

Meeting: Health Ambassador Meeting

Date: 26th June 2017

Time: 2.00 p.m. till 4.00 p.m.

Location: Trades Club, Doncaster

Present:

Name	Organisation
Dennis Atkin	Chair
Carmel Bury	Vulnerable Women - Platform 51
Cath Fox	LGBT Representative
Andy Martin	Veterans Representative

In Attendance:

Name	Organisation

1.	Welcome and Introduction	Actions
2.	<p>Apologies</p> <p>Peter Nicholson (Deaf community representative) Mary Jones (Deaf community representative) Rob Tame (Learning Disabilities) Sam O'Neil (LGBT - Transgender Representative) Emma Ward (visually impaired Representative)</p>	
3.	<p>Notes of the last meeting</p> <p>Due to the shortfall in attendance at the previous meeting, no minutes /notes were produced from that meeting. In light of this, no minutes were available for approving at this meeting.</p> <p>As an alternative measure to postponing the above meeting, it was decided to use the time allotted to engage with members in general discussion about the current position/ situation of the scheme. In addition, time would be used for sharing ideas toward how we can best ensure this forum/ arena is fit for purpose and is not adversely affected by the recent shortfalls in participation by representatives within meetings.</p> <p>Areas of the scheme, where it was felt may benefit from more focus were the marketing and promotional aspects of the scheme. There was a consensus toward allowing time to explore this further and identifying</p>	

	<p>different ways in which the profile of the scheme and meetings could be raised to attract wider interest.</p> <p>One of the outcomes from this discussion, highlighted the possibility/ need for members to utilise their time within the meeting scheduled on 26th June 2017 to undertake a self-assessment or self-evaluation of the scheme, which could assist to identify areas for future development.</p> <p>Action CH – Action: In consideration of the above: Curtis offered to organise and deliver a S. W. O. T (Strengths, Weaknesses, Opportunities, Threats) Analysis type activity, which would assist with generating a broader understanding of the current position of the scheme and help produce ideas which assist to determine some of the key areas and action for further development around future delivery of the scheme/ meetings.</p>	
4.	<p>Agenda item: Health Ambassador Updates</p>	
	<p>Cath Fox (LGBT Representative)</p> <p>C, F. provided an updated to the group about the forthcoming Doncaster Pride event (19th August 2017). This year’s event will be held at the usual venue: Nigel Gresley Square Waterdale Doncaster. As part of this event, a procession/ parade will take place via a planned route, through Doncaster town centre.</p> <p>C, F. Raised awareness of the promotional and/ or marketing opportunities available within the Pride event, which is being targeted at local organisations and businesses. Cath advised members to contact her in the first instance, if this was something which was of interest to anyone.</p> <p>C, F provided an update on the conversations between C, Wilkinson and herself, regarding C, W. being put forward as the nominee/ ambassador for mental health. – C, F. to follow up on this and confirm C,W’s attendance / otherwise</p> <p>Andy Martin (Veterans Representative)</p> <p>A, M. provided a verbal updated on information regarding veteran mental health and wellbeing, and the impact that ‘combat’ stress’ can have upon a veterans’ mental health.</p> <p>A, M. raised the following point, regarding an emerging issue for mental health services and their current offer for addressing the mental health & wellbeing needs of veterans.</p>	

A, M. highlighted on the potential or likely impact upon community based, mental health service provision from veterans who have returned from recent or previous military service and campaigns.

A, M. Spoke about his understanding of the current situation for veterans and the ever-increasing number of veterans who return from military service and consequently, are suffering with the 'combat stress'. Andy explained how the impact from this can be detrimental to the mental health well-being of soldiers.

A, M. raised the issue about how the demands placed on mental health service provision by soldiers occurs in wave like patterns of increased traffic/ activity. **A, M.** explained, patterns in usage are believed to be largely due to the 'fall out' from various military campaigns where UK forces have served to the present date and ensuing years.

A, M. explained, due to the high level of need and demand from veterans who require support from mental health services, he was concerned about the perceived inadequacies within the current mental health service provision to deal with such demands. **A, M.** expressed; how he felt the current service offer was one which was presently inadequate for meeting the mental health wellbeing needs of veterans.


A, C. concluded by stating, he would like to further explore the concern/s highlighted above to gain a clearer understand of what the service provides for veterans

C, H. to explore the possibilities around identifying a representative from mental health to attend a future Health Ambassador meeting. The aim of this being for them to present an overview of m/h services. Also, to clarify on how the needs of veterans are being met by the current offer from mental health services.

D, A (Chair) spoke about an issue that he's aware of regarding some patients and their timely access to a GP through the current arrangements of the GP appointment system which is presently in place.

D, A. (Chair) informed the group, he was aware of one individual who he felt could have prevented a serious, life threatening health problem (Cancer) escalating if perhaps, an earlier GP appointment and diagnosis of the problem would have been performed sooner.

D, A re iterated his point, that certain aspects of the current appointment system for GP's was something which he felt needed to improve by being able to take more account of emergency health issues, such as this. The

	<p>timelines or delay between feeling ill and physically seeing a Doctor can on occasion be too long.</p> <p>D, A. (Chair) spoke about how it is imperative that people are diagnosed early, particularly, with regards to cancer as some forms of cancer are known to be more aggressive than others. Speedy action is required to prevent problems escalating and becoming worst.</p> <p>C, H. spoke about the role of Healthwatch Doncaster, highlighting the Feedback centre as one of the key tools for collecting patient experience and information on health and social care service provision. Curtis encouraged members to promote and raise awareness of the feedback centre with members from their respective communities and encourage them to utilise the feedback centre to share their stories and experiences of health & social care services.</p>	
5.	SWOT Analysis – see attached	 SWOT Analysis doc-PPG Network.docx
6.		
7.		
8.	AOB	
	Date and Time of the Next Meeting: 29th August 2017	