






Healthwatch Hertfordshire Board Meeting
10am on Tuesday 17th November 2020, at
Virtually via Zoom

Board Members: Eve Atkins, Alan Bellinger, Maryrose Brennan, Meg Carter, Brian Gunson, Sundera Kumara-Moorthy, Steve Palmer, Jayne Taylor, Michael Taylor Executive Team: Geoff Brown (Chief Executive), Nuray Ercan (Head of Governance and Operations), Visitors/others: Joy Hale (ENH CCG) Apologies: Leslie Billy (Viewpoint), Virginia Kirri-Songhurst, Ted Maddex (HCC Commissioner), Kristy Thakur (HCC Commissioner),	
1. Welcome, apologies and register of interests Steve welcomed everyone present. Apologies as above. Steve reminded everyone that it is important to declare any personal and/or professional interests. No declarations of interests to be added/removed.	 HwH-CID-01 Conflict of Interest I
2. Minutes of 25th August 2020 and outstanding actions The minutes were approved as an accurate record and the outstanding actions tracker was reviewed. Re Dual Diagnosis - Eve and Kumar attended a Workshop looking at Mental Health/Substance Misuse work plan and priorities under the auspices of the Mental Health and Learning Disabilities ICP and the work from the workshop will form part of the transformation plan. Issues and experiences we have received have now been raised with HPFT, CGL and partner organisations to address and respond to those issues. This specific Board action is complete and now closed. The response from HPFT now becomes a holding to account issue, goes into the holding to account log and is monitored alongside all other services and issues and we will continue to hold to account in this area. The process for holding to account for dual diagnosis should not be different from the way we hold all other services to account. Geoff and Eve reported that they have recently held recent holding to account meeting with HPFT and they were clear that this is an issue that needs to be addressed. There is an opportunity here as there is a commitment to try to improve the service. HPFT also went through all the actions that we had put in the Covid-19 survey that they needed to address by them and how they were going to respond to each of the issues. Geoff updated that we are awaiting for the notes of the meeting and an action list of areas they are addressing. Kumar requested for this element to remain open until this has been received. Eve highlighted that it is important to monitor the improvements going forward. Action: Geoff will send the notes of the meeting and the actions list when received. Re Continuing Healthcare - Geoff confirmed that this is an issue being raised at all the meetings we are attending and confirmed that we will revisit CHC next year.	 HwH-21 Board Minutes 25.08.20 DF  HwH-SD-009 Outstanding Action
3. Chair's update Steve noted and was pleased to hear that the COVID-19 vaccine has now been developed and Jayne confirmed that West Herts Hospital Trust will be responsible for vaccinating their staff, as well as HPFT and HCT staff.	

<p>There is a new group being set up regarding good practice around planning gain (section 106 agreements) which Steve attended.</p> <p>Mental health will be the big issue going forward and this will have long term impacts. We will have to keep a very close eye on this area.</p> <p>Mount Vernon - Steve updated that the hospital will be relocated. This will be on the agenda for the next year.</p> <p>Away day - There have been lots of suggestions put forward as items for the away day however these were focussed on strategic issues however away days would traditionally focus on development. Steve highlighted that it was important to have conducted the Board 1:1s in December and to consolidate the information from these for a discussion at the away day so this should be postponed until the New Year. Board confirmed that postponing the away day until early February 2021 would be advantageous. Action: Nuray to identify an alternative away day date for February 2021.</p>	
<p>4. Chief Executive's update</p> <p>Geoff introduced the various documents which report up to the end of September 2020.</p> <p>Geoff echoed the request made at the Board Advisory Committee meeting, reminding and encouraging everyone to let us know when they have attended meetings as well as when meetings have been cancelled for contract monitoring purposes.</p> <p>Commissioners are very happy with delivery of key pieces of work. Examples of these are the Covid-19 surveys, GP websites audit, the veterans project, the work on co-production and mystery shopping of MSK services.</p> <p>We are currently recruiting to the vacant Research Officer post.</p> <p>It was a busy quarter for holding to account meetings. It has been particularly important for commissioners and providers to hear the patient perspective, and issues we've been able to raise has led to them looking to how they can address issues such as communication in a more effective way going forward.</p> <p>There was a dip in signposting in the early days of the pandemic however these contacts have now increased again.</p> <p>Geoff highlighted that we are very stretched at the moment with intensive website focus and supporting new ways of working for staff. Geoff asked for Board to bear with us if we are slower getting back to them. Board offered their support and asked that he contact them if they can do anything to help.</p> <p>In answering Brian's question, Geoff highlighted that the ENH CCG holding to account meeting was held last week so slightly outside of the above reporting period. This was the first meeting with Sharn in the role and was a productive one.</p> <p>The GP website report was published published last week and is available on the website now.</p> <p>Geoff confirmed that the ICS communication going well.</p> <p>Maryrose highlighted that she attended a really good meeting that Joy had arranged for PPG representatives. Joy provided some more information on this and confirmed that there would be a follow up meeting in January.</p> <p>Board discussed mental health, early discharge and community mental health services and agreed that there would be a watching brief on this area as there are a greater number of services users impacted in this way since the pandemic.</p>	<div data-bbox="1362 678 1417 734"></div> <div data-bbox="1289 741 1497 797">HwH-23 Projects Activity Document Qtr</div> <div data-bbox="1362 808 1417 864"></div> <div data-bbox="1289 871 1497 927">HwH-24 PIR Quarter 2 Jul-Sept 2020 Oct R.</div> <div data-bbox="1362 938 1417 994"></div> <div data-bbox="1289 1001 1497 1057">HwH-25 Qtr 2 Voice Contract Performance</div> <div data-bbox="1362 1068 1417 1124"></div> <div data-bbox="1289 1131 1497 1187">HwH-26 Compliments Qtr 2 July - Sept 2020</div>

<p>It was agreed that Board would receive an update about the progress of the new website at their meeting in February or May. With regards to tracking quarterly website hit rates and comparing to the previous quarter, Nuray confirmed that she could include the previous quarter's figure against the current figure within the voice monitoring return.</p> <p>Geoff confirmed that care home visitation issue is within the service change log, and although this is not a Hertfordshire specific issue we are keeping an eye on the changes in this area with new guidance coming through.</p>	
<p>5. Policy sign off</p> <ul style="list-style-type: none"> Decision Making Policy <p>Geoff introduced the new Policy. HwE recommended local Healthwatch adapt the standard remplate. It references the Scheme of Delegation and we need to record decisions that are made by Board and also decisions that have been delegated.</p> <p>It was noted that Trustees and Board Directors take on additional responsibility.</p> <p>Board were happy to approve the new Decision Making Policy.</p>	 HwH-27 Decision Making Guidance Poli
<p>6. Enter & View Report Sign Off - none at this time</p>	
<p>7. Finance</p> <p>Alan's gave a summary and overview of the budget and confirmed that the financial position looks good. Revenue is coming in shortly, and there has been underspend on staff costs and an additional spend on laptops in this financial year.</p>	 HwH-28 Management Account
<p>8. Board Advisory Committee</p> <p>Maryrose highlighted that the last meeting was on 10th November and was well attended. She summarised the main items discussed. Maryrose, on behalf of the Committee also highlighted that the pressure on staff working at home is huge and if there is anything the Board could contribute, eg. mentoring, to approach them.</p> <p>Nuray confirmed that health and safety and working at home is being addressed through display screen equipment form analysis, and meetings with employees to ensure everyone has equipment that they need to work effectively and safely.</p> <p>Steve reminded the Board that Maryrose would shortly be moving away and highlighted that she has made a huge difference and will be missed. Maryrose added that she has enjoyed working with HwH.</p>	
<p>9. Meetings for 2021</p> <p>Board agreed the schedule of meetings. The away day scheduled for 18th March will be rescheduled for February. We've assumed that the meetings will be virtual and we will revisit this should the circumstances significantly change.</p>	 HwH-29 Meeting dates 2021DRAFT.doc
<p>10. Any other business including questions from the public - none</p>	
<p>11. Part 2 item - closed</p> <ul style="list-style-type: none"> HR matter 	
<p>11. Speaker session - Covid and 111, Graham Clarke, Herts Urgent Care (HUC) Chair</p> <p>Graham talked through his slide show.</p>	 Herts Heathwatch Nov 2020.pptx

<p>In response to Steve's question Graham confirmed that there was a reduction in demand for non-covid issues as per A&E. Graham said that this is worrying.</p> <p>In response to Kumars question Graham confirmed that in Herts it was an advantage to have Herts Help's involvement.</p> <p>There is been an increase in people not being able to access dentistry - is this being coded as a covid issue or a general one? Graham answered to say that it is coded as a general issue but it is a consequence of covid.</p> <p>The covid situation has brought about a different way of working and an increased work load for HUC. HUC have retained previous work but also picked up administrative functions of booking appointments. Do you see HUC going back to its clinical funtions going forward? Graham answered to say that there is thinking around the relationship between 999 and 111 and better alignment. The data around the impact of Clinical Assessment Service (CAS), particularly at the acute end and on primary care is compelling. Having that clinical piece is important and time is saves in other parts of the system. Graham does not think that the clinical component of the workforce will change.</p> <p>Covid has created a huge amount of anxiety, there is also an upcoming anxiety around access to the vaccine. Graham confirmed that we are currently Tier 2 so that will determine the timetable for the vaccine.</p> <p>Staff have had to go through lots of stressful situations, how are they managing and are there enough staff? Graham confirmed that the Welwyn base is the largest and there are bases in Peterborough and Bedford. They are all networked together. There can be high turnover. Staff have worked longer hours rather than HUC being able to take on more staff. There are trainers and are quality assured and a percentage of calls are recorded for this purpose.</p> <p>How many calls were lost that could not been answered? Graham said he did not know however suspected that that some people may have had to call twice to get through in early stages of the pandemic.</p> <p>Is there a confilict arising post covid of HUC booking appointments at GP surgeries? Graham said that he did not think they were competing but confirmed that he is concerned about the capacity of doctors irrespective of which service they are in. It is about the patients best interests.</p> <p>Are there any other innovations that you would like to support? Graham said that the telephony system is currently being improved to save up to 5 second on each call. There are different sytems being used between HUC and for example surgeries - there are effiecincy and effectiveness improvements that technology could enable which doesn't change the patient interface in this way.</p> <p>Winter is about to hit - what do you see as your big concerns fot the next 3 months? A long standing concern is staffing and resourcing and being underfunded. Also mental health issues and the vaccine.</p> <p>The Board thanked Graham for such an informative presentation.</p>	
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Next formal meeting of the Board: TBC