



Minutes of the Board Meeting

Date / Time: 18 September 2014, 19:00-21:00

Venue: Red2Green, Harvey's Barn, Park End, Swaffham Bulbeck, Cambridge CB25 0NA

Present: Ruth Rogers - Chair, NEDs Sue Westwood-Bate, Karen Begg, Mike Hewins, Graham Jagger, David Neal and Ruth McCallum

In attendance: CEO Sandie Smith, Angela Grief, HWC (minutes), Julie McNeill and Kate Hales Healthwatch Cambridgeshire

1 Introduction and Apologies

Chair Ruth Rogers opened the meeting and welcomed all present. Apologies were received from NED Mike Andrews, Guarantors Anne Campbell, Victor Lucas and Prof Mike Thorne.

2 Declarations of Interest

David Neal declared his interest as a medical student currently placed in Paediatrics at CUHFT.

Graham Jagger declared his interests as a Foundation Trust Public Governor at Papworth and as a Care Quality Commission Expert by Experience.

Ruth McCallum declared her interest as Chief Officer at Care Network Cambridgeshire.

Ruth Rogers declared her interest as Chief Executive Officer at Red2Green.

3 Minutes of Previous Meeting 16 July 2014

Approved as a true record.

4 Matters Arising

The Annual Report Summary has been shared with those people who attended the launch.

A response to the public question at the previous Board meeting has been provided.

5 CEO Report (including Work Programme Update)

Sandie Smith presented her report to the Board.

Headline achievements are:

- Happy and Healthy in St Neots project
- Breast screening appointments
- Guidance for Collecting and Using People's Stories

A news story to celebrate the success of the Happy and Healthy project in St Neots is planned in the coming week.

The Autumn newsletter will headline three topics:

- Mental Health Services
- Sexual Health Services
- 111 & Out of Hours

Work Programme:

Positive links with the press contributed to the success of the Listening Event for the CQC Inspection of Hinchingsbrooke Hospital. Social Media continues to grow with increasing interactions on Twitter and people signing up to the Consultation Network.

The Guidance for Collecting and Using People's Stories has been published and well received from partner organisations.

Three new Outreach Volunteers have been recruited and induction is in process. Two volunteers live in Fenland which will help with engagement in an area previously difficult to cover.

The report 'Engaging Women in Maternity Services' was published in August 2104 and the recommendations are being progressed. The funding issue of the MSLCs has been escalated to Healthwatch England.

Following consultation with stakeholders, the Primary Care project is in progress. A temporary Engagement Worker will be appointed to focus on this project.

The Intelligence Led Enter and View programme is planned for roll out in the spring. All other areas of work are on-going.

Finance:

Expenditure to 31st August is on track. The next report will include income for facilitating the CQC Listening Event and consultation to inform the Public Health procurement on Lifestyle Weight Management.

Sandie invited questions from the Board:

- MH asked what is meant by Intelligence Led Enter & View?
SS explained that the Enter & View programme will be informed by intelligence received by ourselves and the contract unit at CCC and CQC.
RR suggested there may be information coming through Care Network's community navigators that could feed in to the Enter & View programme.
- SWB requested that the presentation about the Happy and Healthy in St Neots project be forwarded to the Children's Locality Partnership.
- DN suggested that we work with people undertaking academic research rather than progress ourselves. This will be discussed at the Strategic Review.
- GJ asked if local Healthwatch work together?
SS informed the Board about the CEO meetings and Regional Healthwatch meetings.
- GJ asked if there is an opportunity to work with local Healthwatch to support EEAST.
It was concluded that there are many action plans to improve services. Healthwatch Suffolk have undertaken academic research.

The Board discussed the Listening Event for Hinchingsbrooke Hospital. RR said the evaluation was positive and thanked all staff involved. GJ suggested publicising as a successful event.

Action: RR requested that the Finance report be presented as a separate item at future meetings.

6 Information and Signposting Service Report

Julie McNeill explained how the service was set up including meeting with other information providers and PALS managers. She explained that we use other people's reliable sources of information rather than create our own directory.

Julie gave an example of calls received by relaying an enquiry for information about inquests, how the information was sourced, and the response provided to the enquirer with the relevant support available. Signposting to other experts is very important.

A very small number of "information only" calls are received. Plans are in progress to tie-in the Information Service with the engagement undertaken by the rest of the team.

Julie highlighted the large volume of experiences that we sent to the CQC pre-inspection, anonymised where requested, which complemented

the Listening Event.

Julie acknowledged the need to do more work on monitoring impact and explained the statistics of signposting to other organisations. The organisations most often referred to are POhWER and Action Against Medical Actions as quite a few people want to pursue complaints and compensation.

We want to do more with what people tell us and Julie explained how feedback is being collated and used. Development of the system is ongoing. It is necessary to ensure we protect anonymity where consent has not been given. We work closely with other local Healthwatch where issues and enquiries cross county boundaries.

Julie invited questions from the Board:

RM said the report was very useful and gives good understanding of how Healthwatch works and flagged up the opportunity to use Community Navigators. Julie confirmed that links are made whenever possible.

GJ commented that he found the monthly updates helpful.

DN added that the report measures the success of the service and is good monitoring in itself.

MH asked if we could look at geographical locations.

Action: SS agreed to do an area analysis of annual statistics.

7 Escalation Policy review

Sandie explained the escalation processes that HWC uses and the various stages of investigation and escalation. The Escalation Handbook is available to anyone who is interested.

Decision: The policy was agreed by the Board.

It was agreed that following review, policies requiring amendments would come to the Board with changes highlighted.

8 Public Questions

Volunteer Nick Roberts commented how helpful the Consultation Network had been in highlighting involvement opportunities. He asked about feeding back information from meetings attended. RR confirmed this would be discussed at the Strategic Review.

Date of next Meeting:

Next meeting: 12th November 2014, The Meadows Community Centre, The Family Wing, 1 St Catherine's Road, CAMBRIDGE, CB4 3XJ.