

# Board Meeting in Public

<b>Date:</b>	Thursday 26th January 2023	<b>Location:</b>	Teams	<b>Time:</b>	4:00 – 5:30pm
<b>Present:</b> Jason Davies (JD as Chair), Deborah Mehanek (DM), Jason Davies (JD), Peter Gordon (PG), Richard Davy (RD), Laurence Oates (LO), John Bateson (JB), Tacye Connelly (TC)					
<b>Other HWSY Attendees:</b> Kate Scribbins (KS), Lisa Sian (LS), Samantha Botsford (SB), Natalie Markall (NM), Vicky Rushworth (VR), Suzanne Stronge (SS) and Tessa Weaver (TW)					
<b>Apologies:</b> Andrea Lecky (AL), Maria Millwood (MM)					

Agenda Item	Discussed/Action	Who	By When
<b>1. Welcome and apologies</b>	JD welcomed everyone. MM and AL had sent their apologies.		
<b>2. Declarations of interest</b>	No further declarations of interest to the table updated and distributed as part of the meeting papers.		
<b>3. Questions from the Public (previously tabled)</b>	No questions have been received from the public.		
<b>4. Approval of the previous minutes Jan 2023)</b>	The minutes from the Board Meeting in Public on 3 <sup>rd</sup> November 2022 were approved.		
<b>5. Review of Q3</b>  <ul style="list-style-type: none"> <li>• CEO Report including financial summary &amp; KPIs</li> <li>• Q3 Influence and Impact report</li> </ul>	<p><b>CEO Report including financial summary &amp; KPIs</b></p> <p>KS provided a summary and additional information in relation to her CEO Report:</p> <p>In December 2022 we had a focus on promoting positive stories of health and care to “do our bit” to boost morale across the health and social care system (the “<b>System</b>”). Firstly, we produced our Insight Bulletin in December 2022 which was all about praise and thanks for good care. Secondly, we created a Christmas card which was dedicated to focusing on the positive feedback we’ve received, to share with our commissioners and service providers. HWSy consider that promoting the hard work and positive experiences helps strengthen our relationships for when we need to deliver less positive messages.</p> <p>Our project ‘<i>Maximising the learning from complaints</i>’ has been published. We looked at over 125 of our advocacy cases and had a deep dive into why people had complained and why they needed support. This led to a number of recommendations to the System, ensuring signposting to the ICHA service is prominent when and where people need it. We also made a recommendation for provider websites to make signposting to the IHCA easier, and for it to be easily visible</p>		

	<p>(higher up) on their website. In addition to these, we have come up with a set of questions to prompt further thinking from the System. There are ongoing conversations on how these will be taken forward over the next few months.</p> <p>KS and TW attended the Surrey Heartlands ICS Complaints Leads Network Meetings and have been discussing how complaints can be handled in a way that is integrated and how the System can learn from those complaints. For instance, is the standard clarification of NHS complaints the best way for the System to analyse their complaints? This is a very important piece of work to take forward, namely <i>“how does the System in Surrey demonstrate it is learning from complaints and make that transparent to the public to make them feel it’s worth complaining to make a difference?”</i></p> <p>There was a conversation prompted by LO around communicating and outlining advocacy routes, and whether there is something that outlines the steps you need to take when wanting to make a complaint. PG mentioned that services need to engage with their patients in the first place to ensure the service is fit for purpose. KS said that we are considering following up with work around <i>“Is the System listening?”</i>, which will be looked at for one of our priorities in the upcoming year.</p> <p>Our KPI’s are all on track. We have seen a decrease in the number of people contacting our Helpdesk and our enquiries inbox, but the number of people leaving experiences through our website is higher.</p> <p>Recruitment of volunteers is still below the KPI but we know that this is something affecting all organisations that recruit and use volunteers at the moment.</p> <p><b>Q3 Influence and Impact Report</b></p> <p>SB. provided a summary and additional background information in relation to the Q3 Report:</p> <p>We continue to hear similar top themes to the last quarter. Experiences around GPs make up 55% of what we hear. <i>GP access</i> is still a focus and of interest to the System generally, so it is important to hear that we continue to be listened to.</p> <p><i>Dentistry</i> - we have heard less about Dentistry this quarter; this may be due to improved funding for dentists and better communications last quarter.</p> <p><i>Hospitals</i> - we are going to be working on our relationships with the Hospitals. HWSy’s new Insight and Engagement Officer, Suzanne Stronge, will be helping to build better relationships and with the hospital’s PALS departments.</p> <p><i>Maternity and Early Years</i> – we presented at the Surrey Heartlands Quality Group with our deep dive on the pressures within the System. A lot of the overall feedback was related to workforce, but it is still good to be able to bring the patient voice to these meetings.</p>		
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	<p><i>Public Health</i> – we are attending more meetings to share our insight, which they’re taking on board. JB asked if Public Health are asking us about specific things, SBo replied that they are asking to hear a range of things, but the way we do our engagement, by visiting community settings, is providing lots of insight for them. The quantity of what we are hearing is helping as we have quite a few themes and examples to share.</p> <p>KS mentioned that we continue to work with Surrey Heartlands and Frimley Health to establish an understanding of where the local Healthwatch insight goes in terms of "Place" and System. We know how we want HWSy to interact but what we haven’t got as yet is a specific agreement at executive level.</p>		
<p><b>6. Thematic priority update: the Board is asked to note progress.</b></p>	<p>TW provided additional information in relation to her Projects Report provided in the Board papers:</p> <p>Our project ‘<i>Maximising the learning from complaints</i>’ has been published on our website.</p> <p><i>Neurodiversity</i> – The potential scope for this project was very wide, but a question arose around diagnosis. A new approach is being pioneered by Surrey &amp; Borders Partnership/ Surrey County Council which is designed to deliver needs-based support to those suspected of being Neurodiverse <u>before</u> they are assessed and diagnosed. We will be looking at what people hope to gain from diagnosis, and we have had a big response from people wanting to share their experiences with us so far. The report is due to be published at the end of March/April 2023.</p> <p>A conversation was had around whether we should be seeking additional funding for this project given the wide interest, but TW explained that the interest is mainly from other charities and not-for-profit organisations, therefore we are unsure if a System partner would want to provide further funding.</p> <p>DM asked if we are ensuring we are interviewing a range of different ages and ethnicities? TW confirmed we are aiming to speak to a range of people from different backgrounds.</p>		

<b>7. Communications Strategy Update</b>	<p>VR presented the Comms Strategy slides that were sent with the Board papers.</p> <p>PG asked about the communications with the System, which is where we are at the heart of wanting to make change. PG asked if we can be more forward in promoting our engagement and the benefits of engagement with System partners.</p> <p><b>Action: VR/LS to review the comms to external partners with regards Luminus and LHW.</b></p> <p>LO mentioned the importance of including the volunteers in our Comms and LS confirmed this will be discussed in the volunteer celebration event to be held in March. SBo reassured the Board that staff team are always looking at ways to include our volunteers.</p> <p><b>The Local Healthwatch Communications Strategy for 2023-2024 was agreed by the Board.</b></p>	LS/VR	
<b>9. Action Log</b>	<p><i>To be carried forward:</i> further considerations and conversations to lead to a Board Workshop to discuss the HWSy Volunteer Strategy and how we cover neighbourhoods, PCNs etc. KS, JD and DM to agree where this best sits in the Board diary for 2023-24.</p>	KS/ JD/ DM	ASAP
<b>10. Public questions not already dealt with</b>	<p>No other questions received from the public.</p>		
<b>11. AOB</b>	<p>No further AOB.</p>		
<b>12. Date of next meeting in public:</b>	<p>Thursday 27<sup>th</sup> April 2023. JD closed the meeting.</p>		

These minutes will be approved by the Board of Directors of Healthwatch Surrey CIC at the subsequent 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 in respect of these minutes will be welcomed and considered.

<b>Minutes approved by: (please print)</b>	
<b>Signature:</b>	
<b>Date:</b>	