

Date:Tuesday 28th July 2020Location:ZoomTime:10am – 12pmPresent: Jason Davies (JD as Chair), Deborah Mechaneck (DM as Co-Chair), Peter Gordon (PG), Richard Davy (RD), Don McIntosh (DMc), Maria Millwood (MM), John Bateson (JB), Laurence Oates (LO), Lynne Omar (LOmar), Andrea Lecky (AL)Other HWSY Attendees: Kate Scribbins (KS), Lisa Sian (LS), Natalie Markall (NM), Kathryn Edwards (KE), Tessa Weaver (TW)Apologies: Tacye Connolly (TC)

Agenda Item		Discussed/Action	Who	By When
1.	Welcome and apologies	JD welcomed everyone and noted the apologies.		
2.	Declarations of interest	Declarations of Interest has been updated and been distributed.		
3.	Questions from the Public (previously tabled)	No questions had been received from the public.		
4.	Approval of the previous minutes (April 2020)	Minutes from April 2020 Board meeting in public were approved. Action: There was a typo in first line of response to the public question, to be updated on website if incorrect.	NM	ASAP
5.	Review of Q1	Overview of the Q1 CEO report.		
fin KP	EO Report including ancial summary & Is Quarterly Activity d Outcomes report	The main focus of the last quarter has been to hear and share experiences during the pandemic. We strive to hear people's experiences of accessing health and social care, and aim to hear from those who can reach us digitally, whilst also hearing from people who have not got access to digital technologies. People sharing their experiences digitally and by post has increased. Our team and volunteers have been joining various online video meetings and scanning social media, whilst also targeting community and faith groups and food banks with bespoke flyers so people who don't have digital access still hear about who we are and share their experiences. We have been aware of the pressure within the system, and during the		
		first few weeks of the pandemic our meetings with system partners were paused but as time has gone by, meetings are starting up again. We still attend the Surrey Heartlands (SH) Quality & Performance Board and 'What We've Heard' meetings are now back on as there is still a good appetite to share what we are hearing with the system. We have met our challenging KPI of 5 volunteers recruited this quarter, including young volunteers, and they have given a lot of their time		



LS

03.11.20

during the quarter. However, our KPI relating to Advocacy referrals has not been met this quarter.

We have exceeded our KPI target for Useable Experiences. People contacting the Helpdesk is down, which may be because of the amount of information available from other sources during the pandemic. We have heard from our Citizen Advice partners that they have also seen a decrease in traffic during this period.

With regards the KPI charts at the end of the CEO report, it was agreed it would be better to show the actual performance by quarter for last year (rather than an annual average) and to add the contract KPI target line (for those with a target).

Action: LS to amend the KPI charts for next quarter.

PG expressed that he was concerned when we came into this period that there might not be an appetite for Healthwatch insight, however it is encouraging to see the response from system partners to the work we have done over the period of COVID. The system seems to be valuing us - well done to all for keeping the profile up. KS to pass on the thanks to the team.

LO noted that all CABs are working hard to ensure all their phone lines and emails are being answered but very few face to face appointments are happening at present.

Q1 Activity report

PG said the report has come far and is easy to read, our message gets across really well but wanted to know how will we incorporate new business in this going forward? There needs to be thought on how we talk about ourselves – differentiation between our work as a CIC and the Healthwatch contract - and being mindful of the audience who reads the report.

LS explained that there is an action already on the action log relating to this point and that we are reviewing the audience and the format of the report and how it sits alongside all our reports. DM asked if we could track the amount of people that read it - LS confirmed at present we don't know/can't track readership figures only the number of people it's sent to.



6.	Thematic Priority
	Update

For the past three months we have responded to the extraordinary needs of people and the system; we are now beginning to align our existing workplan with the emerging 'New Normal', but we expect to remain flexible and reactive for some months to come. All our projects had been paused at the beginning of COVID-19.

TW gave an update on the Health and Care survey and the follow up snap survey, the Insight Bulletins and current projects/in planning.

Please see attached slides for more information.

With regards to the care at home project, PG asked if it is worth taking a step back to see what we are really trying to achieve from this and whether this should include residential care.

For our Mental Health priority TW confirmed we will revaluate over the next few months as we are expected to see a substantial growth in the number of people using services and displaying symptoms of suicidal thoughts.

We will be looking at experiences of end of life care in Surrey to input to the development of the Surrey Heartlands End of Life Strategy.

JB asked if we can characterise who is responding to our surveys. TW confirmed we are capturing demographics from our surveys already. KS added that we are aware we have gaps in these demographics and the new flyers were an attempt to access new groups.

LOmar felt that it will be interesting to see which areas will start to be complained about. People are reticent to come forward at the moment and complain, and we need to give people encouragement to say whether things are working or not.

AL noted that there is a barrier for GPs to move people through the system if they cannot access digital systems. Chronic pain management has shut down and there has been no activity from these services.

PG asked how can we use our projects to best achieve something in this environment, will the work we do really make a difference? Is there something else we can be focusing on which will make a difference?

KS suggested that those interested in these areas should attend the Priority Advisory Group when these meetings resume.

Action: KS to see which Board members are interested in attending the PAG when it resumes

KS

Ongoing

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KE ran through the presentation that had been pre-circulated to the Board including the challenges and future plans for intelligence.		
LOmar felt the Intelligence Officers were doing a fantastic job, massive transformation and the documents are very good, easily readable. Congratulations to the team.		
PG felt that we need to get better at including new business and understand the challenges, using intelligence to identify where new business is. One example would be to look at the PPGs as the link to the PCNs.		
MM added that we have new volunteers with a strong and wide range of experience within the system, it would be good to show volunteers how they can make a difference through the gathering of intelligence.		
Action: KE/KS to look at how to show volunteers how they can make a difference through the gathering of intelligence.	KE/KS	Sept 2020
Action relating to Simon White: It was agreed it would still be a good idea to invite Simon to attend a HW Board meeting, but we need to revisit why we want him to come along, what questions we have and what we can offer. Also, the timing may not be right at the moment.		
PG suggested that as KS is more likely to see him in meetings the action remains open for KS to follow up.		
Action: Update the action relating to Simon White for KS to follow up in due course	KS	Ongoing
The amber action relating to the Q1 report to remain on the action log.		
All green Actions were approved to be removed.		
None.		
No AOB.		
3 rd November 2020, Upper Hall, Trinity Centre, Trinity Churchyard,		
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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.

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Surrey

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