>LGBTQ Community – Lisa Lee/ Rufus (?), Transmission</p>	<p>The Chair (DA) welcomed LGBTQ representatives to the meeting and thanked them for their involvement and future participation within the Health Ambassadors scheme.</p> <p>LL provided a verbal overview of transmission support group and the service offered in Doncaster.</p>	

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	<p>LL highlighted many issues for LGBTQ community partially transgender patients and the barriers for them when accessing services. LL highlighted some of the following concerns:</p> <ul style="list-style-type: none"> • Care records –personal records - not always updated or gender appropriate. • A complicated and lengthy process is currently being utilised for recognition and identifying transgender people. • GPs have little or no understanding of transgender and how to deal with this from a medical perspective. • People in transition may often self-medicate to overcome the barriers for getting medical diagnosis and medication/treatment they require. • Transgender people feel they are presently being discriminated or disadvantaged to some degree within the current health system. <p>LL expressed the importance of GPs and other medical staff having greater awareness and understanding of trans issues. LL highlighted areas of good practice within other areas and hoped to be able to replicate this in Doncaster by influencing a local GP to take the lead for trans issues and their access, experience and outcomes from health service provision.</p> <p>Action: Further discussions to take place to explore how issues for trans people can be escalated (i.e. NHSDCCG Governing Body Patient Experience meetings)</p> <p>Action: LL to lead a sub-group on this and update any progress at future meetings. Agenda item next meeting under heading of ‘Ambassador Updates’.</p>	
<p>Feedback from discussion with Andrew Goodall and Debbie Hilditch</p>	<p>DA fed back on the discussions within the meeting involving AG and DH, highlighting the outcomes from the discussion around a suggested plan. The idea is to create a ‘Task and Finish Group’ as a mechanism to escalate and address issues of concern raised by different health ambassador representatives on behalf of their client group. The group requested they need to understand the detail around the ‘task and finish’ approach and how this will feed in to the work of the CCG.</p> <p>There was a wider discussion about the marketing and promoting of the scheme to attract wider or new member representatives.</p> <p>Action: AG to attend the next meeting to discuss the future delivery of the scheme To be added to the agenda.</p>	

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AOB	<p>CHa made the group aware she will now be representing Doncaster Mind and Changing Lives as both organisations now have a joint contract for mental health.</p> <p>CH announced his secondment with HWD will end on 1 June 2018 and will return to his substantive position at within NHS DCCG. The future arrangements around attendance are yet to be agreed, as the responsibility for delivering meetings remains with HWD.</p> <p>The Health Ambassadors gave a big thank you to CH for his contributions and the level of support provided to the scheme.</p>	
Close	Meeting closed at 4pm.	