



Healthwatch Hertfordshire Board meeting
10am on Monday 15th July 2013, at
Douglas Tilbe House, Hall Grove, Welwyn Garden City, AL7 4PH

Present: Sarah Wren (Chair), Geoff Brown, Monika Brzozowska-Neroth, Megan Carter, Michael Downing, Nuray Ercan (Minutes), Jenny Goodyear, Errol John, Sundera Kumara-Moorthy, Bernard Lloyd, Martyn Macphee, Joan Manning, Sue Reeve, Michael Taylor

Apologies: Marion Birch, Brian Gunson, Valerie Harrison

1. Welcome, Apologies and register of interests

S. Wren welcomed everyone. No interests were registered. Apologies as above.

2. Minutes of 17th June meeting

The minutes were approved. The outstanding actions spreadsheet was discussed. A board member asked how HwH will engage with Public Health in future. G. Brown highlighted that there are a whole range of opportunities:

- a. G. Brown has been invited to attend the Public Health Board
- b. HwH will hold Public Health to account
- c. HwH will help to promote Public Health's campaigns
- d. Public Health will support HwH's activities, including working with HwH at the first Stakeholder Panel meeting to promote involvement in the Public Health agenda.

3. Chairman's Update

S. Wren will in future present board with a written update.

The public meeting of the HWBB had attendance from about 4 members of the public. At the end of the meeting a gentleman asked to raise an issue with regards to cleanliness at Chase Farm Hospital but this was not allowed and was asked to raise his issue in advance of the meeting as per protocol. His issue was heard by HwH through G. Brown even though he was not able to raise it within the agenda of the HWBB meeting. There was a lot of challenge around targets that have been set to measure HWBBs objectives. There was also discussion on how Mid Staffordshire and Winterbourne issues were going to be taken forward. Health scrutiny will hear presentations from CCG's, providers and services on what actions have been taken to address the issues raised in the reports. This event will take place in February 2014 and will involve county councillors, members of the health scrutiny committee as well as members of HwH. Board members will work alongside councillors to scrutinise the information provided. J. Goodyear will be leading on developing the event in partnership with health scrutiny.

4. Chief Executive's update - please see appendix 1

A lot of work has been going on with regards to preparations for the office move to Douglas Tilbe House. The room at DTH will need new electrics installed as well as new telephony and HWH and Age UK are exploring options about the best way of getting the phone system installed.

5. Strategic priorities update

Comments received at last month's board meeting regarding the draft strategic priorities document were incorporated and sent out to stakeholder panel members, giving three weeks to respond as agreed. Many comments and suggestions have been received in response, with offers of collaboration and working in partnership where stakeholders' priorities and projects are highlighted as being similar. In the meantime an easier read, punchier version has been created and together with the full version sent out to general members to encourage their input and participation. Both versions are now on the website. At the end of the month comments and suggestions, where feasible, will be incorporated into the priorities document and a final version will be brought to board in August to be signed off.

6. Representation update

G. Brown thanked Board's input and help with the representation list, which is now much clearer as a result. The letter has now been sent out to representatives who represent HwH on various boards/groups/committees. Approximately one third have responded giving detail of the value, purpose and frequency of the meetings. M. Carter has drafted a letter to be circulated to the organisations to obtain from their perspective what they expect from a HwH representative, what the organisation feels the group is about, and what HwH brings to it.

There are a few concerns with regards to HwHs lack of involvement with E&N Herts CCG compared to involvement with HVCCG. G. Brown has met with Lynda Dent and she thinks the most useful way in which HwH can get involved is through having a HwH member on each of their locality groups. She is very keen and positive to have HwH's involvement in this capacity. Concerns were raised about the need for making meaningful connections.

A request has been received asking for a HwH representative on the National Dementia Strategy Implementaion steering group meeting. [It was agreed that S. Reeve will be representative at this as she already attends for Carers in Herts.](#)

7. Board Governance update - standing instructions

S. Wren thanked Kumar for all his hard work in drafting the various standing instruction documents. It was proposed and agreed that due to the wealth of documents to consider that any general comments are discussed at the meeting. The governance sub-group could then incorporate these and refine the documents to bring back to board in August to have them signed off.

Kumar thanked those who had contributed to the documents all of which he has incorporated. It is imperative that there exists a set of standing rules, agreed by board, that can be used going forward. This is not to say that they cannot be flexible and change in future. There are some generic issues which the governance sub group may want to look at in more detail which include: getting a balance between formality and flexibility and capable of implementation; the method in which board members/directors/the chair is appointed/presented at the AGM and the constituency that elects the board; and the possibility of delegated powers to sub committees/working parties to give the Chair support to carry out some of the executive roles that she would have otherwise had to carry out.

[Action point: The governance sub-group \(GB, MT, MB, MM, BL, SK-M, SW, JM\) to meet to finalise the standing instruction documents](#)

8. Engaging with Children & Young People update & Health Related Behaviour Survey

N. Ercan updated the board on progress to date. S. Wren and N. Ercan have met on a number of occasions over the past two months to develop HwH's first steps in planning the work programme of engaging with children and young people. The first method HwH will trial to hear the voice of young people, will be to work with key partners to create a lesson plan, containing health and wellbeing information, to be used by teachers to deliver PSHE lessons in schools. In order to kick start this project contact has been made with both CCGs, Public Health and Children's Services. HwH has met with Liz Biggs, Health and Wellbeing Adviser (public health and children's services) and she has shared with HwH the recent Health Related Behaviour Survey (HRBS) results for the county. The survey highlights themes, trends and behaviour profiles for young people which may be focussed on in order to get qualitative information to triangulate the survey data within the envisaged lesson plan.

HwH has also met with Sarbjit Purewal, HVCCG Programme Lead for Children, Young People and Maternity Services. This was a very timely meeting as she has just published HVCCGs Clinical Strategy Plan, which includes engagement with young people by developing a lesson plan. Sarbjit, in her previous post at the NHS Institute for Innovation piloted a similar project with success. She is very keen on working in partnership and will convene a working group of partners to develop the project further.

HwH is also working with the youth parliament and various other voluntary organisations to establish stronger links and partnership work going forward.

[Action point: N. Ercan to circulate the HRBS district survey result reports.](#)

[Action point: Board members to challenge via their various organisations/bodies/districts and community connections, highlight the survey analysis and issues.](#)

9. Housekeeping (update on company etc.)

10. Database update

J. Goodyear was thanked for all her hard work. Procuring an effective database is crucial for the organisation to aid with the collection of data. Comments and queries are received by the office on a daily basis and a database will enable officers to be able to record the issues, quickly run off reports and identify trends. Since receiving the Parkwood Database demonstration at last the board meeting, J. Goodyear has spoken to other local Healthwatch who are using the Parkwood model to find out the merits of the database. A detailed analysis of findings is presented in the paper circulated. On balance, J. Goodyear recommended that HwH procures the Parkwood system as it fulfils all of HwH's information management needs. Furthermore it may be an advantage to use the system that many other Hw's use as it would bring HwH into a network of organisations with which to share practice around the following: the role of the person who manages the system, information management in general, how HwH interfaces with HwE, how the system is resourced. [This recommendation was agreed by all members of the board.](#)

11. AOB

a. Funding request from Dacorum Patient's Group for approval

Dacorum Patient's group has bid for funding from HwH to advertise a public meeting they are hosting in September focussing on the changes within the CQC, particularly around the new inspection process. Speakers from CQC, and possibly NHS England have been secured. G. Brown has also been asked to say a few words at the start. [The request was discussed and funding agreed.](#)

b. Access to GP appointments, surgeries failure to use the Choose & Book System for referrals to hospital and patient participation groups were all discussed. J. Goodyear informed the board that the office has received a good number of comments (positive and negative) regarding access to GP appointments and has been doing some analysis on this issue. There is also a lot interest in forming a working group around this issue.

[Action point: J. Goodyear to submit the analysis paper on GP appointments to the next board.](#)

12. Working lunch with Catherine Meads - on Lesbian, Gay, Bisexual & Transgender issues

The board welcomed Catherine Meads who thanked the board for the invitation to speak on subject of LGBT. Catherine explained that she is a reader in Health Technology Assessment at Brunel University. Most of the work Catherine has conducted has been for NICE both at Brunel and previously in Birmingham. Catherine has been a lesbian for 35 years and started conducting research into lesbian and gay health in the 1990's. Most research in this area is unfunded but Catherine was able

to obtain funding in the West Midlands to put together bring together previous research and to find out the health needs of the lesbian and gay community.

Catherine referred to a number of documents, posters and research papers in discussing LGBT health issues.

Pride in Practice - aims to get GPs to think about their LGBT clients and to encourage them to talk about their issues.

Prescription for Change by Stonewall - A survey was conducted. Research documents on the kinds of of discrimination experienced by LGBT people.

Within Herts research has been conducted by Viewpoint in collaboration with LINK. Many issues faced by the LGBT community can also apply to those experienced by the disabled community.

Action point: C. Meads to circulate the Office for National Statistics report link showing the standardised agreed questions to ask participants about their sexuality.

Action point: N. Ercan to suggest that within future iterations of the HRBS questionnaire that the sexuality of the participant is asked.

Action point: To recommend to CCGs that a centre be created and/or one GP surgery to be accessed with specialist staff for LGBT patients to be referred to for specialist care.

Action point: To challenge CCGs and GPs to commission appropriate services and to encourage training and awareness in this area.

Action point: C. Meads to email any further research she can find undertaken in Herts re LGBT health issues (possibly some data from HCC)

Action point: HwH to raise awareness of health issues experienced by the LGBT community via circulating C. Meads' 1pg document.

Action point: To find out what the East of England and Healthwatch England are doing around LGBT issues.

13. Date and time of next meeting: Monday 19th August 2013, 10am-12pm TBA
Working lunch meeting with speaker: Rachel Fox - Herts Urgent Care and 111 Service 12-1pm