

**Healthwatch Redbridge Board Meeting**

**Minutes and Action points**

8 September 2016 - 1:30pm - 4:00pm

<p><b>Present:</b> Cathy Turland - CT Vanda Thomas - VT Athena Daniels - AD Lorraine Silver - LS Margery Peddie - MP</p>	<p><b>Apologies:</b> Mo Dedat - MD Mike New - MN <b>In Attendance:</b> Karolina Dylewska (KD) - Minute Taker</p>	
Item	Discussions	Actions
<p><b>1. Welcome and Housekeeping</b></p>	<p>1.1 Declarations of Interest - none. 1.2 CT informed that Chris Wilson (one of the original LINK Committee members) passed away. She will confirm the date of the funeral and if available, will attend.</p>	
<p><b>2. Minutes of last meeting - 14 July 2016</b></p>	<p>2.1. Matters arising and actions not on the Agenda</p> <p>2.1. <b>JP forwarded the presentation. CT to circulate it.</b></p> <p>2.2. <b>Figures on social workers - no figures were forwarded so CT to chase.</b> The board discussed changes in the council's senior structure and agreed to <b>invite CEO and new senior management to future Board meetings.</b></p> <p>3.2. Issues regarding potential closure of KGH Emergency Department - freedom of information request sent to BHRUT enquiring about ambulance attendances and redirections - they have 20 working days to respond. <b>Item to be brought forward to next meeting.</b></p> <p>3.3. Director attendance at meetings: <b>VT to put together notes from March and July Scrutiny meetings.</b></p> <p>3.5. Healthbridge Direct - issues around patient referrals - no further information available. CT has raised the question of how many practices are referring to the HUB at the last CCG Board meeting.</p> <p>3.6. Transforming Services Together - CT and MN met and are looking at further information moving forward. TST project has been taken over by Sustainability and Transformation Plan. HWR to monitor and report to Board.</p> <p>3.8. <b>MD to explore free/off the shelf tool (for directors to be able to share calendars, materials, minutes, etc.) - outstanding.</b> Directors discussed other tools. <b>MP to discuss YouTube Channel with Tom.</b></p> <p>3.9. Healthwatch budget in Cabinet papers: future funding has not been confirmed as yet, although the expectation would be to</p>	<p>CT</p> <p>CT</p> <p>CT</p> <p>CT</p> <p>VT</p> <p>MD</p> <p>MP/TT</p>

	<p>deliver the same amount of work for less. <b>Item to be added to identified risks.</b></p> <p>8.1. Draft risk agenda - <b>VT to forward to CT the template.</b></p> <p>9.1. AIS Workshop - CT circulated the draft summary that was sent to the CCG. CT is following up with CCG on the actions from the workshop. Another workshop is being run for Waltham Forest CCG next week and a similar workshop is planned for residential homes.</p> <p>9.6. HENCEL - steering group have agreed to spend the £7k under spend to create signposting information for other Healthwatch organisations. <b>For discussion in November meeting.</b></p> <p>10.1. Wanstead Hospital phlebotomy service closure - There is a lot of confusion as to when the service will resume. This is currently on the PEF agenda.</p> <p>CT informed the Board that the E&amp;V report has been reviewed by the Trust. Due to a number of disputed facts, a staff member attended to review the information and some amendments have been made.</p>	<p>CT</p> <p>VT</p> <p>CT</p>
3. CEO Briefing	<p>3.1. <b>CEO Briefing:</b></p> <p>3.1.1. RCGG Governing Body: CT informed the Board about the redirection pilot (at Queens ED) in more detail. CT has requested more information, but it has not been made available. HWR asked to be invited to shadow the pilot (which was agreed at the last Scrutiny Committee meeting), but was unable to carry this out due to not reaching confirmation with BHRUT. The trial finished on 22<sup>nd</sup> August.</p> <p>3.1.2. The CCG is also frustrated with the slow pace of the referral to treatment process (patients should be seen within 18 weeks but some are waiting over 52+ weeks).</p> <p>3.1.3. Brookside Adolescent Unit has still not reopened.</p>	
4. Financial Management	<p>4.1. <b>CT to email accounts when ready with MD providing an overview.</b></p> <p>4.2. HW Tower Hamlets- as agreed by the Board, HWR did not enter a tender application. Other Healthwatch tenders are coming up in London and <b>CT will look at them to gauge appetite.</b> It was agreed that the preference is to work in close partnership with local existing Healthwatches.</p> <p>4.3. Other HW information. A local HW is currently recruiting a manager for a short term (6 month) contract. The Board discussed whether there might be an option to support the LHW if they were unsuccessful in recruiting at this stage. <b>CT to explore with the LHW and report back to the Board.</b></p>	<p>CT/MD</p> <p>CT</p> <p>CT</p>
5. HR	5.1. Nothing to report	

6. Membership Update	6.1. <b>Membership Update:</b> no new members	
7. Risk Meeting introduction	<p><b>8.1</b> It was confirmed that Risk meetings would be incorporated within each Board meetings. Due to time constraints at board meeting, CT will review the amount of information presented to the board and prepare future agenda's to focus on 'decision only' topics where possible.</p> <p><b>3.2.</b> Recruitment of new Directors for HWR:  - - <b>MP to be properly co-opted</b>  - - CT contacted Glynis Donovan who is currently unable to re-join the board due to the other professional commitments  - CT has spoken with Ross Diamond (RedbridgeCVS) to see if they can help with recruitment.</p> <p><b>3.4</b> Risk meetings: <b>VT to provide Risk register and forward it to CT to propagate it (operational and strategic)</b></p> <p><b>3.4</b> Mission and Vision Statement - a <b>separate strategic meeting to be arranged (possibly for the end of October) to discuss vision, mission and role of Healthwatch.</b></p> <p><b>5.2.</b> IT issues at RedbridgeCVS - CT informed the Board about the recent IT issues and it was decided to review the current level of support when the contract is reviewed. <b>CT to speak with MD</b></p>	<p>CT</p> <p>VT/CT</p> <p>CT</p> <p>CT/MD</p>
8. Projects, items and events updates	<p><b>8.1.</b> Volunteer Coordinator's Report - the directors discussed the report and the suggestion of looking at young people taking gap years to encourage them to volunteer for HWR. Discussion also took place around involving Redbridge Jewish Centre. <b>Report to be brought back to another meeting. LS to speak to Miranda on areas of recruitment and activities to recruit young people.</b> More outreach volunteers are needed to engage with community groups on specific topics. <b>CT to send volunteer leaflet to Board.</b></p> <p><b>8.2. Whipps Cross update from Mike - to be brought forward when MN is in attendance.</b></p> <p><b>8.3.</b> Intermediate Care Review - surveys are currently being sent out (by NELFT) to the patients receiving home based treatment. Additional posters are being sent to all GP practices to encourage patients who have used the service to contact HWR. The visit to all 3 intermediate care wards took place recently and another date has been booked for late September in order to gather further experience. CT will bring a full report to the Scrutiny Meeting in November). <b>Item will come back to October meeting with an update and the report will be circulated to the board when ready (1<sup>st</sup> November).</b></p> <p><b>8.4.</b> Redirection of A&amp;E patients at Queens Hospital - although BHRUT agreed to allow HWR to shadow the pilot project, they failed to engage in time to confirm our attendance. The Board agreed that, in future, HWR would agree a 'Plan B' to be used if necessary. This could include unannounced E&amp;V activity where</p>	<p>CT</p> <p>LS</p> <p>CT</p> <p>MN</p> <p>CT</p>

	<p>agreed.</p> <p>8.8. Sustainability and Transformation plan - CT informed the Board that she received a confidential briefing at the last Health and Wellbeing Board and that the LHWs within the footprint area have been given the opportunity to bid for some engagement funding to carry out some information events. The board discussed the issues around how much the public know about STP. <b>CT will be meeting other Healthwatches to discuss the project.</b></p> <p>8.9. Project Development Group - Staff and AD met before the Board meeting to discuss the PDG and the difficulties there were with engaging with the current members. Although a variety of approaches have been attempted, the recommendation to the board was to disband the PDG and ask staff to meet with individual members to identify other ways in which to involve them within the work of HWR. Organisation members are to be offered the opportunity to use a virtual group.</p>	CT
9. AOB	<p>CT informed about plans for Christmas lunch. <b>3 suggestions will be brought to the next board meeting.</b></p> <p>LS gave her apologies for the November meeting.</p>	CT
10. Future Meeting Dates:	<p>20 October 2016</p> <p>10 Nov 2016</p> <p>08 December 2016</p> <p>12 Jan 2017</p> <p>09 February 2017</p> <p>09 March 2017</p>	

Signed

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