

# Board meeting minutes

24 March 2014 - 3pm

Central Square, Newcastle upon Tyne

## Board members present

Diana Barnes (DB)	Independent
Anne Bonner (AB)	Riverside Community Health Project
Bev Bookless (BB)	Chair and independent
Tim Care (TC)	Independent
Lisa Charlton (LC)	Newcastle Society for Blind People
Sarah Cowling (SC)	HealthWORKS Newcastle
Jill Remnant (JR)	Vice chair and independent
Alison Walton (AW)	Independent

## Apologies

Alisdair Cameron (AC)	Launchpad
Sally Young (SY)	Chief Executive, Newcastle CVS

## In attendance

Craig Duerden (CD)	Programme Manager, Healthwatch Newcastle (HWN)
Nicci Donnelly (ND)	Marketing support, HWN
Deborah Hall (DH)	Information Support Officer, HWN
Julie Marshall (JM)	Involvement Coordinator, HWN

## 1. Welcome and introductions

1.1. The meeting began at 3pm with a round of introductions.

## 2. Apologies for absence

2.1. Apologies were noted from Alisdair Cameron (AC) and Sally Young (SY).

## 3. Declarations of interest

3.1. No interests were declared.

## 4. Minutes of last meeting and matters arising

4.1. Item 6.1: Craig Duerden (CD) is meeting with AC to discuss the mapping of commissioning of mental health services.

4.2. The minutes were agreed as a true record.

## 5. Programme Manager report (paper 1)

5.1. CD gave an overview of the paper, including plans to commission a voluntary sector organisation to engage with children and young people and gather their views about health and social care services. There is a provisional interview date of 7 April and it's hoped someone will be in post by mid-April.

5.2. Nicci Donnelly (ND) gave an update on the business plan consultation, which has now drawn to a close. There was a low response rate (15 replies) but there were some positive comments about the plan. However, concerns were also expressed about Healthwatch Newcastle (HWN) 'taking over' organisation and being perceived as a threat to smaller organisations doing similar involvement work. It was recognised that there's a need to change the message in order to reassure people of HWN's aims and that it will always reference and credit the work of other organisations.

### **Actions:**

- ND to pull comments together into report and look at how to address concerns
- Jill Remnant (JR) to invite those who specifically expressed concerns to the next VCS meeting in April

5.3. There are proposed service changes at Northumberland, Tyne and Wear NHS Foundation Trust (NTW), including the movement of wards and closing of units. CD is meeting with AC on 26 March to discuss how HWN can be involved in the engagement process.

5.4. Re: joint work with Healthwatch Northumberland (which includes looking at unplanned hospital discharge), Bev Bookless (BB) highlighted the fact that HWN is working closely with several other Healthwatches and that the Chairs meet regularly.

5.5. A discussion took place on the Quality Accounts that the four trusts covering Newcastle have to produce. Board members were invited to support the staff team in reviewing the Quality Accounts as this would be a good opportunity to get to know the different trusts in the area. BB and CD will produce a template that will ensure consistency and support people in formulating responses.

**Agreed:** BB, Anne Bonner (AB), Diana Barnes (DB) will look at Quality Accounts with CD

## 6. Update from the finance subgroup

6.1. Figures for 2013-14 and the indicative budget for 2014-15 were tabled. The underspend does not need to be returned and will be carried over into the next financial year.

6.2. The budget for the first year was set using Newcastle LINK's as a guide. It has also been used for the second year but the finance subgroup will be reviewing this.

6.3. A concern was raised that the amount allocated to the children and young people work may be insufficient: this will be reviewed by the finance subgroup.

## 7. Scotswood GP Practice (paper 2)

- 7.1. HWN was concerned about plans to close this practice at short notice and before sufficient consultation with patients and the public had taken place. The Cumbria, Northumberland and Tyne and Wear Local Area Team (LAT), which is part of NHS England, has responsibility for reviewing all contracts in its area and looked at the Scotswood GP Practice contract because it was coming to an end in April 2014.
- 7.2. Discussions were held between NHS England, Newcastle City Council and HWN to try to ensure a suitable outcome for patients and the public in Scotswood. As a result, Holmside Medical Group is taking over the practice for 10 months.
- 7.3. In the meantime NHS England intends to consult with patients and the public on medical facilities in the Scotswood and Benwell, for example, the West One development on Maria Street/Caroline Street. However, it's unclear what the timetable is for West One and other plans haven't come to fruition for various reasons, including the dissolution of the Primary Care Trust.

**Action:** CD to invite suitable person to speak at next Board meeting about plans for Scotswood and Benwell

- 7.4. The Board was concerned about the lack of public engagement when primary care services are being commissioned. BB has raised this concern with the John Lawlor, LAT Area Director, and also intends to contact Richard Barker, Regional Director of NHS North of England.
- 7.5. The Board thought it important to support the Health and Wellbeing Scrutiny Committee, which has statutory powers to look at commissioning processes. As part of this, HWN has requested a place on the committee's time-limited task and finish group to review this case and is awaiting a response.

### **Actions:**

- HWN will contact NHS England to ascertain when contracts are due for review (GPs, dentists, etc.) to ensure it knows earlier about proposed changes
  - BB and CD to meet with Christine Keen, LAT Director of Commissioning, to develop future ways of working
  - HWN will contact Healthwatch England about this specific case and the implications of NHS England's reviews
- 7.6. It was also mentioned that the minimum practice guarantee is being reviewed and this will be phased out over seven years. Ninety-eight practices will be affected nationally but it's unclear how many will be affected locally.

## 8. Better Care Fund (paper 3)

- 8.1. The Newcastle Gateshead Alliance held an event on 12 March to discuss its draft plan on the Better Care Fund (BCF), which JR, CD, AW, and SC attended. As a result of this meeting, they recognised that engagement with the VCS is a separate activity to engaging with patients and the public.
- 8.2. HWN has a duty to ensure that the public's voice is heard and that public/patient engagement is effectively carried out by the responsible bodies. There were concerns

about the short timescales involved but JR said it's thought that consultations on the fund will take place over the next two years and not just by the 4 April 2014 deadline.

**Action:** A meeting will take place on 27 March with CD, Alison Walton (AW), Sarah Cowling (SC) and JR to discuss how to take forward the BCF work.

8.3. A member of the public asked if there are independent auditors because there would be winners and losers arising from the BCF redistribution of funds. JR responded that there is an Accountable Officers' Group which is the body that ensures fairness in decision-making.

**Action:** BB to raise issue at next Wellbeing for Life Board meeting about ensuring process is fair

## 9. Board development session update (paper 4)

9.1. Julie Marshall (JM) gave an overview of the session which took place on 3 February. This was an opportunity to discuss ideas for potential areas of work and the roles for Board members.

9.2. JR and CD have worked with the Health and Wellbeing Scrutiny Committee to produce a service changes pro-forma, which asks what involvement consultations have taken place. As a result, work around consultation and involvement reviews is now completed.

9.3. A discussion took place on whether basing Board roles on geography, community of identity and interest, or project leads was the best way forward. Community of identity and interest was rejected as it is not feasible to represent every single community via the Board. Project leads was viewed as the most favourable approach and Board members were invited to draw upon their areas of interest and expertise or view this as a development opportunity if they so wished.

### Agreed:

- AC to lead on the mental health work
- AW to lead on social care
- JM to identify target groups and users of social care services to obtain their views

## 10. Update on work activities (paper 5)

10.1. CD gave an overview of the staff team's activities spanning four main strands: involvement; Healthwatch Newcastle Champions; information and signposting; marketing and communications.

10.2. JM talked about plans to work with Newcastle Libraries to deliver sessions on how people can find health and social care information online. The young people's rights pop-up group was put on hold due to key people being at another meeting when the first pop-up meeting was planned: this will progress when the children and young people service has been commissioned. The access to primary care pop-up was put on hold due to lack of interest (one person signed up for the first meeting).

10.3. HWN adverts will shortly appear on buses across the city. BB asked that the impact of this be monitored and be reported back in 3-6 months.

**Action:** Deborah Hall (DH) to ensure that monitoring processes include capturing impact of bus ads

- 10.4. Nominate a star was delayed due to waiting for the nomination forms. It will launch in a couple of weeks.
- 10.5. The GP mystery shopping has now been completed and a report will be written up. The results will be communicated to GP surgeries.
- 10.6. A comment was made about the last set of information and signposting figures (1 Jan to present) being focused more on health and social care issues compared with previous periods. This is partly due to the fact that HWN received a broader range of enquiries when Newcastle CAB was delivering the information and signposting service. BB also mentioned that when meeting other HW Chairs they have commented on not receiving many information and signposting contacts.

## **11. Legal structure of Healthwatch Newcastle (paper 6)**

- 11.1. Newcastle CVS has the contract for HWN and is the accountable body. BB asked for Tim Care's (TC) views on the potential legal structures HWN could adopt.
- 11.2. TC responded that a suitable structure will depend on such questions as: what will HWN do as an entity; what contracts will it enter into, if any? He advised considering what legal relationships HWN is entering into and decide from there.
- 11.3. TC said that going down the charitable incorporated organisation (CIO) route can be limited and that the company limited by guarantee is more flexible. Lisa Charlton (LC) mentioned that funding is uncertain after September 2016 and the charitable model might be a good way to raise funds. There is also a need to look at what other involvement organisations do.

**Action:** BB, TC, LC and AB to form a subgroup to discuss the issues

- 11.4. BB also mentioned that every Board member was appointed at the same time but it would be preferable if people stood down in a staggered way rather than all at once. BB asked members to think about the possibility of standing down - this will be discussed at the next Board meeting.

## **12. Update from governance subgroup**

- 12.1. JR outlined some issues in adapting Newcastle CVS policies for HWN purposes. These include identifying certain roles, for example, Data Controller and the fact that the Newcastle CVS safeguarding policy is very particular to that organisation because it encompasses Advocacy Centre North. DB also mentioned that the Board isn't mentioned in the policies.

**Action:** Subgroup to prepare a position statement for next Board meeting outlining what's been adopted, what's being reviewed, etc.

- 12.2. CD is looking into a shared safeguarding session for Board members and the Health and Wellbeing Scrutiny Committee.

12.3. The subgroup was thanked for its work on the policies.

### **13. Dates, times and venues for 2014-2015 Board meetings**

13.1. BB proposed that the Board met four times per year: two of these would be formal and held in public and two would be development, experience-sharing sessions. Although meetings were currently held in public it was felt that better ways of engaging the public could be explored. Also, information about HWN's work could be published on the website (for example, subgroup notes).

13.2. Members of the public pointed out that not everyone had internet access and that there was little opportunity for face-to-face interaction with HWN. The Board acknowledged this and the possibility of open forums combined with information sessions was suggested.

**Action:** Staff and team to explore ways of increasing public engagement with HWN as an alternative to Board meetings

### **14. Questions and networking**

14.1. Ruth Abrahams, on behalf of Board members of the former Newcastle LINK, offered to assist HWN in responding to Quality Accounts. BB thanked Ruth for her offer.

14.2. The meeting closed at 4.55pm.

14.3. Next meeting: date, time and venue to be confirmed.