



healthwatch
Gateshead

Annual report
2017–18



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Message from our Chair

Our focus has been on expanding opportunities for engaging people and communities in places where they receive services, such as hospitals and events.

We have produced reports on areas which the public said were priorities for them, such as carer's assessments and NHS continuing healthcare. I urge you to read the reports to gain a full sense of how Healthwatch Gateshead gets to the real issues affecting people. We take pride in carrying out thorough research and producing concise reports, backed up by strong evidence. Our recommendations for improvements are mostly welcomed by the services we examine and some recommendations are carried out very quickly. An example is the report on page 9 regarding continuing healthcare. We are also starting to influence the commissioners of services in the NHS and Gateshead Council, as they use our information to inform how service contracts will be developed and tendered.

Despite being a small team we have made sure we are represented at key meetings, where decisions are made to change and reshape services. It is our duty to make sure Gateshead residents have their right to be fully heard and that they are properly consulted and involved. They must have real influence on how services develop and where resources are prioritised. We are gaining a reputation for expertise on how best to engage and involve residents in sometimes difficult and complicated issues, where their views must be taken into account. We are prepared to challenge and speak up on behalf of residents if we do not think they

are being listened to or are not being given the opportunity to take part.

Looking ahead we will further develop how we measure what we do to ensure we can demonstrate value for money. We will engage people in community-based settings, such as dentists and opticians, and carry out more outreach work with diverse communities. We will expand our volunteer base to gather more views and observe delivery of services. We will continue to publish reports to improve services based on priorities the public have said are important to them.

There is no doubt that the year ahead will continue to be challenging due to national and local financial pressures on the council and the NHS. We will keep track of any developments regarding sustainability and transformation plans and how health and social care reorganises to jointly deliver services. We will make sure Gateshead people have meaningful involvement in these important areas. It is vital Healthwatch Gateshead continues to give a voice to health and social care service users and the general public to make sure services reflect their needs and aspirations.

All of this activity could not take place without the commitment of the staff and volunteers. Their impressive work belies the fact they are a relatively small team working within a tight budget. A big thank you goes to them for continuing to develop Healthwatch Gateshead into an effective voice for Gateshead's residents.



Michael Brown
Healthwatch Gateshead Committee Chair

Message from our Chief Executive

This year has been extremely busy. We have been transitioning from the old format Healthwatch Gateshead to our new refreshed model.

This has involved changes in both job roles and everyday practice for staff. We officially welcomed Wendy Hodgson as the Operations Manager in July, although she had been working with us since late March on an interim basis. We also saw Kim Newton and Carole Gourdie taking up roles as Project Managers, and Victoria Clarke as our Volunteer and Outreach Coordinator. We also welcomed our new Healthwatch Gateshead Committee this year and are experiencing the benefits that having a diverse and experienced Committee steering our work can bring.

Despite this being the first year of the new Healthwatch Gateshead, and us going through a lot of change, I am so proud of all that the team has managed to achieve. Within the first six months of this year we had completed research into people's experiences of carer's assessments. This work was perfectly timed to help influence the new specification for carers' support services. The new contract has now been awarded and we look forward to seeing how our work will improve services.

Our research into NHS continuing healthcare has also been very well received, and while it is still early days we have already seen some improvements in public information and the management of young people's care as they move into adult services.

During autumn 2017 we led some innovative work to support engagement on the future model of community mental health services in Newcastle and Gateshead. Our 'fringe' events allowed service users, relatives and carers, voluntary and community sector representatives and members of the public to get involved in very intensive work. People taking part in the redesign work commented on how impactful this work was and we are looking forward to supporting further work in the near future.

Our Healthwatch Champions (volunteers) are at the forefront of our work and without them we would not achieve as much as we do. We said goodbye to some Champions at the end of last year but have welcomed new additions to the team. Our Champions have continued to work with us over the last year in a number of different roles and are helping us to develop new ways in which they can add to our work.

I have personally enjoyed getting to know Gateshead, its services and people. Most of what we do is about building relationships and being trusted so that people feel safe about sharing information with us. It is vitally important when it comes to making a difference and having an impact with the people who plan and provide services. Although we have only started to do this, we have made a great start and I am looking forward to the year ahead.



Steph Edusei
Healthwatch Gateshead Chief Executive

Highlights from our year

We reached more than 174,000 people on social media



Our volunteers help us with everything from information stalls to carrying out face-to-face research



We carried out over 50 engagement activities to reach local people and collect their views



Our reports have tackled issues ranging from carer's assessments to NHS continuing healthcare



264 people took part in our survey about carer's assessments



Our volunteers gave 328 hours of their time





Who we are

You need services that work for you, your friends and family. That's why we want you to share your experiences of using health and care with us – both good and bad. We use your voice to encourage those who plan and run services to act on what matters to you.

Our vision:

Have your say and we will make sure your voice is heard by those who make decisions on your behalf

Many services that people use in Gateshead are delivered or commissioned by organisations that cover larger areas, so we often work closely with our colleagues in other local Healthwatch as well as with partners in the voluntary and community sector.

To do this we believe it is important that we...



Listen often and widely – to as many people as possible who use social care and health services in Gateshead to gather views.



Speak loudly and clearly – to the people who plan, commission and deliver services about the things people are telling us.



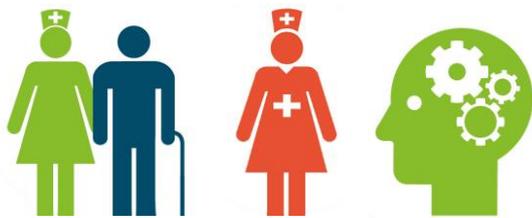
Work together and effectively – to influence services to improve when there are issues, and to share good practice when they do things well.

Our priorities

We carried out a process of analysis and consultation during spring 2017 to choose our annual priorities. This included analysing feedback from the public and examining local intelligence on health and social care issues from various sources including reports, providers and commissioners, and voluntary and community sector organisations.

We also asked delegates at our annual conference to choose their top priorities from a longlist. The Committee then decided on the following priorities for 2017–18:

1. Carers
2. NHS continuing healthcare (a joint project with Healthwatch Newcastle)
3. Mental health



Healthwatch Gateshead staff team during 2017–18

- Victoria Clark, Volunteer and Outreach Co-ordinator
- Steph Edusei, Chief Executive
- Carole Gourdie, Project Manager
- Wendy Hodgson, Gateshead Operations Manager and Deputy Chief Executive of Tell Us North
- Kim Newton, Project Manager
- Nicola Winship, Finance and Administration Officer (left February 2018)

Healthwatch Gateshead Committee members during 2017–18

- Julie Boyack
- Michael Brown (Chair)
- Lynda Cox
- Ann Dymyd
- Lola McPartland
- Michael Peacock
- Shamshad Shah
- Ian Wolstenholme

Healthwatch Gateshead Champions (volunteers) during 2017–18



- Ann Atkinson (stepped down in December 2017)
- Freda Bevan
- Alison Chambers
- Kenneth DGLISH
- Alan Guest
- Kay Parker



Your views on health and care



Listening to people's views

As the independent consumer champion for health and social care in Gateshead, we listen to the views and experiences of patients, families and carers and the public and share them with the people who make key decisions about our health and social care services.

Our remit covers all health and social care services for adults, children and young people, including everything from hospitals to care homes, GP surgeries to patient transport, mental health and home care to opticians and dental surgeries. We listen to the experiences of everyone and try to make sure that their views are fairly represented and heard.

The information we collect from local people shapes our work, our recommendations to local organisations and our responses to consultations.

Everything we do is rooted in the comments and experiences that people share with us.

Our work is especially important for people who generally do not have access to those making decisions or delivering services. To increase our reach we work with other key partners, including voluntary and community sector (VCS) organisations. This helps us to talk directly with groups and individuals whose voices are seldom heard. We continue to have excellent relationships with key VCS organisations to share information, experience and opportunities to give people a voice.

We recognise the importance of engaging with seldom heard groups and individuals, allowing strengthening of democracy and encouraging different communities to be more actively involved. We aim to help early identification of potential health and social

care issues and benefits, and support enhancement and improvement of services.

We are committed to representing Gateshead's diverse communities and continue to build relationships across the borough including with seldom heard communities and vulnerable people in order to widen engagement. We use a wide range of engagement techniques including focus groups, questionnaires, one-to-one interviews, and running stalls at local events. Examples include:

- Adults with learning disabilities – Guidepost and LINKS
- Adults with mental health issues – Gateshead Clubhouse
- Black and minority ethnic groups – Gateshead Muslim Men's group
- Carers – Gateshead Carers Association and the Carers Trust
- Men's groups – Blaydon Men's Shed and Teams Community Care
- Older people – Gateshead Older Peoples Assembly and Age UK Gateshead
- Patients and carers – Queen Elizabeth Hospital
- Refugee and asylum seekers – Comfrey Project

We are part of the Gateshead Diversity Forum. The forum is facilitated by Gateshead Council in partnership with other lead agencies, for example, police, neighbourhood safety and community leaders of various faith groups. It aims to ensure a borough-wide strategic approach to services for all minority ethnic communities in Gateshead.

We owe a large part of our success to partnership working with the VCS, which supports Healthwatch staff and Champions by actively allowing us to attend, participate

and engage with established communities and groups. For example, our Champions attended a men's group to gather the views and experiences of service users on health and social care issues while joining in with activities such as dominoes and cards and playing golf on a games console. We also engaged with older people while they were participating in a chair aerobics session.

Our work with community leaders from a newly established Roma community in Gateshead has been instrumental in the community accessing other essential services, helping them to more fully participate in their neighbourhoods.

Our interactions with the VCS allow us to build strong links to people who would not normally attend health and social care, or even Healthwatch run, engagement events. These relationships are extremely valuable in enabling us to gather a wide range of views and experiences and providing an effective signposting service.

Making sure services work for you

As a local Healthwatch we have a statutory power to 'enter and view'. We can visit places that provide publicly-funded health or social care services to observe and report on services.

We did not identify any areas of our work during 2017–18 that required the use of 'enter and view'. Information about health and social care services was gathered in other ways, for example, via our information stalls and online feedback centre and through our in depth research work on carers' assessments and NHS continuing healthcare.

Helping you find the answers

How we have helped the community get the information they need



We provide an information and signposting service giving callers free, independent and confidential information about local social care and health services. We can help people make decisions on what to do if they are unhappy with their care or treatment or that of a friend or family member.

The service is available Monday to Friday, 9am to 5pm, by phoning 0808 801 0382 (free from landlines), texting 07535 877 831 or completing an online form.



There is an online feedback centre where people can search, rate and review all local social care and health services. Providers are able to provide a response to reviews. The feedback centre enables people to browse local services and provide feedback at a time that is convenient for them. A paper leaflet is available for people without internet access. This tool helps us to identify trends in the issues that are raised and enables us to take appropriate action. Identifying these trends also helps us to set our annual priorities.

We also have a Healthwatch Gateshead app, free to download, for Android phones and tablets. The app offers a convenient way for people to search, rate and review services, access our social media platforms, and nominate people or organisations that are delivering great care for a 'Healthwatch Star' award.

Case study: supporting a family with care needs

We received a call from a family member who needed information about getting additional help and support for his parents, one of whom had dementia.

With the family's permission, we contacted adult social care at Gateshead Council and shared all the relevant information. Adult social care contacted the family and arranged for care assessments to be carried out and for an appropriate support package to be given to the family.

Case study: supporting flexible appointment times

We received a call from a patient who required weekly appointments at his GP surgery for several weeks. He was unhappy because the appointments were always at a time when his free bus pass could not be used and so he was incurring a weekly cost.

With the patient's permission, we spoke to the practice nurse at the patient's GP surgery and explained the situation and the financial impact it was having on the patient. The practice agreed to offer appointment times that were more appropriate, allowing the patient to use his free bus pass and avoiding the extra weekly financial cost.

Making a difference together

How your experiences help to influence change

NHS continuing healthcare

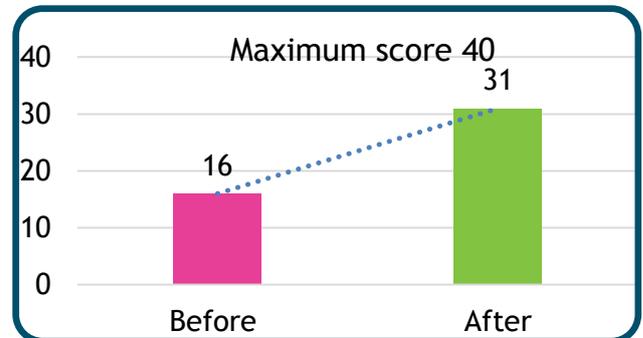
The Healthwatch Gateshead and Healthwatch Newcastle Committees chose to prioritise researching people's experiences of NHS continuing healthcare (CHC) during 2017–18. Early findings told us that, generally, information on CHC and experiences of the assessment process were poor for service users and their relatives and carers.

As part of the research, we wanted to find out what information was currently available locally and nationally on CHC. We worked with NHS Newcastle Gateshead Clinical Commissioning Group (CCG), which told us that the CCG was currently looking to produce local information to support service users and carers through the CHC journey.

We found national information about CHC, in the form of a film commissioned by NHS England, to help explain the national policy framework to people and their families. We wanted to make sure that the film would be an effective information source so we held a workshop with eight Healthwatch Champions to assess the quality of the information.

Healthwatch Champions are our trained volunteers who support us with our engagement and research work. Before watching the film, we asked them to rate their knowledge of CHC from one to five. The combined points were 16 out of a possible 40. We repeated the question

after the Champions had watched the film and those numbers rose to 31 out of 40 (93.7% increase).



We recommended that the CCG make the information film available to the public on its website. The recommendation was taken forward and the film can be viewed at

www.newcastlegatesheadccg.nhs.uk/your-health/continuing-healthcare.

We also worked with two families to follow their transition from accessing support through children's services to adult services, where it appeared likely that CHC would be required as an adult. We identified some issues relating to the timing and planning of this transition, and made recommendations as part of our final CHC report.

Gateshead Council was quick to respond to the recommendations. There are now plans to carry out a full audit and regular training to make sure that children's social workers are aware of their duty to refer children, in line with the national framework on CHC.

Read the report, including recommendations, at

<https://healthwatchgateshead.co.uk/about-us/reports>.

Working with other organisations

We work in partnership with other organisations, including other local Healthwatch, voluntary and community sector organisations (VCS), and commissioners and providers of health and social care.



We work closely with our VCS partners, particularly when hosting our ‘One collective voice’ events. During the course of our CHC project, for example, we wanted to find out about the issues people faced in more detail. We organised an event to hear from the VCS and other organisations that support people to access services, information, support or guidance around the CHC process.

There was representation from the following organisations:

- Advocacy Centre North
- Dementia Care
- Disability North
- Gateshead Access Panel
- Newcastle Council for Voluntary Service
- Independent Complaints Advocacy
- Parents in Power
- The Advice Centre – Gateshead
- The Carers Trust
- Newcastle Upon Tyne Hospitals NHS Foundation Trust

We also designed and implemented a way for service users, relatives and carers and members of VCS organisations to become more involved in the redesign of community mental health services (Deciding Together, Delivering Together).

We have good working relationships with Gateshead Council and sit on several of its strategic and operational groups, including the Health and Wellbeing Board, and Gateshead Care, Health and Wellbeing Overview and Scrutiny Committee. We also attend several Newcastle Gateshead CCG boards and steering groups.

Gateshead Council and Newcastle Gateshead CCG have also informed the direction of our research projects. For example, we supported the CCG and Gateshead Council review of carer support services, looking at how they can better support informal carers.

We adopted a varied approach to our research, including a survey and working with VCS partners to gather views and provide evidence for the commissioners in order to influence the commissioning process, with the aim of improving access and service provision for carers.

VCS organisations involved in this work included the Carers Trust, the Carers Association, Age UK Gateshead, the Stroke Association and the Alzheimer’s Association. The Queen Elizabeth Hospital Community Care Team worked with us to help us reach carers in the community.



We also worked closely with the Care Quality Commission in support of its 2017–18 adult social care inspection programme, providing relevant information gathered from residents about the service(s) it visited.

We were a member of the steering committee, coordinated by the North of England Commissioning Support Unit, which was tasked with refreshing the Gateshead Pharmaceutical Needs Assessment for 2018.

How we work with our community

We owe a huge part of our success to our volunteers, who we aptly name Healthwatch Champions. Our Champions are fully supported and encouraged to participate in all aspects of the planning and delivering of our outreach and engagement strategy.



Champions are vital in helping us to meet our aims and we value the knowledge, skills, experience and ideas that they bring. Champions are integral in shaping our work, how we work and where we work to make a difference, and they also gain valuable experience and further develop their skills.



Our Champions have attended training in areas such as Dementia Friends, visual impairment awareness and transgender awareness. They have also had an opportunity to gain knowledge and understanding about some of the different religions and beliefs held by our region's multi-cultural population. Visits have included attending Jewish, Muslim and Sikh areas of worship and talking with members of the community.

In the past year Champions have given over 300 hours of their precious time to be involved in all aspects of our engagement, including the planning and delivery of our community engagement and helping to run stalls at regional events such as the Newcastle Mela, Newcastle Pride and Chinese New Year celebrations.

We are looking forward to expanding the Champion role next year, giving us more opportunities to reach out and hear from people across the borough.

It starts with you

Case study: carers

The support available to carers is one of the areas we chose to look at during 2017–18.

Carers had told us about the issues they were experiencing, including trying to access services, obtaining a carer’s assessment or receiving the support identified when assessed.



Newcastle Gateshead CCG and Gateshead Council had reviewed their support services for carers and feedback showed that carer’s assessments were a very important part of supporting carers. However, the engagement by the council and CCG had not looked at carers’ experiences of the assessment.

Also, a recent carers’ survey by Gateshead Carers Association had touched on the assessments but not looked at the barriers to uptake, or people’s experiences of having an assessment.

We were able to offer a more in-depth view of the process, complementing existing research and increasing the number of residents who had the opportunity to share their views.

Newcastle Gateshead CCG and Gateshead Council told us that they were planning to

re-commission the carers’ support service. We recognised that our plans to gather the views and experiences of carers regarding carer’s assessments in Gateshead would be useful to help inform the new specification and improve access and service provision. Therefore, we developed surveys and these were completed over a five-week period, between July and August 2017, to coincide with the commissioning timeframe.

We asked carers of all ages in Gateshead local authority area to complete a survey and 264 people participated, 56 of whom had experience of carer’s assessments.

We found that, overall, carers who had an assessment were glad they did so. However, feedback was broadly negative and included comments about the process for requesting a carer’s assessment not being user friendly or ‘fit for purpose’. It was clear from our research that carer’s assessment procedures could be improved.

A report was written and shared with partners and commissioners. It contains recommendations linked to areas where people’s responses were not so positive:

1. Increase uptake

- Develop and implement an awareness raising campaign about carer’s assessments and develop the services available on the Gateshead Council website. Include more information about what people can expect during the carer’s assessment process as well as details of services available for carers.



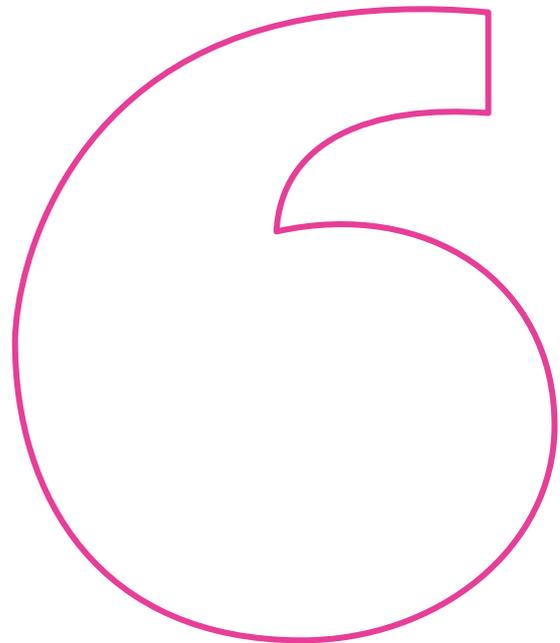
- Review internal procedures to ensure that people who request an assessment are not refused one (in line with the Care Act 2014). Social workers, and other relevant professionals, should explain the carer's assessment process to carers and offer support to complete the forms.

2. Improve assessment quality

- Provide carers with information appropriate to their needs (in line with the Accessible Information Standard) before conducting a carer's assessment in order to help them prepare for the assessment and support full and meaningful discussion.
- Ensure carer's assessments are conducted in an appropriate timescale and in line with the Care Act 2014.
- Ensure carers receive an annual review.

3. Streamline partnership working

- Develop strategies with partners to streamline communication to improve outcomes for carers. The Gateshead Carers Partnership comprises carers and key staff in health, social care and the voluntary sector and strives to give carers a strong strategic voice.
- Ensure partnership meetings have regular and accountable representation from Gateshead Council.



Our plans for next year

Our priorities for 2018–19 were chosen after a public prioritisation process. Healthwatch Gateshead Committee members agreed a shortlist of potential priorities based on:

- Feedback we had received from service users, relatives and carers and members of the public
- Feedback from people who plan and provide local services
- National themes and trends

We then asked members of the public to prioritise the topics. This was done online and at our face-to-face events. We also asked delegates at our annual conference to help us prioritise, as well as to identify potential focusses for each topic. This resulted in the following priority order:

- Mental health services
- Lack of funding for social care
- Access to services – impact of waiting times
- Impact of austerity on health and wellbeing
- Public health cuts
- Children and families use of urgent care
- Low take up of cervical screening

Our Committee then used all this information to inform their final choice of priorities.

Our top priorities for next year



Mental health



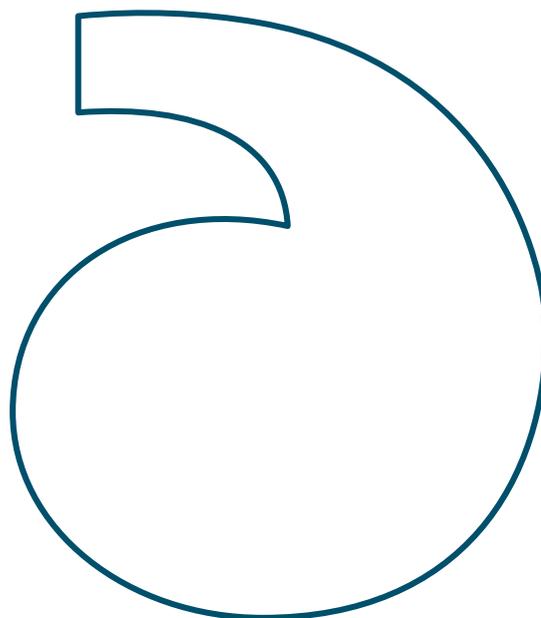
Lack of funding for social care

WAITING ROOM



Access to services

We will be doing further work to scope the exact topics and methods for our work and will involve key stakeholders, including service users, their relatives and carers.



Our people

Decision-making

We want to make sure that the decisions we take are based on sound evidence and our processes are transparent and open.

We gather broad-based information through widespread engagement with service user groups, members of the public, the voluntary and community sector (VCS), and local and national statutory organisations.

The following information is used to decide which topics to prioritise:

- Issues raised by the public through Healthwatch and other public engagement events.
- Issues raised through our online feedback centre (where all feedback we receive from service users of health and social care services is logged).
- Information provided via our Champions (volunteers).
- Information gathered and shared by the local VCS or other local Healthwatch.
- Information gathered from relevant national and local reports and media.
- Information gathered from health and social care providers and commissioners.

Decision-making procedures

We use the process described in the flow chart on page 16 to help us make decisions about our work and priorities.

If further information is required to make a decision then the most appropriate method will be used to collect this, for example, asking partner organisations (VCS) for additional information, or during Healthwatch events or enter and view visits.

Deciding on annual research priorities

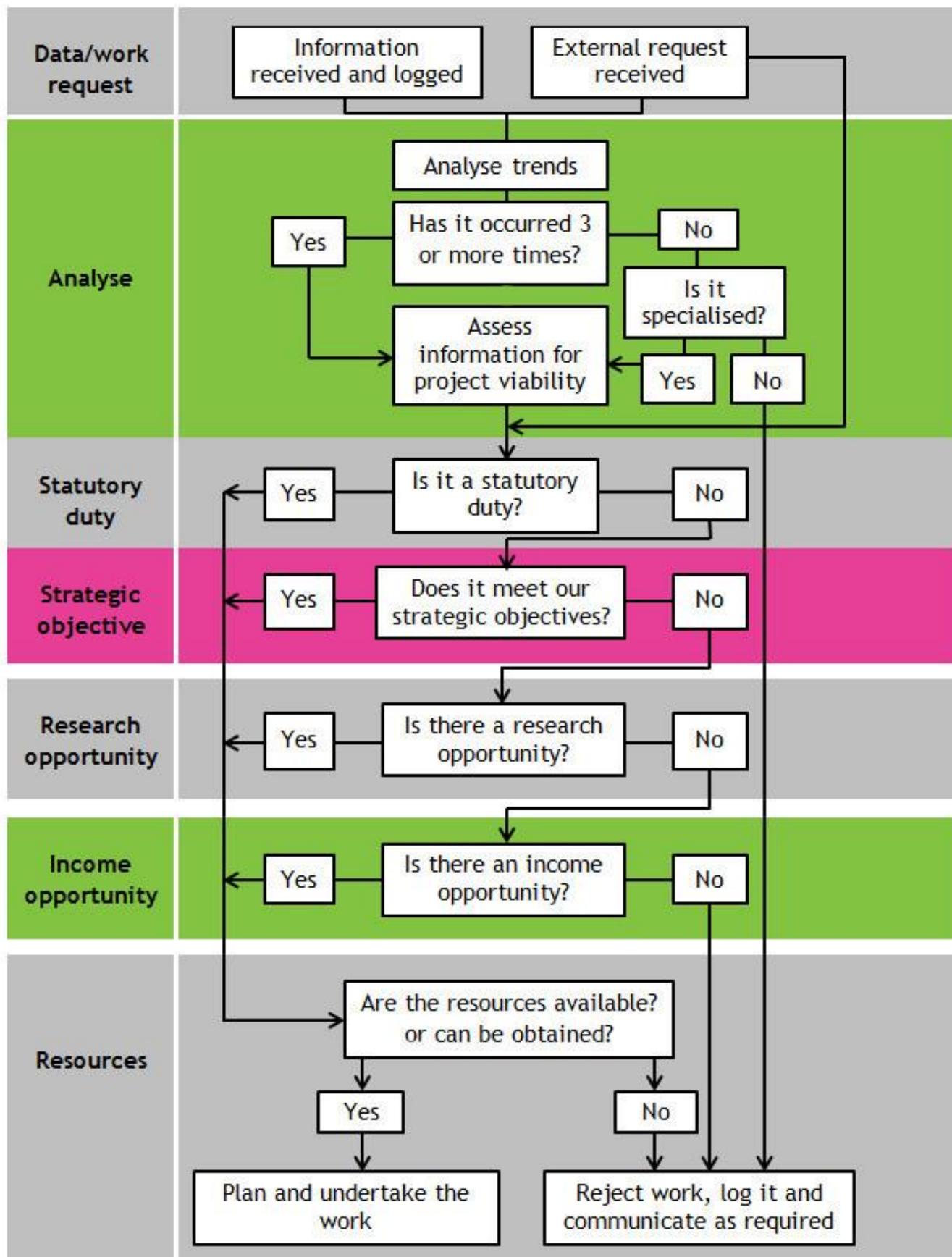
To choose our annual research priorities we:

- a) Produce a longlist of topics based on intelligence we collect.
- b) Present the longlist to the Healthwatch Committee for review and shortlisting.
- c) Share the shortlist with the public via our events and online, and ask them to prioritise the topics.
- d) Ask delegates to prioritise the topics at our annual conference.
- e) Use prioritisation by the public and conference delegates as a guide for the Healthwatch Gateshead team to prepare a final priority list for the Committee to approve.
- f) Ask the Committee to review and challenge the list and finalise our priorities.

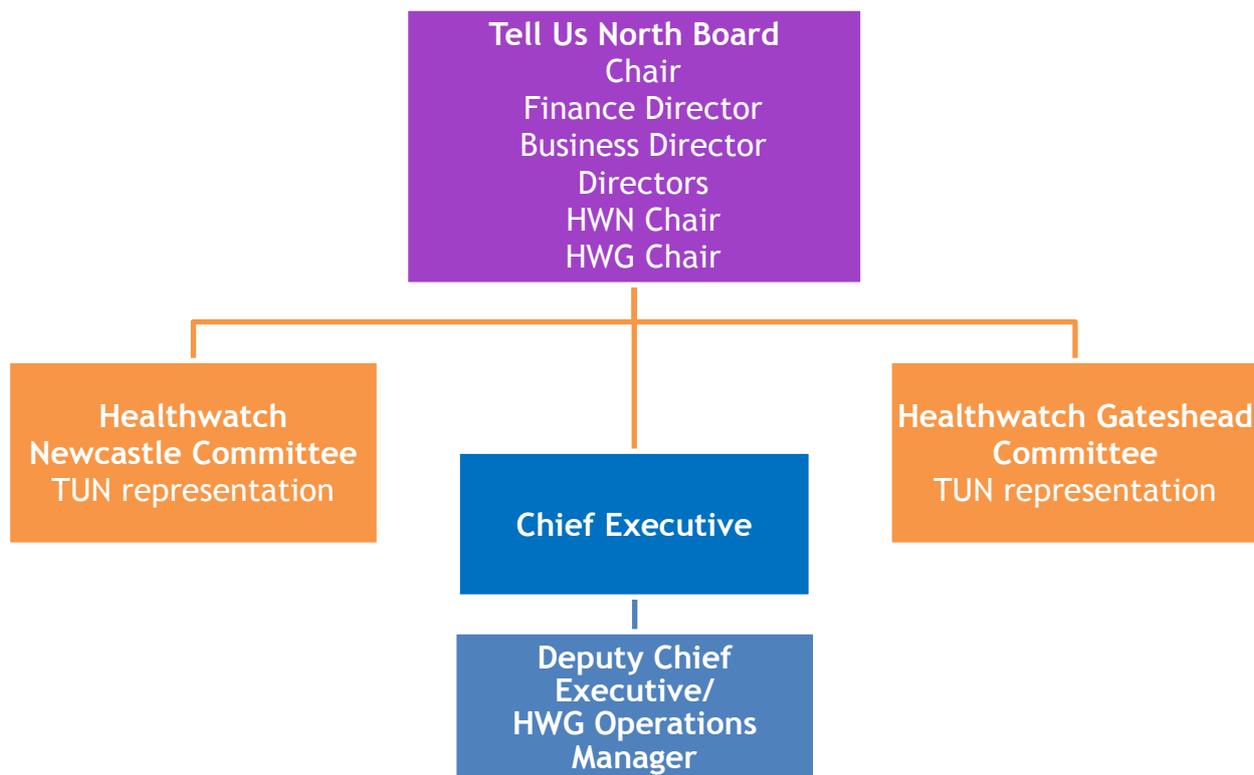
Our 'Decision-making procedure' document explains in more detail how we make decisions; this can be found on our website at

<https://healthwatchgateshead.co.uk/about-us/policies-and-procedures>.

Decision-making procedure flowchart



Role of the Board, Committee and the executive in decision-making



Healthwatch Gateshead has been run by Tell Us North CIC since 1 April 2017. The Tell Us North CIC Board, Healthwatch Gateshead Committee and executive all have different roles in decision-making:

Tell Us North CIC Board

The Board holds final accountability for all aspects of Healthwatch Gateshead and Healthwatch Newcastle.

The Board provides strategic leadership, promotes good governance and accountability on all contractual, legal and financial duties of Healthwatch Gateshead. It approves the business plan, the selection of annual specific research topics, and has an overview of the financial management of the organisation.

Healthwatch Gateshead Committee

The Board delegates certain functions to the Healthwatch Gateshead Committee,

including a budget and responsibility for setting Healthwatch strategy to achieve the objectives and goals. The Committee also makes decisions referred on from the executive.

The Committee refers issues to the Board if they are outside its delegated limits.

Executive

The Chief Executive, assisted by the Deputy Chief Executive, undertakes the day-to-day running of Healthwatch Gateshead and implements the operational strategy and annual research projects as approved by the Committee and Board.

In the majority of cases, day-to-day decisions will be taken by the executive and updates provided to the Committee and Board.

How we communicate decisions

We hold Committee meetings in public at least twice a year, where anyone is welcome to attend as an observer. Service users and members of the public are welcome to write to the Chair of the Board, Committee Chair or Chief Executive to raise an issue or question. Openness and transparency is a key principle for us.

Decisions taken are reported at Committee meetings and the minutes are published on the Healthwatch Gateshead website. We also share key decisions using the following means:

- On social media platforms, including Twitter and Facebook
- In our monthly newsletters
- Relevant meetings attended
- Direct email to relevant VCS organisations or other stakeholders

How are decisions published?

To meet the statutory requirement that any 'relevant decisions' must be published, we ensure that Committee minutes set out the decisions taken and reasons for any decisions and that these are published on our website. Relevant decisions include:

- How we undertake our activities
- Which health and care services we look at as part of our activities
- The amounts spent on activities
- Whether to request information
- Whether to make a report or a recommendation
- Which premises to 'enter and view' and when they are to be visited

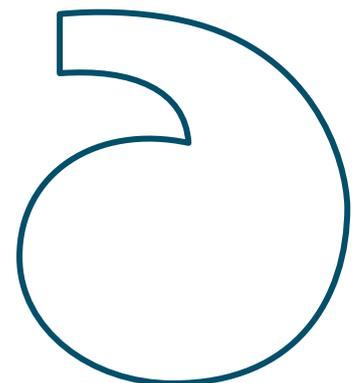
How we involve the public and volunteers

Involving the public in our work is an integral part of everything we do. We are passionate about working with members of the public, patients and carers to help us:

- Learn from the experiences of patients and carers.
- Make sure that services are sensitive to people's needs and preferences.
- Enable the public to review the quality of the services they receive and in turn report to Healthwatch England, which then informs government bodies, including Parliament, about our findings.

We can also ask the health and social care regulator, the Care Quality Commission, to take action when we have special concerns. We achieve this by:

- Listening closely to people, especially the most vulnerable, to understand their experiences and what matters most to them.
- Influencing those who have the power to change services so that they better meet people's needs now and into the future.
- Empowering and informing people to get the most from their health and social care services.





We ask members of the public and key stakeholders to help choose our priorities for the following year, including at our annual conference.

We also ask our volunteers to promote this in their local communities by circulating flyers where people can rank a shortlist of priorities in their order of preference.

The shortlist of priorities is initially drawn up from feedback gathered over the previous 12 months. This intelligence is gathered from the general public through our feedback centre, conferences and stalls, focus groups, etc. We also take into account key health and social care issues raised both at a local and national level by statutory and voluntary and community organisations.

Our finances

INCOME		£
Funding received from local authority to deliver local Healthwatch statutory activities		150,000
Additional income		1,000
Total income		151,000
EXPENDITURE		£
Operational costs		14,239
Staffing costs		102,690
Office costs		33,140
Total expenditure		150,069
Net expenditure		931
Balance brought forward 1 April 2017		0
Balance carried forward 31 March 2018		931



Contact us

Registered office

Healthwatch Gateshead is part of
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E info@healthwatchgateshead.co.uk
W <http://healthwatchgateshead.co.uk>

If you require this report in an alternative format please get in touch with us at the address above

We make this annual report publicly available by 29 June 2018 by publishing it on our website and circulating it to Healthwatch England, the Care Quality Commission, NHS England, Newcastle Gateshead Clinical Commissioning Group, the Health Scrutiny Committee and our local authority.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

healthwatch
Gateshead