

Board Meeting in Public

Date:	Thursday 27 th April 2023	Location:	Astolat	Time:	4:00 – 4.45pm
Present: Jason Davies (JD as Chair), Deborah Mehanec (DM), Peter Gordon (PG), Richard Davy (RD), Laurence Oates (LO), Maria Millwood (MM) Tacye Connolly (TC) Sarah Billiald (SB)					
Other HWSY Attendees: Kate Scribbins (KS), Lisa Sian (LS), Samantha Botsford (SBo), Pam Howard (PH) Vicky Rushworth (VR), Adam Connolly (AC) Julie Callin (JC) and Tessa Weaver (TW)					
Apologies: John Bateson (JB), Andrea Lecky (AL)					

Agenda Item	Discussed/Action	Who	By When
1. Welcome and apologies	JD welcomed everyone. JB had sent his apologies.		
2. Declarations of interest	No further declarations of interest were noted.		
3. Questions from the Public (previously tabled)	No questions had been received from the public.		
4. Approval of the previous minutes	The minutes from the Board Meeting in Public on 26 th January 2023 were approved.		
5. Review of Q4 <ul style="list-style-type: none"> • CEO Report including financial summary & KPIs • Q4 Influence and Impact report 	<p>CEO Report including financial summary & KPIs</p> <p>KS provided a summary and additional information in relation to her CEO Report:</p> <p>Key highlights include the development of the Local Healthwatch Advisory Group which has been an important part of our Governance to have in place as we transition to Luminus. The group has met a number of times already and has been involved in the prioritisation process for the coming year.</p> <p>The group is aware there is a need to recruit new volunteers to build the strength of the LHWAG and to assist with Luminus. This is high up on our priority list for the coming quarter.</p> <p>We are following up on the report “Learning from the NHS complaints advocacy service” and various actions have been taken forward by system partners in terms of making sure the information is on the hospital and PALS websites etc so people can find the advocacy service should they want to access it.</p> <p>Recently soft launched TW’s report on people’s experience when waiting for an assessment for a diagnosis of Neurodiversity. This will be launched fully after the May 2023 local elections. So far, the report has been positively received, it is considered to be very person centred and portrays a human way of looking at why a diagnosis matters to people.</p> <p>End of contractual year – KPIs were mainly met although we were down on new referrals to the Advocacy Service and the number of new</p>		

	<p>volunteers.</p> <p>Volunteer hours are down on last year which may be a reflection on the new way of reporting hours in Better Impact rather than actual volunteer activity. The number of new volunteer recruits is down for the year on our target of 20. However, that target of 20 was set pre-COVID and is now a stretch in the current volunteer climate for VCSEs although we still have a healthy trickle of volunteers coming in which has picked up in the last couple of quarters.</p> <p>PG – congratulated the team on meeting the KPIs and asked if there would likely be any consequences with commissioners as a result the two areas where the KPIs weren't met.</p> <p>KS said that the volunteer KPIs have been discussed with our commissioners a number of times at contract review meetings; it has been consistent over the last year or so and they are very aware that recruitment of volunteers across the whole VCSE sector is down.</p> <p>KS said that the Advocacy referrals need to be seen in the light of two things. The number of people contacting the service is healthy, it's just that not necessarily translating into referrals. They could be feeling empowered with the information given to them by the initial contact with SILC.</p> <p>LO enquired about the key challenges in terms of our influence at Place level. Is this something to further talk about?</p> <p>KS answered that she has wondered where this best sits and it is perhaps something for the LHWAG to discuss. We are struggling to get traction at Place with some Surrey partners and for different reasons, such as funding discussions and engaging with key influencers to get a Memorandum of Understanding in place.</p> <p>The relationships the team have at Place level are very good and healthy, this is more system-wide. The visibility of Healthwatch and what happens to the sorts of issues that we raise could do with strengthening. Again, this maybe is a topic in due course that LHWAG should tackle.</p> <p>Action: KS/SBo to take the challenges around influence at Place to discuss with the LHWAG</p> <p>JD noted that the numbers for engagement in 2022-23 were comparable to the previous year notwithstanding our change in approach for "quality over quantity". SBo confirmed that we are hearing a lot more and receiving much more in-depth information and the quality of the engagement we are doing is up on last year. SBo highlighted we have been consistent in our engagement events and the number of people we speak with. The quality of the information we are getting is better which we can share with the provider to get a message heard across the system.</p>		
		KS/SBo	ASAP

	<p>Q4 Influence and Impact Report</p> <p>Key points and update from the report:</p> <p>SBo reported that the winners’ workshop and presentation of the Community Grant Fund was held today. It was a good opportunity to hear from local communities and to engage with them, also hearing about how they are going to spend the Grant money.</p> <p>One example was The Red & Blacks Albanian Football team who support young people in Surrey. They are raising awareness of HWSy by wearing the football shirt with the HW logo.</p> <p>We have also made progress on the Accessible Information Standard discussions. We wrote to Surrey Heartlands and are still in discussions with the other HW on the Frimley side about taking this forward.</p> <p>We have reached the end of the year with the Enter & View into care homes. This involved a number of care home visits and an ongoing questionnaire, our target for number of responses was met and summary report is to follow.</p> <p>JD asked SBo to remind everyone where the Influence and Impact Report is shared. SBo confirmed it is shared with commissioners, our contacts through WWH meetings, the insight bulletin distribution list and volunteers.</p> <p>MM commented that she liked the report’s format good and found it easy to read.</p>		
<p>6. Project update: the Board is asked to note progress.</p>	<p>TW had circulated her report prior to the meeting. A lot of work has been done which the Board thanked her for.</p> <p>The Neurodiversity Report had been shared amongst a small audience and will be launched publicly and within the May / June Insight Bulletins.</p> <p>TW said that it was important to recognise that it isn’t the kind of project that recommendations come out of and we will not be pushing for responses to receive recommendations, but to highlight what people want from a diagnosis. If there was one “take-away” recommendation TW felt that was making sure people that go down the private route have the right information to enable them to hook back into the public system after diagnosis.</p> <p>What happens in the future depends on where HWSy wants to go with it and what comes out of the priority work from the Theory of Change planning sessions in the following week.</p> <p>JD complimented TW on the Neurodiversity Report and thanked her for the work put into it.</p> <p>LO asked what the outcomes from The Theory of Change sessions will be. SBo replied that there will be planning on the priorities and</p>		

	<p>projects. Also to think more creatively in light of the Local Healthwatch priorities and how we can work on these across the remainder of the current contract period and allow us to be clear in our remit and prevent mission creep.</p> <p>LO enquired what the timetable is for this: SBo replied that the next step will be to take the details to the next LHWAG and report back after that.</p> <p>KS added that it will be a discussion for HWSy as to whether we need to do project work and what other influencing and output could potentially be beneficial i.e. to work out what is to be achieved, where the influence is and what piece of work needs to be done for HWSy's benefit.</p> <p>PG commented that it helps to think through what needs to be done before greater impact. He also acknowledged the work TW had done and reiterated the thanks given for the insight.</p> <p>In light of TW's retirement in June, the Board thanked TW for her work with HWSy over the years and her contribution to the team.</p>		
<p>7. Local Healthwatch 23-26 Priorities: the Board is asked to approve the priorities recommended by the Local Healthwatch Advisory Group (LHWAG)</p>	<p>SBo updated the Board on the priority setting which started back in November 2022 with the Horizon Scanning Workshop. This led to a new way of presenting our priorities and linked into KS' earlier point about the different approaches we may take as a team in terms of impact and influencing.</p> <p>We have got our agenda free listening & feeding back the insight, as well as information and signposting. As part of that, we have our communication, volunteer and engagement strategies which will all be deployed in order to effect change.</p> <p>In addition to that, we will also be assessing the long-term impact, concentrating on what differences our recommendations have made. This coincides with the LHW/ HWE 10-year anniversary and celebrating what impact and difference we have made in that time as an organisation.</p> <p>Taking this time is a good opportunity to have some team building, to go through priorities and planning what is needed to achieve and deliver, as well as having the ability to say no to things which do not meet our purpose.</p> <p>It will be important to be clear on how volunteers' feedback and give them what is expected from them in their role.</p> <p>PG suggested the terminology around 'assessing long term impact' is also about 'achieving long term impact' too. SBo agreed that was the case.</p> <p>The Local Healthwatch 2023-2026 priorities were recommended by</p>		

	LHWAG for approval by the Board, subject to the input from the Theory of Change sessions. The Board approved the priorities on that basis.		
8. Reflective Review: the Board is asked to note the Reflective Review Report and update on next steps	<p>The reflective review was circulated within the Board Papers pack. LS ran through some of the highlights which included:</p> <ul style="list-style-type: none"> • That it was positively received by senior leaders and commissioners and there was a higher return and response from this group. • Improvement is needed around the public knowledge about Healthwatch Surrey and the work we do. • More work to be done to communicate the work we do/have done with under-represented groups. • Work to be done on awareness of our information and signposting function. The Helpdesk now being in-house will help with this. • Some work around the awareness of our advocacy service is also needed. <p>On the whole, the feedback was positive and highlights the shift in relationships with senior leaders and commissioners since our last reflective review. There were not many negatives but what there was, was fair and give areas for improvement.</p> <p>The Board agreed that it was a good report although lengthy to read. The report will be discussed with the LHWAG and next steps developed based on the findings.</p> <p>Action: SBo/KS to take the reflective review to the LHWAG to discuss next steps.</p>	SBo/KS	ASAP
9. Action Log – corrected 20.04.23	No changes, green items approved to remove.		
10. Public questions not already dealt with	No other questions received from the public.		
11. AOB	No further AOB.		
12. Date of next meeting in public:	Thursday 27 th July 2023. JD closed the meeting.		

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.

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