

**Healthwatch Hertfordshire General Meeting
10am on Tuesday 25th May 2021,
Virtually via Zoom**

Board Members: Eve Atkins, Alan Bellinger, Meg Carter, Brian Gunson, Sundera Kumara-Moorthy, Steve Palmer (Chair), Jayne Taylor, Michael Taylor
Executive Team: Geoff Brown (Chief Executive), Nuray Ercan (Head of Governance and Operations)
Visitors/others: Ted Maddex (HCC Commissioner)
Apologies: Colin Barry (Volunteer), Leslie Billy (Viewpoint), Joy Hale (ENH CCG), Kristy Thakur (HCC Commissioner), Priya Vaithilingam (Head of Research and Engagement)
1. Welcome and apologies Steve welcomed everyone present. Apologies as above.
2. Re-election of Trustees Steve highlighted that Jayne has now served her three year term. With Jayne's agreement he has nominated her, and Meg has seconded her to be re-elected, as per the nomination of candidates form. The meeting took a vote and all members of the company agreed to the re-election of Jayne Taylor.
3. AOB - none

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Please note: It will be assumed that reports will have been read prior to the meeting

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Executive Team: Geoff Brown (Chief Executive), Nuray Ercan (Head of Governance and Operations)
Visitors/others: Ted Maddex (HCC Commissioner), Stephanie Smith (ENH CCG)
Apologies: As above
1. Welcome, apologies and register of interests Steve welcomed everyone present. Apologies as above. No declarations of interests we noted.
2. Minutes of 23rd February and outstanding actions The minutes were approved as an accurate record and the outstanding actions tracker was reviewed. <ul style="list-style-type: none"> • Geoff reminded the Board to contact him about feedback on whether they wish to adopt a different approach to attending meetings as representatives. • The Board confirmed that they still wished to have a CHC speaker at a future meeting.
3. Chair's update Steve talked about press coverage and recovery from Covid-19. He highlighted the following long term implications for HwH to keep a watching brief on: <ul style="list-style-type: none"> • Delays for operations • Cancer check back log • Dentistry/oral health - HwE report on front pages of papers yesterday • Ophthalmology/eye test check ups • Flu - few people have had flu this year - there is concern that there may be an epidemic next year • Performance indicators of Trusts - some rag ratings have been amber and red for some time • Offline GP consultations - impact of telephone consultations/inability to assess body language <p>Regarding primary care:</p>

- Kumar updated that he had attended a West Herts Primary Care Commissioning meeting - the restart will be locally driven based on the resources available, and will look significantly different from area to area. Michael added that it had been reported by East and North Herts CCG that patients do not like telephone appointments and they are doing some work on this.
- In relation to GP and outpatient appointments being virtual for children, Jayne added that there may be some safeguarding issues that are of concern as this can inhibit hearing the voice of the child as well as losing the ability to see how they interact with their parents.
- Meg commented that she attended a PCN meeting. In the area a mix of appointments are available but it relies on a triage service conducted by receptionists, which has implications on their skills - there is a training issue for this to be done adequately and safely to avoid tensions.
- At another local PPG two issues discussed in addition to triage was confidentiality (within the back office when receptionists are sitting closely together) as well as an emerging concern that a waiting list of over three weeks has built up for telephone appointments.
- Michael has recently had an A&E admission at Lister Hospital and reported that there had been a surge at A&E over the last two weekends. Jayne echoed this message as Watford Hospital was also affected in this way and all the surge areas needed to be re-opened.
- Alan added that he sees four fundamental issues within primary care: PCN's developing at a different pace and therefore there is an inconsistency, a growing shortage of healthcare professionals in primary care, activity has been passed down from secondary care to primary care to relieve pressure on secondary care and demand has gone up so surgeries are getting more calls on a daily basis than before. At a local practice triaging is done by healthcare professionals, though to get an on the day appointment you need to call between 8-10am but by 8:30am there are no appointments left.

Geoff highlighted that it is really important for us to build up experiences about primary care; specific practice information is really useful intelligence. We will take these to relevant CCGs who will then raise issues with GP practices, either formally or informally. Geoff added that there is work being done on phone systems to improve patient experience. Last weeks government guidance about the re-opening of surgeries caused a lot of confusion. Geoff added that he was at Addenbrookes A&E last week end and it was the same there in terms of surge.

Steve suggested that primary care could be a good agenda item for the Strategic focussed Board meeting in June and asked the team to look into whether this meeting could be an in-person/hybrid meeting.

[Action: Nuray to incorporate primary care feedback and strategic issues in the Strategic agenda.](#)

[Action: Explore whether the Strategic focussed Board meeting could be an in-person meeting.](#)

Steve updated that Hertfordshire County Council meetings will now take place in-person. Geoff added that decision making meetings must be face to face eg. Scrutiny, Cabinet and full Council meetings and all others will continue online. Ted confirmed this was the case.

6. Chief Executive's update

Geoff introduced the various documents which report up to the end of March 2021 and highlighted that all targets are nearly all green; where they are not Covid-19 has impacted (on face to face contact) and we also now have comms in place for press releases and radio interviews.

There has been an extension to the contract until December 2021 and we will need to have a conversation with commissioners about what measures we will need to work to going forward.

It has been really busy for research projects and holding to account. Providers and commissioners are even more keen to hear about the patient experiences we've been able to provide.

Nuray echoed the update that Geoff gave adding that although we were not able to complete our enter and view plans for the year, we did undertake various online mystery shopping projects. Additionally she highlighted that due to the two vaccination surveys the demographics within the return are very rich.

With regards to the concern raised about the effectiveness Healthwatch representation due to our status as observers at Council meetings, Geoff advised that this is a HCC rule of procedure and there is no right within the policy panels for visitors to contribute to the meetings. Geoff agreed that it would be good to write formally to HCC and Trusts to put forward the case about why HwH should be treated differently.

Ted added that it is worth making the point that health and social care are 'paying' for HwH's input so it is about them getting value for money!

Action: To write to HCC/Trusts re representation and appealing the observer status.

Action: Meg, Kumar, Geoff and Steve to meet to discuss what representation in relation social care should look like.

5. Healthwatch Regional Meetings

Geoff introduced his paper which gives a background to the network/regional meetings and highlights the issues that have been discussed recently and over the past year, which include:

- Access to primary care and digital exclusion
- Dentistry
- Hw support for NHS staff around equalities

In response to Eve's question, Geoff explained how Healthwatch is funded and said that there are huge differences from area to area. He added that per capita HwH is generally underfunded. Ted added that he and Kristy are aware of this and if there is a chance to review the funding that they would do so.

Steve thanked Geoff for updating the Board on this area of his work.

6. Priorities for 2021-22

This paper was requested by Steve to look at operational priorities currently and over the next year. This paper is in the context of a number of elements: the Strategy 2020-24, the issues/presentation Steve gave at the away day and the areas he highlighted which Board agreed to and also takes account of the intelligence and evidence we have received.

At the Board Advisory Committee there was a conversation about focus and Geoff has written a paper on this to be discussed at the Strategic Focussed Board meeting 29th June.

This priorities paper looks at both External and Internal areas we will be focussing on where the evidence suggests our attention should be. This paper has come to Board for support, scrutiny and stewardship and gives Board the opportunity to have an overview and input into this plan for the year.

Kumar suggested that Board map out all the areas involved in the re-start to enable a systematic review of these at Board meetings. Steve added that perhaps Board need a triage system on the restart to determine what to take forward and what not to. Reflecting on our internal holding to account log and service change log, Geoff suggested using some of this information with Board.

Action: To reflect on the Board monitoring system for the re-start.

7. Policy sign off - none at this time

8. Report Sign off - none at this time

9. Finance

The final accounts for the year shows a saving on staff 31k and 17k on non-staff costs which is a 48k saving against our budget. We received an additional 7k from HCC which has been reflected. We will be entering the 2021-22 financial year positively. Steve thanked Alan for his work and update.

10. Board Advisory Committee

Alan updated that the last Board advisory meeting was very productive. There was a good conversation about health and social care and deepdive into the budget and research and engagement projects.

11. Any other business including questions from the public - none

12. Part 2 items - recorded separately

- HR
- Signposting

Next formal meeting of the Board: Tuesday 24th August 2021, 10am -1pm