

Healthwatch Hertfordshire Board meeting  
10am on Monday 19<sup>th</sup> August 2013, at  
Douglas Tilbe House, Hall Grove, Welwyn Garden City, AL7 4PH

**Present:** Sarah Wren (Chair), Marion Birch, Geoff Brown, Jane Brown, Monika Brzozowska-Neroth, Megan Carter, Michael Downing, Nuray Ercan (Minutes), Jenny Goodyear, Brian Gunson, Valerie Harrison, Errol John, Sundera Kumara-Moorthy, Bernard Lloyd, Michael Taylor

**Apologies:** Martyn Macphee, Joan Manning, Sue Reeve

**1. Welcome, Apologies and register of interests**

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

**2. Minutes of 15<sup>th</sup> July meeting**

The minutes were approved as an accurate record. The outstanding actions spreadsheet was discussed. The action relating to Youth Ambassador post has progressed. There is a push from the specialist commissioners in health to have a YA within HwH and will be having a meeting with them and HCC in September to progress this further.

**3. Chairman's Update**

S. Wren has met with the clinical director of Herts Urgent Care (HUC). He is very interested in having input into HwH's work on GP appointments as there is a knock on effect on HUC when patients are unable to get an appointment with their GP. HUC has a database which HwH could get geographical data from. Another issue raised was the major issue in Herts around out of hours dentistry and asked if HwH could take a lead on investigating this.

**Action:** J. Goodyear to start research on dentistry

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

In addition to the activity outlined in appendix 1, M. Brzozowska-Neroth has been able to negotiate a good deal with Google Adwords which increases the chances of HwH appearing at the top of the searched link options generated when a user types in a search terms in google.

**Action:** M. Brzozowska-Neroth to circulate the list of words

**5. Strategic priorities update**

N. Ercan and J. Goodyear were thanked for their hard work in drawing the feedback received into the final document. The document has changed from where it began through looking at issues from the JSNA, The Health & Wellbeing priorities, issues

raised from LINK and comments received from members and stakeholders. In addition, a number of useful contributions were received from partner organisations about specific activities that HwH could undertake in partnership to follow up the priorities. POHWER has been asked to produce an easy read priority document.

**Action:** When cards are produced to have the eight priorities printed on the back

B. Lloyd relayed a patient story, details in hard copy have been given to J. Brown for follow up.

It was agreed that HwH would highlight how the priority document would be used so that people could see the actions that have been taken to follow up the issues/priorities. This should be done via the HwH website on a monthly basis. The priority document will be a regular board agenda item to update on progress made.

**The priority document for HwH was agreed and signed off.**

## **6. Enter and View**

J. Brown gave an overview of HwH's responsibilities in Enter and View (E&V). HwH has statutory powers to go into the premises of providers who are funded by the NHS, the only exception being children's social care. E&V forms a part of HwH's priorities and can be used in a number of different ways. They can be conducted over a long period to support a particular priority. It could support research or be a single visit because of a concern. Also a partner organisation may ask for an E&V to take place to investigate an issue they are aware of. It should be noted that Healthwatch England has stated that they favour a more targeted focussed approach when looking at the E&V programme of activity.

A board lead is required for this area of work. It was agreed that an E&V sub committee is set up to devise an operational programme for Enter and View. This group will look into the recruitment of volunteers (of which there are 30 carried over from LINK) and putting together a training programme. The previous chair of the monitoring group in LINK, Doreen Bratby is very happy to support the programme with her experience and expertise. It was agreed that all board members attend the training for E&V monitors.

It was suggested that the sub committee developing E&V would also look at PLACE and the new inspections in A&E led by CQC. It is proposed to bring together the various activities and have two board leads. It was decided that M. Carter would lead on E&V and Kumar on PLACE. In addition to M. Carter, Kumar, D. Bratby, other members have also expressed an interest in helping shape the process of E&V and will be contacted. B. Lloyd and V. Harrison also offered their involvement in the sub committee. It was agreed that the E&V sub committee would have the power to set priorities for visits but to report back to the board.

**Action:** J. Brown to schedule two E&V training dates (day and evening) and advertise to members and stakeholders via the newsletter and website

Action: J. Brown to arrange an E&V sub committee meeting

## **7. Representation update**

Letters have now been sent out to organisations as well as to individuals who represent HwH on the various boards/groups/committees. Approximately half of the individuals have responded. Organisations still have until the end of the week to respond. Comments from organisations so far have been varied, some positive and others more reserved. This may be because they are looking for a new skill set and looking for a fresh pair of eyes/perspective. One organisation has made a point about HwH having to be wary of organisations saying that they are happy with the status quo but this may be because there is not enough challenge and therefore too comfortable a situation. Next steps include analysing the feedback from both individual representatives and organisations and for the sub group to meet to decide how to take it forward with training and in line with HwH's priorities.

HwH also needs to determine the process for the locality representatives within East and North Herts CCG, where there are locality groups of which a number of HwH members attend but not as a HwH representative but as a patient representative. The CCG is keen to have HwH there but a process for this needs to be worked out.

Board members were reminded to state why they are attending meetings and in what capacity to avoid confusion. If attending as a HwH representative, comments made should be in line with HwH's approach on the subject rather than personal views.

Action: A meeting of the representation sub group to be arranged

## **8. Board Governance update - standing instructions**

A note of the meeting of the governance sub group has been provided to set the context for the proposed amendments to the documents Kumar originally drafted. The revisions reflect the organisation as it has decided to operate. For example, Board members will be selected rather than elected to ensure that the required skills, knowledge, and experience are represented in the Board membership. G. Brown has incorporated all points discussed at the meeting into the Standing Instruction documents but there may be specific items needing future amendment as the organisation develops.

The board discussed the Standing Instruction documents. It was agreed that for cheque signatories / authorising payments limits are raised. The executive can authorise payments up to £4999; the CEO and a Board member between £5000 and £10,000; and two board members beyond a payment of £10,000. It was also agreed to amend the Expenses policy HwH SD-008 5.1 to read "expense rate per mile as agreed by the board at the time".

Action: G. Brown to adjust the Standing Instruction paper to reflect the above and circulate

There is a new Standing Instruction, HwH SD-011, which relates to the breach of the Trustees code of conduct and how this would be addressed. G. Brown has incorporated comments received by the governance sub group representatives and suggested using the version discussed has subsequently been developed.

The standing instructions refers to a Vice Chairman however at present HwH does not have one but it is stated that it is the board's responsibility to select one. S Wren stated that a Vice Charman should be appointed urgently.

**Action:** All board members to email S. Wren with their nomination with a proposer and seconder

G. Brown thanked those who have volunteered for the HR sub committee. The agenda for the first meeting of the committee will include looking at issues around terms and conditions and contractual arrangements. A volunteering policy paper will be brought to this meeting also.

**Action:** A meeting of the HR sub committee to be convened

## **9. West Herts Hospital Trust update**

Please see Confidential Part 2 paper

## **10. Housekeeping (update on company etc.)**

**Action:** An urgent meeting to be arranged between G. Brown and M. Macphee to finalise arrangements for internet banking to enable staff wages and bigger payments to be paid via this method.

**Action:** Signature(s) are needed urgently to progress with the Charitable Status application

## **11. Launch of the Mental Health and Learning Disability Service Watch Group**

All board members are invited to attend the MHLDS Service Watch Group which will take place on Friday 20<sup>th</sup> September from 9:45-12:30pm at Douglas Tilbe House. It will draw on some of the experience and personnel of the old Theme Group. The Director of Transformation HPFT, Jess Lievesley, the head of Joint Commissioning Team David Evans and a service user from the old Ditchmore Lane day centre, Wendy Rose, will be speaking. Smaller groups will then discuss ideas to contribute towards the MHLDS work programme.

## **12. GP access**

The paper summarises the feedback HwH has had in relation to access to GP services, which is the issue HwH hears most about. There are lots of comments about difficulties in getting appointments, or appointments not being available at the right time. There are also many comments about customer service and people feeling very guilty in saying that they need an appointment urgently, sometimes having to play up symptoms in order to get around the system. Not all the comments were negative and some are very happy and have described a variety of approaches

their surgery has taken to make getting appointments a little easier. However, there is definitely an issue which needs to be addressed, and HwH has taken action by sharing findings with the CCGs and NHS Local Area Teams to see how the issues can be taken forward. They have responded by saying that they are aware of the issues, but the CCGs were keen to hear about the practices in their area and suggest that HwH proceed by looking at surgeries where there has been negative feedback on a case study basis. Equally, going to the practices who have good feedback and sharing their good practice with the CCG with a view to then producing some guidance of good practice with all practices. Surveying all practices was discussed as a possible method of establishing the differences between each surgeries practices.

Action: J. Goodyear to research what other Hw's are doing around this area

**11. AOB**

**12. Working lunch with Rachel Fox - Herts Urgent Care and 111 Service**

Please see power point presentation attached

**13. Date and time of next meeting: Monday 16<sup>th</sup> September 2013, 10am-12pm, Douglas Tilbe House, WGC**

**Working lunch meeting with speaker: Peter Hill & Sandra Hone on Environmental Health issues impacts on Public Health**