

Healthwatch Hertfordshire Board Meeting 10 a.m. on Monday 11<sup>th</sup> September 2017, at Douglas Tilbe House, Hall Grove, Welwyn Garden City, AL7 4PH

**Board Members:** Eve Atkins, Alan Bellinger, Sundera Kumara-Moorthy (Chairing in Michael's absence), Steven Palmer (arrived at 10:15), Michael Taylor

**Executive Team:** Tom Barrasso, Geoff Brown (Chief Executive), Monika Brzozowska-Neroth (Resources Manager for Agenda item 7d & 7h), Nuray Ercan (Operational Manger, Minute taker), Paul Regan (Communication and Engagement Officer, Tweeting), Amy Stanton (Senior Administrator as part of her induction programme)

**Visitors/others:** Leslie Billy, Sarah Clemerson, Carolyn Gale (HCC Community Wellbeing Team), Linda McIntyre (Stakeholder Panel Co-Chair), Kevin Minier (Stakeholder Panel Co-Chair), Penny Shapland-Chew

**Apologies:** Meg Carter, Michael Downing (Chair), Brian Gunson, Virginia Kirri-Songhurst, Barbara Suggitt

These minutes are the formal record for the Board of decisions made. For more information about the items discussed please see the relevant meeting papers available on the website. Alternatively please contact the Healthwatch Hertfordshire office for further information.

It is noted that Healthwatch Hertfordshire Board meetings will be Tweeted live.

## 1. Welcome, apologies, register of interests

Kumar welcomed everyone and informed the meeting that Michael is unwell at present. He also communicated health and safety messages. Apologies as above. Everyone introduced themselves. No interests declared.

# 2. Minutes of 15<sup>th</sup> May 2017 & outstanding actions

The minutes were approved as an accurate record. Outstanding actions were highlighted. Action: It was agreed that we should produce a list of Hertfordshire MPs with the contact we have had with them. Individual contact with all MPs was agreed as the appropriate way forward (rather than a single meeting).

Action: It was also agreed that Healthwatch will be promoted to District Councils to enhance awareness of the service.

- 3. Chair's update In Michael's absence Geoff gave the report as below:
- a. Healthwatch England Conference: Attended in July. The best of the three attended so far. Sessions were good, endorse the points made in Tom's report, especially the stress on real engagement with people.
- b. Sustainable Transformation Partnerships: Discussed at conference, especially difficulties of engaging with public. I emphasised that we were the only organisation with the ability look at both health and Social Care here.
- c. Health and Welbeing Board: Last weeks event, set to clash with Health Scrutiny, cancelled.
- d. Clinical Commissioning Group consultation events. Used the opportunity of those facilitated to push Healthwatch, and attracted some interest. Geoff and Michael have facilitated nine Healthier Future events around the county.

Board discussed this item and explored issues such as boarder issues and consistency across the County and the impact the consultations will have etc.

e. Trustee recruitment: Received 3 applications so far. Deadline 12the September, interviews 20<sup>th</sup> and 21<sup>st</sup> September. Geoff, Michael and Barbara will make up the interview panel.

## 4. Chief Exective's update including monitoring return

Geoff introduced the item explaining that the Chief Execs report comprises the contract monitoring return, also provided to Carolyn our Commissioner. Three key documents are provided: The standard Hertfordshire County Council performance assessment spreadsheet, the word document containing further information about projects and activity within the quarter and a list of compliments received.

It was agreed that more information from Paul will be provided within the contract monitoring documents re website analytics etc.

Geoff reported that Healthwatch Hertfordshire's funding per head is considerably lower than the six other Healthwatch in the region who have provided budget figures. These receive an allocation from their local council of between 52p per head and 65p per head. Healthwatch Hertfordshire receives 32p per head.

### 5. Reviewing Policies and Governance documents

Healthwatch Hertfordshire is required to systematically review policies and governance documents. Relevant sub-committees have reviewed these policies and where appropriate made amendments. These policies are brought to Board for sign off.

HwH has developed the volunteer policy to support volunteers and it recognises responsibilities and sets out the expectations for both the volunteer and HwH. It follows standard practice to ensure we are supportive and that we have good practices as an organisation.

# Board approved the following Policy:

Volunteer Policy

Accessibility of written policies was discussed and other accessible versions.

#### 6. Governance, structure, priorities and assessing projects going forward

Geoff introduced the item and talked through the slides. This item is about our structure and how we run our business going forward, what kind of Hw we want to be and what priorities we focus in in the next year. HwH's contract with the County Council states that HwH will act as:

- Consumer Champion/Engagement
- Influencing
- Signposting Service

If we want to continue to undertake as much work as we are doing we will need to raise revenue. Points raised for by board consideration on the structure of sub-committees:

- The internal and external focus should be fluid
- Further thought re how the two sub-committees would communicate between meetings and report to Board
- Workshops as a way of sharing information between meetings?
- How the membership of the two sub-committees are worked out

Board were happy with revising the committee structure / the direction of travel / approach and asked for the model to be worked up and fed back to Board outside of the Board meeting.

Action: Subcommittee structure to be worked up and circulated.

Next Geoff talked through the priority decision making. He reminded board of the routes that priorities have come to our attention and HwH's financial position in this context. Board were encouranged to comment on the list proposed. Kevin updated Board on the Stakeholder Panel discussion on this item. The Stakeholder Panel stressed that they saw all the areas as equally

important and would take a theamatic approach however chose: Income Generation, Patient and Public Involvement Engagement (Patient Practice Groups) and Sustainable Transformation Partnerships as priorities for the next year. An additional area of local pharmacies was discussed at the panel and carers were also raised. See paper under agenda item 7J.

Board agreed that Income Generation should include protection and ehhancing statutory funding was agreed as a definite priority. Carers as a priority straddling all areas was discussed.

Board were asked to choose the 3 priorities from the list and submit these electronically by Monday 25<sup>th</sup> September. The operational team will collate these and feedback results.

Action: Board to choose 3 priorities and send these to Nuray and Geoff by 25th September.

# 7. Sub-groups and committees

- **a.** Mental Health Service Watch Group see paper circulated for information Dual Diagnosis last meeting has taken place. Protocol has been developed between HPFT and Spectrum. Any progress on th protocol will be reported back periodically.
- b. Learning Disability Servie Watch Group see paper circulated for information Board agreed the proposal and the new themed approach.
- c. Enter and View (QISC) see report circulated for an update

#### d. Transport

Currently delivered by Private Ambulance Service and there are various issues being reported, including: long waits, missed appointments and various health and safety issues within vehicles. The issues have been escalated to the Quality Surveillance Group where we were represented by regional representatives and awaiting for a report back.

The Clinical Commissioning Groups have indicated a new invitation to tender for this contract and we hope to be invited to contribute the tendering process from a patient experience and quality point of view.

# e. Representation sub-committee - see update circulated

Board approved the following appointments:

- Central Midlands South Child Health Information Service Programme Board Nuray to attend to assess how useful
- Hertfordshire Partnership Foundation Trust Peer Experience Listening Group Tom to attend to assess how useful
- Co-production Board GB currently attends recommended Paul to attend going forward due to the communications/engagement element
- Integrated Personal Commissioning Recommend Tom if officer role
- Mental Health Planning and Performance Group Michael D will be talking to Eve about this group
- East of England Ambulance Service NHS Trust User Group Michael T made a recommendation that we are following up.
- f. Strategy sub-committee see paper circulated for information
- g. HR sub-committee update To be covered in part 2

#### h. Resources Sub-committee - see papers circulation for information

Steven introduced the agenda item and updated Board that we are within budget. Monika has produced a cash flow document, which will be developed in the coming months.

- i. Sensory and Physical Disability Service Watch Group No update
- j. Stakeholder Panel see paper circulated
- k. Sustainability Transformation Partnerships Working Group Update given under Chair's report
- I. Contract and HwH Tendering Agreements (CTA) working group no update
- 9. AOB incl. questions from the public -

Q: HwH has 47 Enter and View monitors but has not met its target of completing 30 visits this year? A: In the last reporting year we did cover more than 30 visits. Not all 47 monitors have a wish to undertake care home visits. We will be taking this question away and will answer this fully at a later point in time.

Q: What is your reason for not doing as many care home visits? Are enter and view's into hospitals the same as PLACE?

A: No, Enter and View has a different set of peramiters. PLACE is the Trusts annual assessment with external patient involvement. Enter and View has focussed on monitoring visits on care homes for over two years and we have found that they have generally fulfilled the requirements set. Care Home visits are not the only way that we help monitior safety of vulnerable residentsSarah made a plee for care homes to be kept on the monitoring programme going forward.

Q: Can you tell me what Scrutiny committee and panel meetings you attend?

A We attend the Adult Care Cabinet Panel as an observer but are not members of the panel and have no speaking rights at. We are members of the Health and Wellbeing Board. We meet with Scrutiny and we raise issues with them. We attend meetings to give evidence but we are not members of the committee.

There is an interest in the issues raised at these so members are informed.

Q: The annual priority survey was not in the last survey.

A: This has been scheduled for the Autumn.

The following question will be responded to outside this meeting:

Q: Issue raised re the accessibility of the Board documentation/meetings.

Leslie Billy thanked Board for the invitation to attend this Board meeting.

Next meeting: Monday 20th November 2017, 10am, Silver Court