

Board Meeting In Public

Date:	Tuesday 19 th July 2016	Location:	High Cross Church, Camberley	Time:	2pm – 4pm
Present: Peter Gordon (PG), Jason Davies (JD), Richard Davy (RD), Laurence Oates (LO), Wanda Jay (WJ), Deborah Mechaneck (DM), Kary Backhouse (KB).					
Apologies: Mark Sharman (MS), Lynne Omar (LOmar), Kate Scribbins (KS).					
Other HWSY Attendees: Matthew Parris (MP), Lauren ter Kuile (LtK), Lucy Finney (LF) [LF Solutions, taking minutes] Public Attendees: Nick Markwick (NM - Surrey Coalition of Disabled People), Eleanor Levy (EL - Chair of the Independent Mental Health Network Co-ordinating Group), Gareth Jones (GJ).					

Agenda Item	Discussed/Action	Who	By When
1. Welcome and apologies	PG opened the meeting and welcomed everyone.		
2. Declarations of interest	There were no new declarations of interest. PG reminded Board Members to update their declarations of interest should they change at any point.		
3. Questions from the Public	<p>No questions were tabled from the Public, but one question had been asked at a recent volunteers' event: Will Healthwatch Surrey (HWSy) be holding a Public AGM followed by an open meeting?</p> <p>JD replied that the HWSy constitution only requires an AGM if its Members request this, however quarterly Board meetings are held in public, there are regular engagement events and reports are made public. PG suggested that there may be future opportunities to explore additional public meetings but this is not currently seen as a high priority.</p>		
4. Approval of the previous minutes and Actions	<p>The following amendments were made to the April 2016 minutes:</p> <ul style="list-style-type: none"> ● Page 1 – date is 26th April 2016. ● Page 4, 6th bullet point – last sentence amended to read 'One experience has been referred to the CQC, who have passed it on to the GMC for review.' ● Page 5, item 10, last paragraph – PG highlighted that Surrey, East Sussex and West Sussex were not merging and the minutes should read 'Surrey, East Sussex and West Sussex are pursuing the devolution agenda.' <p>Subject to the changes above the minutes of the previous meeting in Public (April 2016) were agreed as an accurate record.</p> <p><u>Matters Arising</u></p> <ul style="list-style-type: none"> ● Page 3, Volunteering – DM asked whether there was any update on the dedicated session on volunteering that was due to be organised in Q1. MP confirmed that a session has yet to be arranged, however the approach to Volunteering is currently being looked and KS is working on this. This will be added to the Action log for KS's attention. 		

	<p>Action: KS to progress a dedicated session on volunteering.</p>	KS	
<p>5. Chairs Report</p>	<p>PG circulated a report highlighting meetings he has attended as follows:</p> <ul style="list-style-type: none"> <p>Three Health and Wellbeing Board meetings PG noted that the Health & Wellbeing Communications & Engagement Strategy has moved slowly mainly due to absences at Surrey County Council, however this is now being picked up and worked on and is on the Agenda for the Health and Wellbeing Board’s Forward Planning. KS gave a presentation which includes the HWSy Forward Plan and PG will circulate this to the Board. Healthwatch is working towards providing relevant information into important items.</p> <p>Two Healthwatch Surrey Board Meetings in Private Noting areas that have been worked on between the meetings in Public; these include a workshop on two areas of Strategic Focus (Sustainability & Income Generation and Awareness, Marketing & Communications).</p> <p>Provider meetings PG and KS had met with the Chair and CEO of Ashford St Peter’s Hospital Trust. A protocol about how to work together is being progressed. PG recently attended an Epsom & St Helier Trust (ESHUT) Annual Public Meeting and asked how the relationship between ESHUT and Healthwatch can be improved. PG has made contact with the Chair and is awaiting response.</p> <p>Healthwatch Sutton Chair Healthwatch Sutton is well advanced in areas of discharge from hospital and Enter & View visits and offered to help where they could with Surrey’s Enter & View visits. They have a good relationship with St Helier and suggested Healthwatch Surrey progress with Enter & Views which will help to build a relationship with the hospital. PG suggested getting the staff teams in contact.</p> <p>Surrey County Council Monitoring Meetings</p> <p>Patient Participation Group Meetings PG will also attend future local area ‘PPG Chairs’ meetings.</p> <p>Health & Wellbeing Board On a Quarterly basis Healthwatch Surrey will have a slot at the Health and Wellbeing Board to report on ‘What We’ve Heard’.</p> <p>CEO Appraisal – Part 1 Internal and external feedback received has been positive and KS has successfully completed her probationary period and her position has been confirmed.</p> <p>Chair Appraisal This is being planned and the process will be let by JD, the Deputy Chair.</p> <p>Action: PG to circulate KS presentation to the Surrey Health & Wellbeing Board</p>	<p>PG</p>	

<p>6. CEO Report</p>	<p>In the absence of KS, MP spoke to the CEO Report highlighting:</p> <ul style="list-style-type: none"> ● There are two areas currently being looked at and these are 1). Implementing the new structure (engagement and how feedback is captured). 2). Developing relationships with commissioners. ● Three new staff have joined the team; one will work on engagement at point of service and public locations, one will have a strategic role working/engaging with the community, voluntary and faith sectors, the third role is full-time admin support to ensure data is captured and coded. All staff are in post and have undertaken induction. ● New Service Level Agreements (SLAs) in place with 5 CABx and regular Healthwatch Champion meetings taking place. ● A 'Listening Tour' will take place between July and September 2016 and will visit a point of service and high-footfall public location in each District and Borough with the addition of Children's Centres. These will be publicised on the website. ● Healthwatch Surrey are on track for gathering the number of useful experiences to meet the Key Performance Indicator (KPI) and is currently meeting other KPI's. ● JD and KS are due to meet with SDPP to discuss the SLA. ● A challenge is to find a process to prioritise work with seldom heard groups. ● Relationships with commissioners are being developed and contacts with senior executives in Clinical Commissioning Groups are in place. This gives the opportunity to share unique insight and experiences. Team members have been allocated to 'lead' the relationships with each of the CCGs and have a nominated volunteer support. ● There is a bigger investment in terms of the number of Boards attended. ● Attended the new Primary Care Co-Commissioning Committee at NW Surrey CCG and will attend on a regular basis; it is beneficial to be involved in the first of the CCGs to take on co-commissioning. ● Attended two Sustainability and Transformation Plan workshops and are actively engaged in these plans. These were submitted at the end of June and the CCGs expect to get a response at the end of July; Healthwatch can then talk to commissioners about the role it can play going forward. ● The Annual Report is now available and reports an underspend which relates to National Insurance. ● An apprentice is yet to be appointed. 		
<p>7. Quarterly Report</p>	<p>LtK introduced the Quarterly Reporting explaining that the Report's presentation has been improved and simplified in order to make it easier to read.</p> <p>LtK included the following highlights;</p>		

	<ul style="list-style-type: none"> ● As mentioned earlier in the meeting three new team members have been recruited. ● Healthwatch Surrey is part of a South East Group of Healthwatches who held a workshop with the CQC inspection teams to develop a way of working which has been rolled out across the country. Following this Healthwatch Surrey has been ‘highly commended’ at the national Healthwatch awards for the ‘value we bring together’ in working with the Care Quality Commission. ● Two Enter & View Reports have been published as part of a project co-ordinated by Healthwatch Surrey to develop an Enter and View tool for local Healthwatch to assess providers against the new NHS Accessible Information Standard. ● A recent meeting with SECAMB discussed their plans to improve governance and patient safety and sought assurances from their commissioners who confirmed this was high on their agenda. ● The Annual Report has now been published. ● There has been a different approach to how Healthwatch carry out engagement and Jackie Pond has met with a number of seldom heard groups to plan ‘Voice It’ projects for the next 6 months. ● The summer Listening Tour will run from Friday 8th July – 30th September and include every district, borough and Clinical Commissioning Group (CCG), asking the public to vote in a new poll and share their experiences of health and social care. <p>JD agreed that the new format was more accessible, however queried whether Surrey County Council (SCC) will require further data. MP confirmed there will be another level of reporting and they are awaiting feedback on the layout. LtK noted that the content included previously will still be contained in the CEO Report.</p> <p>Questions from the public</p> <p>NM asked as an information standard do Healthwatch Surrey provide a text only version of the documents presented at the meeting i.e. easy read headlines. LtK will look into producing text only and easy read versions of the Report.</p> <p>Action: LtK to look into producing text only and easy read versions of the Quarterly Report.</p>		
<p>8. Annual Report 2016/2016</p>	<p>LtK circulated a copy of the Annual Report to those present and reported that the team were pleased with the result which has been produced ahead of schedule. LtK thanked all those who contributed and were involved in producing the Report from staff and Board members to volunteers.</p> <p>It is hoped that the Annual Report will be of interest to a wide range of people. It opens with a ‘The year at a glance’, which is a quick summary of work. In order to demonstrate the impact of Healthwatch Surrey, the Report includes quotes from volunteers, CAB</p>		

	<p>Champions, Community Cash Fund winners and individuals within the CCGs highlighting how Healthwatch Surrey have made a difference.</p> <p>The Annual Report has been shared with stakeholders, including Healthwatch England, CCGs, etc.</p> <p>Questions from the public</p> <p>NM commented that all documents circulated are PDF and therefore accessibility is difficult, particularly for those using screen readers – again versions without pictures are needed. EL also commented on the colours used in the Annual Report stating that white writing on a blue background can be difficult to read for those with dyslexia or sight problems. LtK agreed to look at the accessibility of all public facing documents and how to approach resolving this.</p> <p>Action: LtK to look at the accessibility of all public facing documents and how to approach ensuring all documents produced by Healthwatch Surrey are fully accessible.</p>	LtK	
<p>9. Update on Influencing Strategy and Thematic Priorities</p>	<p>The Influencing Work Plan is an important document as it articulates how Healthwatch Surrey approaches their work, setting out influences, principles, methods and priorities.</p> <p>Healthwatch Surrey work to influence the thoughts, behaviours, knowledge of commissioners, providers and practitioners as well as the seeking to empower the public to make decisions about care as well as getting directly involved in shaping services. MP listed five areas in which Healthwatch Surrey seeks to effect an increase including ‘thoughts about people and the impact of services’ and ‘action to investigate experiences of services to address poor practices/share good practice; these are:</p> <ul style="list-style-type: none"> ● Care home residents ● Hospital discharge ● Mental Health ● GP appointments ● NHS complaints <p>MP highlighted the six principles which will apply to the commitments within the plan and also to activities when responding to and adapting to opportunities; this includes ‘relationship enhancing’, ‘solutions focussed’ and ‘empowering’. Some established methods of influencing will be used and the setting of thematic priorities is an important focus for work; these priorities have been informed by what people have reported to Healthwatch Surrey.</p> <p>The thematic priorities have been included in the document circulated which also sets out what Healthwatch are seeking and the activity to be undertaken around each priority. MP explained that these are not necessarily key deliverables for next year, but are more aspirations about certain issues and what will be done (desired outcomes).</p>		

	<p>When asked about how impact would be measured MP explained that the measurables have been articulated under ‘what we will do’ i.e. Enter & View and the desired outcomes will be measured. What is learnt from the thematics will be fed back into the aspirations which are regularly reviewed.</p> <p>Questions from the public</p> <p>EL thanked MP for attending the recent Mental Health Network Coordinating meetings and felt the Influencing Work Plan had impressive detail.</p> <p>There is an impact on carers and sometimes carers interests diverge from the person receiving services and this divergence needs to be recognised. MP noted that this would be good to consider when looking at priorities.</p> <p>EL explained there was a large degree of overlap about what people are expressing and would therefore like to explore any opportunities there may be to engage with Healthwatch Surrey to support some of these approaches. EL would be happy to attend any meetings that may be necessary and would formally like to make a connection with Healthwatch Surrey.</p> <p>PG thanked EL recognising that mental health is important in Surrey and is one of the key priorities for the Surrey Health and Wellbeing Board.</p> <p>With the Local Authority having to save £160m in Adult Social Care alone, NM asked about flexibility and whether Healthwatch Surrey can influence people before the services have gone? MP explained that Healthwatch have a Key Performance Indicator (KPI) around response work and therefore capacity is available to look at this, however they will not have the capacity to do everything.</p> <p>The meeting discussed this further, expanding the conversation to consultations carried out by the Local Authority (SCC) questioning how realistic their listening ear may be to a consultation – do they take notice of concerns and issues highlighted to them?</p> <p>It was agreed that the Board would explore this, and how to represent to SCC that the consultation process needs to be robust and taken notice of, in the following HWSy private meeting. PG noted that Healthwatch is reliant upon people raising issues or concerns with them.</p> <p>Action: During the Private Board meeting, members to explore how to ensure any consultation process, particularly those run by SCC, are robust and listened to.</p>		
<p>10. Update on progress with ‘What We’ve Heard’</p>	<p>‘What We’ve Heard’ meetings with commissioners provide decision makers with the opportunity to hear unique insights into the views and experiences of those that are seldom heard in Surrey and acts as</p>		

	<p>an early warning system. These meetings will take place at least six monthly to exchange information, plans and hear insights, provide evidence and produce objectives. Themes are identified through the coding structure.</p> <p>MP drew attention to who meetings had been held with since April this year and highlighted outcomes from recent meetings, however outcomes may just be in the form of an acknowledgement. It was noted that experiences were not formal complaints, more feedback and learning that is not always picked up elsewhere.</p> <p>All senior executives involved have been receptive to engaging with Healthwatch Surrey and there is commitment to continue and move forward and develop relationships.</p> <p>Next steps will include rolling out to acute hospitals and the Mental Health Trust.</p> <p>A further report on activity will be provided to the Board in 9 months' time.</p> <p>Questions from the public</p> <p>EL agreed that patient involvement shouldn't centre on complaints and there must be room for a positive channel. People need to be involved in the design of services and then a complaint becomes supportive feedback. Service providers and commissioners need to support channels of communication that are positive.</p> <p>EL asked if anyone was aware of the trend towards prescribing for long-term conditions monthly instead of three monthly? This was discussed further and PG suggested CCGs be asked whether they are exploring this and if so what are their policies.</p> <p>Action: Ask CCGs whether they are exploring changes to policies for prescribing for long-term conditions.</p>	KS/ MP	
<p>11. Action Log</p>	<p>There is a slight operational change in the Enter & View Policy and this will be reviewed in six months' time to see how it is working.</p> <p>All completed items will be removed from the Action Log.</p>		
<p>12. Public Questions</p>	<p>GJ observed that one often concentrates on problems and that it would not be amiss to highlight the more positive side – that the majority of things do go well. MP acknowledged GJ's comments and explained that at present the vast majority of experiences received are negative, however the restructure of gathering evidence may change this, because often when the team are out meeting the public there are a higher proportion of positive experiences than through other channels.</p> <p>PG noted that praise was very important when things went well. There has been lots of progress and positive things occurring in the</p>		

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	Healthwatch Team and PG asked LtK and MP to convey the Board's thanks to them.		
13. Date of next meeting	The next meeting will take place on Tuesday, 18 th October at St Saviours Church in Guildford.		

These minutes will be approved by the Healthwatch Board at the next Board meeting to ensure any Actions are progressed. Any questions or queries raised by members of the public at the next Board meeting in public will be welcomed and considered.

Minutes approved by: (please print)	
Signature:	
Date:	