

Minutes of the 53rd full Healthwatch Warwickshire Board Meeting
Tuesday 11th May 2021
10.00am to 12.00pm
MS Teams Conference Call

Present:

Liz Hancock (EH) - Chair

Mike Flaxman (MF) - Finance & Audit Chair

John Copping (JC)

Len Harvey (LH)

Gita Patel (GP)

Jerry Roodhouse (JR)

Katie Weetman (KW)

Robin Verso (RV)

In Attendance:

Chris Bain (CB) - Chief Executive (CE), Claire Jackson (CJ) - Head of Operations, Su Jenkins (SJ)
- Authorised Representative, Lucy Dean (LD) - minutes.

1) Welcome and Apologies

Paul Tolley gave his apologies. RV was formally welcomed to the Board.

2) Declarations of conflict of interest

Liz Hancock, Chief Executive, Mary Ann Evans Hospice

Jerry Roodhouse, Councillor, Warwickshire County Council

3) Minutes from the previous meeting

The minutes of the Healthwatch Warwickshire (HWW) Board meeting on 9th March 2021 and the amendments to the 12th January 2021 meeting minutes were agreed to be an accurate record of proceedings and were electronically signed by the Chair.

4) Matters Arising

- MF has gathered information on the Stratford Homeless Project for review. The project is set to open in June, HWW will make contact after that.
- EH has contacted the other potential Board candidate, who confirmed that it is not currently the right time for them to get involved but the individual may be in contact at a future date when they have more time.
- CB has written to Councillor Les Caborn to express thanks for his support on behalf of the Board.
- CB to circulate details of next Healthwatch England (HWE) Committee meeting when made available - no details yet.
- CB has invited HW Coventry staff to a HWW team meeting.
- CB to forward the Engagement plan.
- CB spoke to our Commissioner about possible duplications of contracts, particularly in relation to the Health Champions Scheme (commissioned by Warwickshire County Council) The idea seems positive, recruiting individuals from within the community to be health champions, however HWW are concerned that the volunteers (many located outside of Warwickshire) only receive 2.5 hours of training, and that there is no mechanism to feedback into the local authority; CB reported that the Commissioner seemed to understand our concerns. It was decided that a formal statement from the Board expressing HWW concerns should be presented. ACTION: EH and CB to discuss and prepare a formal letter to the Commissioner outlining HWW concerns about duplications of our services being commissioned, such as Health Champions Scheme - prior to the next performance meeting.

- The current HR contract runs until the end of summer 2021 and will be reviewed at that time.

5) Chair's Report

The Chair and the CE, with HW Coventry, attended a positive meeting with Melanie Coombes, the new Chief Executive of the Coventry and Warwickshire Partnership Trust (CWPT). A number of issues were discussed, including their collaborative working strategy and treatment closer to home for people with eating disorders; It was also reported that there had been no admissions to acute services for people with Learning Difficulties since December which the Chair found concerning. CWPT are looking at a community mental health model, peer support workers, and a survey for feedback from patients and carers, and patient voice was mentioned.

The Chair also attended the West Midlands (Healthwatch) network meeting (chaired by CB) but is unable to attend the next one on 28th May at 10am. CB highlighted that the meeting will be talking about new commissioning arrangements, some of which will impact directly on primary care in Warwickshire. Representatives from NHS England and NHS Improvement will be in attendance to discuss new arrangements which are not yet finalised, so can still be influenced. JC volunteered to attend in her place. ACTION: CB to forward joining details for the West Midlands (Healthwatch) network meeting on 28 May to JC.

MF commented that there was a good presentation at the last CCG meeting for GP practices, which featured a good illustration of the nature of Community Mental Health services; MF will circulate the presentation to Board members.

The Chair attended the HWW Lockdown Taskgroup meeting.

There was a discussion about the merits of virtual meetings versus in-person meetings. There are benefits to both: with virtual meetings, time is saved by not having to travel, enabling people to attend meetings they otherwise would not have time for. However, face-to-face meetings are invaluable for getting to know others and 'off the record' conversations, especially for newly joined people who have not yet met the other Board directors or staff members in person.

A blended or combination approach will be considered for future meetings.

Some board members expressed a preference for the 13th July Board meeting to be in person, depending on finding a suitable and available venue, and levels of Covid19 cases.

ACTION: The Chair and CE to discuss and consider logistics of blended/ combination Board meetings.

6) CE's Report and Update on Emerging Strategic Issues

The CE report was distributed to the Board in advance of the meeting. The CE stated that his report is relatively brief, due to the restrictions of purdah.

The Regional Commissioner will be attending the Combined (East and West Midlands) Healthwatch Meeting on 28th May. Interesting that some of the primary care functions will be delegated down to ICS level from NHS England, effective from 1st April 2022 - including pharmacy, optometry, GP transformation and dentistry/dentistry commissioning. One of the challenges HWW have faced when trying to escalate the current problems seen in Dentistry is that the CCG claims that they cannot do anything as they do not commission dentistry - this will no longer apply after the changes next April. It is unacceptable that some Rugby residents cannot get onto a dentist waiting list, or treatment - and some are travelling to Coventry for dental treatment.

Other specialisms such as health justice (health provisions delivered in prisons), and Screening and Immunisation will also be delegated to ICS level.

It was discussed that there are some issues about the new White Paper yet to be resolved. CB delivered a presentation to the Staff and Volunteers on the White Paper. ACTION: CB to circulate White Paper presentation.

Item 6.2 to be addressed in the confidential session after the meeting.

Issues raised by the CE:

- HWW have heard reports of increasing incidents of people reluctant to take the Covid19 vaccine, due to reports on Social media about side effects (mostly Astra-Zenica: blood clots). Public Health have said they will refine the messaging about side effects and dispel any myths. It was reported that the Under 40s will now be offered a choice of which vaccine they have, which may help.

- Lack of access to NHS dentistry still being reported.

- Part of discussions with CWPT: Rising anxiety levels being seen. People are presenting with increasingly complex conditions.

CJ commented that the Director of Nursing at South Warwickshire Foundation Trust (SWFT), had reported that one of the biggest crises they currently have is on children's wards where over half of the beds are taken up by children with complex Mental Health problems. High risks attached as a hospital ward is not the right place for such children to be to be - mixing toddlers with high physical/medical needs with teenagers displaying violent or disruptive behaviour.

- CB has met with Chris Ham about the importance of patient voice in the new Integrated Care Structures (ICS) - at system, place, Primary Care Network and practice levels.

- Potential roles of voluntary & community sectors being involved in the new ICS. Tends to be a box that is ticked. needs to be resourced properly.

- Impact of White Paper on ICS and its development.

The CE invited anyone that would like anything to be raised to let him know.

The CE has met with CWPT about reports from Warwickshire Pride that some of their members have been reluctant to approach services (e.g. IAPT - Improving Access to Psychological Therapy) because of a lack of health awareness within services. CB has raised the issue with operational staff at CWPT who have met directly with Warwickshire Pride to put in place practical arrangements to remove cultural barriers.

JR commented that he has started to look into how the Safeguarding team report on their performance.

7) Report from Finance and Audit Group

The Chair thanked MF for the report from the Finance and Audit Group.

MF presented the previously distributed report, pointing out a minor error in the report - in the 2nd Paragraph heading it should read 'outturn 2020/21' instead of '2019/20'.

MF will prepare a case for inflation funding for presentation at the July meeting with the Commissioner.

The budget figures reflect the change in hours of the Head of Operations role from 25 to 30 hours/week.

A 1.5% pay award for staff is proposed - recognising that the staff have gone above and beyond to keep HWW running.

MF thanked CB and CJ for their help in putting the report together.

RV suggested an increase the Staff Training budget, bearing in mind the changes to commissioning arrangements coming into play this year; and noted the increase in funding to HR and Bookkeeping. MF suggested use of reserves for increased training; and clarified that the

increase in funding to HR/Bookkeeping reflects the new HR provider and that Sage have increased their fees, CJ is in the process of negotiating with them.

MF suggested reinstating the HR subgroup.

CB commented that we are awaiting to see what training Healthwatch England will have available, in addition to Kings Fund training that we have access to. Professional development training is also offered for the personal development of staff. Similarly, the Volunteers receive a comprehensive training package.

The Board unanimously approved the proposed Budget, including the staff pay increase.

8) Head of Operations Report

CJ provided an update on current projects: The Carers Project has so far seen 159 responses to the survey, which we are very pleased with and shows amount of the hard work that has been put in to promoting the survey. The midway briefing report has been sent to key stakeholders and the Commissioner, asking for assistance in disseminating the survey. We would like to hear from more people in Rugby and North Warwickshire, young carers, different ethnic backgrounds, and in particular men. Research is being put into what tools and methods can be used to reach men, as, generally across our work, they do not engage with us as much as women do.

Catherine Shuttleworth, Public Health Principal, has already asked if she can use findings from the midway briefing in her work, a good indicator of the usefulness of the work being done by HWW.

The survey deadline has been extended by 2 weeks to try and ensure that the results are more representative.

The results so far have shown that many carers have long term conditions themselves; Most respondents were not aware of the care act and do not claim care allowance. The survey is running until 28th May - analysing and report writing in June.

HWW have picked up an issue with access to dentistry in Rugby, which has been reported to HWE. The volunteers have now made calls to dentists across the rest of the county. A briefing will be produced towards the end of the month with the findings.

Following on from the Care Home calls, the volunteers have started calling providers of supported living for people with learning disabilities. There has been some interesting feedback from them about the difficulties faced by younger people in supported living when faced with lockdown restrictions - which was different from the experiences of care homes housing more elderly people. This project has been good for relationships with Care Homes/Care providers, by increasing awareness of Healthwatch but also good groundwork being done for when we re-establish the Enter & View service, thanks to the volunteers.

The report from the Shispton engagement (Health & Wellbeing Centre) has been published and accepted by SWFT to be taken to their Board. Discussions are underway with SWFT about how to engage with younger people and their input into Health and Care services.

The Chair commented that the quality and content of reports being produced by HWW is of a very high standard, leading to good responses - beneficial for HWW's reputation.

JC suggested sharing the details of the project and the briefing amongst other Local Healthwatch and HWE to share good practice. CJ confirmed that we will be putting the report forward to HWE for showcasing at their annual conference.

JR suggested that recent reports could be collated together to see the geographical spread reached, which are the areas where we are not hearing from; and contacting Warwickshire County Council (WCC) to see if it is the same for them.

Exception reporting - HWW is not currently undertaking Enter & View visits or face-to-face engagement work in line with current guidance, however we are still providing a robust service

- making calls and passing on intelligence received. As care homes have had no visitors, we have not received any information on care homes from the public.

The Restoration of Services document has been completed and returned to WCC.

ACTION: CJ will circulate Restoration of Services document to the Board.

An associated Risk Assessment has been compiled to sit alongside the Restoration of Services document, which will be an ongoing process.

We are looking to simplify the Articles of Association to provide an abbreviated user-friendly version for the website.

9) Volunteer report

SJ reported that: University Hospital Birmingham has become a Tessa Jowell Neurology centre of excellence, University Hospital Coventry & Warwickshire has not yet applied.

The ICS (Coventry and Warwickshire) is piloting the Grail project which is using Galleria blood test to screen for 50 cancers to enable early diagnosis and improve outcomes.

The targets set for recovery for screening have been deemed to be overambitious, partly because of staff fatigue; and that Cancer Research in the future may be into gene mutation. It was discussed at the Volunteer Forum that patients are now presenting with more progressed illnesses when they seek medical help - both in cancer and other areas.

Some representatives from Warwick Medical School (WMS) attended the Volunteers Forum on 19th April, giving insight into how, due to the pandemic, GP training is different to what the students had hoped for, with no face-to-face training with patients. Training on phone and video consultations is being given, but part of GP training is how to relate to patients in person.

The volunteers have been involved with calls to care homes and dentists.

KW asked about possible plans to link volunteers to medical students. CB clarified that HWW is a partner in the Respect in Primary Care program that WMS is running and HWW is talking to some of the students about them engaging in some of the project work that is being run.

10) AOB

KW advised that a WMS is running a webinar for their staff on 13/5/21, at which HWW staff will present an 'Introduction to HWW' and discuss how to work together in the future.

11) Confidential

The increase in hours for the role of Head of Operations to 30 hours per week was approved.

12) Date of next meeting

The next Board meeting will be from 10.00am to 12.00pm on Tuesday 13th July 2021. Location to be confirmed.

Other upcoming meetings:

Informal Directors' briefing meeting - Tuesday 8th June at **10:30am** via MS Teams.

Lockdown Task group meeting - Tuesday 22nd June at 11am via MS Teams.

Summary of Actions:

- Item 4: CB to circulate details of next Healthwatch England (HWE) Committee meeting when available.
- Item 4: CB to forward the Engagement plan.
- Item 4: EH and CB to discuss and prepare a formal letter to the Commissioner outlining HWW concerns about duplications of our services being commissioned, such as Health Champions Scheme - prior to the next performance meeting.
- Item 5: CB to forward joining details for the West Midlands (HW) network meeting on 28 May to JC.

- Item 5: MF to circulate Mental Health services presentation to Board members.
- Item 5: The Chair and CE to consider logistics of blended/ combination Board meetings.
- Item 6: CB to circulate White Paper presentation.

Minutes Approved by:

Signed:

Date: