

**IMPROVING HEALTHCARE TOGETHER 2020-2030 (IHT)
NHS SURREY DOWNS, SUTTON AND MERTON CLINICAL COMMISSIONING GROUPS
CONSULTATION OVERSIGHT GROUP**

MEETING NOTES

Date: 11th July 2019

Time: 14:00-16:00

Location: Rose room – Bourne Hall, Spring Street, Ewell, Surrey, KT17 1UF

Present		
Name	Initials	Organisation
David Williams (Chair)	DW	Healthwatch Sutton
Nadine Wyatt	ND	Sutton CCG
Keziah Miller	KM	Sutton CCG
Brian Dillon	BD	Healthwatch Merton, Chair
Murray Glenister	MG	Healthwatch Surrey - volunteer
Fiona Gaylor	FG	Merton CCG
Dave Curtis	DC	Healthwatch Merton
Pete Flavell	PS	Healthwatch Sutton

Programme representatives		
Jaishree Dholakia	JD	Improving Healthcare Together 2020-2030 Patient & Engagement Lead
Josie Weller	JW	Improving Healthcare Together 2020-2030 Programme Support Executive

Item	Discussion	Actions
1	<p>Welcome, introductions and apologies The Chair introduced members to the second Consultation Oversight Group meeting and asked everyone to introduce themselves.</p> <p><u>Apologies</u> Jackie Tapping – Healthwatch Surrey Sally Dubery - Central Surrey Voluntary Action Liz Patroe - Guildford and Waverley CCG Julian Lee – Sutton resident Alan Sydenham - Community Advocate: Sutton</p> <p>The Chair clarified that due to a traffic accident those who were initially able to attend were now not able to make the meeting in time and this has reduced the number of attendees.</p>	
2	<p>Review and agree draft notes from the 31st May meeting The draft notes were agreed and signed off by members.</p>	

<p>3</p>	<p>Knowing our local communities</p> <p>To prepare for a potential consultation it is important to understand who lives in the area and uses the impacted services: maternity, paediatrics, acute and emergency medicine. JD therefore presented a high-level profile of local communities to the group for further discussion, comment and feedback:</p> <p><u>Merton</u></p> <ul style="list-style-type: none"> Population in 2014: 203,200. 1 in 3 or 29% of households are 'single person' households <p>ACTION: Share with JD & JW the Merton Council link for more up-to-date information on population</p> <ul style="list-style-type: none"> Gender split is 50:50 and 22% of population = women aged 16 – 44, which is higher than the national average 37% of population from Black, Asian and Minority Ethnic (BAME) communities Other languages: Polish: 3.5%, Tamil: 3.1% A young population: 25% aged 0-19 (48% of BAME origin) <p>ACTION: Share Merton Health and Care plan with JD and JW and source data particularly on health inequalities in the area</p> <p>FG also raised the need to keep social isolation in mind.</p> <p><u>Sutton</u></p> <ul style="list-style-type: none"> 202,000 residents in 2018 from Sutton CCG annual and engagement reports, Mott McDonald Initial Equalities Analysis <p>ACTION: Share link for data sources in Sutton</p> <p>Chair highlighted that the Department of Public Health in Sutton have issued their own annual report.</p> <p>ACTION: Review the Sutton public health report for further data</p> <ul style="list-style-type: none"> Younger than London and national average (i.e. 0-19 year olds). More people of working age (35-44) in Sutton compared to the national average Less diverse than London average but more diverse over last decade: 29% of population from BAME background Roughly 20% of the population provide over 50 hours of care per week and some of these people live in communities which face many life challenges e.g. poverty. People who provide more hours of care are at greater risk of poor health and being isolated. 14% of the population has a limiting long-term illness People in Sutton can feel lonely: 1 in 10 say they do not get enough social contact 15% of the population is over 65 Most deprived wards: Beddington South, Belmont, Wandle Valley, St Helier and Sutton Central 	<p>FG</p> <p>FG</p> <p>FG</p> <p>NW</p>
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	<p>PF commented that the Sutton Healthwatch children and young people survey in secondary schools showed 31% were of White-British origin two thirds of BAME origin. The Chair noted that children do travel from outer borough to schools.</p> <p>NW advised on including Rose Hill as a deprived ward.</p> <p><u>Surrey Downs</u></p> <ul style="list-style-type: none"> • Population estimate in 2015: 287,000 • One in five people are over the age of 65 years which means an ageing population • 1,400 people in Surrey Downs between the ages of 18 and 64 years have a serious personal care disability • Over 4,000 adults living in Surrey Downs have a learning disability • Surrey Downs in general has an affluent population – over 55% of the area falls within the least deprived wards in England. • Large carer community: 28,000 • 9.1% of the population is of BAME origin (below the national average) • Large Gypsy Roma and Traveller community – these communities have worse health outcomes than any other group <p>JD added that although an affluent area there is a food bank in Epsom where she has engaged and there is a large traveller community, which it is important not to forget.</p> <p>ACTION: Research further the travelling community in Surrey Downs.</p> <p>ACTION: Circulate website link for the first draft independent interim Integrated Impact Assessment report to members of the group.</p> <p>ACTION: Source more information on where service users come from if this is available.</p>	<p>JD</p> <p>JW</p> <p>JD</p>
<p>4</p>	<p>Community connectors</p> <p>JD introduced the group to the workshop part of the meeting called ‘Asset based community mapping’:</p> <p><u>What is Asset based community mapping?</u></p> <ul style="list-style-type: none"> • Involves identifying the skills, talents and resources that are within a community or neighbourhood <p><u>What are the benefits of asset mapping?</u></p> <ul style="list-style-type: none"> • Recognises that everyone has skills and talents that support community well-being • Understands that when members of a community use their skills and talents they are strengthening the community 	

	<p><u>Co-production</u></p> <ul style="list-style-type: none"> • Helps build a vision of communities and neighbourhoods as places where skills and talents are valued and moved into action • People who use services are hidden resources, not drains on the system. No service that ignores this resource can be efficient. • Individuals, communities and public service organisations having the skills, knowledge and ability to work together, create opportunities and solve problems. • Neither government nor citizens have access to all the necessary resources to tackle problems on their own. <p>Members were then asked to break out into Merton, Sutton and Surrey Downs groups (depending on where they are based) to provide feedback on the following question:</p> <p>“Which organisations, networks, umbrella bodies or people in Merton, Sutton and Surrey Downs could we engage with for a potential consultation?”</p> <p>Please see Appendix One for workshop feedback – this information includes follow-up with members of the group who could not attend the meeting and will be added to as and when further feedback is received.</p>	
5	<p>Any other business</p> <p>Some members of the group agreed that if there is a consultation enough time and notice should be given to help them prepare for and support it – they would actively consider not being part of the consultation if this was not made available.</p>	