

Board minutes

13 June 2016 - 3pm

Broadacre House, Newcastle upon Tyne

Board members present

Bev Bookless (BB)	Chair and independent
Alisdair Cameron (AC)	Launchpad
Neil Cameron (NC)	Independent
Tim Care (TC)	Independent
Lisa Charlton (LC)	Newcastle Society for Blind People
Kate Israel (KI)	Independent
Alison Walton (AW)	Independent

Apologies

Feyi Awotona (FA)	Independent
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In attendance

Luke Arend (LA)	Project Manager, Healthwatch Newcastle (HWN)
Steph Edusei (SE)	Chief Executive, HWN
Deborah Hall (DH)	Marketing and Project Coordinator, HWN
Lyndsay Yarde (LY)	Project Manager, 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 Feyi Awotona.

3. Minutes of last meeting and matters arising

3.1. Matters arising, item 3.1 – waiting for permission from the RVI to hold a joint regular stall with Independent Complaints Advocacy (ICA).

3.2. The minutes were agreed as a true record.

4. Chief Executive presentation

4.1. SE gave a presentation on the past three months, which has included a lot of governance. However, there has also been engagement work at a residential care home, and listening events with the Roma community and parents of children with special educational needs and disability (SEND). There was also very positive feedback on the annual conference.

4.2. Data from the mental wellbeing research fed into Expanding Minds, Improving Lives, and the young people also presented the report at Health Scrutiny, where it was

positively received. It was useful for the young people to think about how to present data in future, breaking it down into ethnicity, etc.

- 4.3. Newcastle Gateshead CCG is interested in further developing the GP appointment research and we are awaiting feedback on support and funding for this; NHS England responded favourably to the GP appointment report. The research received positive feedback during a workshop at the recent Healthwatch England conference – a delegate said it was the best session of the event.
- 4.4. Neil Churchill, Director of Patient Experience at NHS England, attended the Healthwatch England conference and was very interested in the GP appointment research. NHS England is currently focussing on improving the experience of carers and Neil is interested in any carer data that can be extracted from the appointment research.
- 4.5. We are waiting to see if Newcastle City Council will incorporate the recommendations from the home care report into its contract specification.
- 4.6. It is hoped to generate some income from the feedback centre by offering paid access to Newcastle Gateshead CCG.
- 4.7. Newcastle Gateshead CCG would like to provide information to the Board about primary care co-commissioning.

Action: SE to ask CCG to provide a briefing (before July development session) and Board will raise any questions they may have, with the possibility of Board members meeting the CCG at a later date

5. Priorities (paper 1)

- 5.1. LA ran through a project mandate he has developed to look at SEND, focussing on social care and health issues; this was one of the priorities identified at the annual conference. The project requires more scoping and three or four listening events for parents and carers are planned in June to help with this. A questionnaire will then be developed in July.
- 5.2. Board members highlighted that many children with SEND attend mainstream schools so the focus should not be limited to special schools. AC mentioned that there are parent groups that cut across both special and mainstream schools and offered to help with accessing these.

Action: NC to put LA in touch with parent groups
- 5.3. SE stated that the voluntary and community sector could also be invited to give views on SEND provision.
- 5.4. LY ran through a project mandate she has developed to look at the feasibility of home care research; this was one of the priorities identified at the annual conference.
- 5.5. The focus will be on looking at how care homes involve residents in both their own care and in how the homes are run. Newcastle City Council and the Care Quality Commission already look at this, but it is not a focal area. Research has shown that there are links between people's involvement and their wellbeing.

- 5.6. There are approximately 48 care homes in the Newcastle area, and a questionnaire will be sent to all care home managers. A questionnaire will also be developed for residents and for relatives, which it is hoped the care homes will help publicise. Visits will be carried out at ten homes, selected to have a good spread in terms of location, type of care provided, etc.
- 5.7. The questionnaires will be ready in July and a draft report ready in December for consultation.
- 5.8. The proposed research is timely as the council is planning to standardise all care home contracts and we will ask the commissioner about involvement being part of the contract specification.
- 5.9. Intermediate care is another priority for 2016–17 but it is unclear at this stage whether it will be a mini project or the start of something larger. The system integration taskforce is currently looking at people's experience of hospital discharge.
- 5.10. It is proposed that we research the experience of short stay, emergency patients after they have been discharged: contacting them by phone after one week and after three to ask them if they feel safe, what time they were discharged, etc. The proposal will be put to the home safe group shortly, but will also need the agreement of the hospital.

6. Draft annual report (paper 2)

- 6.1. A discussion took place on the draft report which needs to be completed by 16 June. With a small edit, and the insertion of images, the Board is happy for SE and DH to sign off the final annual report.

Action: SE to amend the case study on GP appointments

7. Finance subgroup update (paper 3)

- 7.1. The Board discussed the paper: there was an overspend for the year due to the feedback centre and the office move. The participation budget is overspent by £187 due to increased work to support seldom heard communities.
- 7.2. Concern was expressed at some outstanding actions: SE is still awaiting information from Ellison Services on the pension scheme, etc.
- 7.3. The Board agreed that more comprehensive figures will be required when Healthwatch Newcastle becomes a CIC.

8. Futures subgroup update (paper 4)

- 8.1. The Board looked first at the draft articles of association for the CIC, and in particular the objects in section 5. It was noted that the only members of the CIC will be the Directors.

Agreed: to accept the proposed objects.

- 8.2. A clause had been removed from section 12 about a single Director making a majority decision. It was thought this may be needed so should be reinstated.

Action: SE to reinstate clause on majority decisions by single Director

8.3. A discussion took place on how long to store the CIC minutes as ten years was considered too long. The consensus was to hold them for seven years.

Action: SE to check if it is acceptable to store minutes for seven years

8.4. A suitable name is required for the CIC (it will trade as 'Healthwatch Newcastle'). The Board was asked to come up with a suitable name, the reasons for choosing this, and check that the name hasn't already been registered. The council is working with Newcastle CVS and Involve North East to close the shell company that was created when Healthwatch Newcastle began.

Action: Board to propose CIC names to Beth Nichol by 20 June

8.5. SE is planning to complete the first draft of the bid for the new contract by 17 June. This will be circulated to consultant Garry Stone and the Board for comments. There is a 7 July deadline for the bid submission.

8.6. A discussion took place on whether to bid at less than the full value of the contract and whether this should be a year-on-year reduction. It was noted that no information is available in the tender on scoring criteria for cost (the contract will be awarded on the basis of 90% quality and 10% cost). A question was raised about the amount of reserves to be held and it was suggested that a profit and loss statement should also be included in the bid.

Actions:

- SE to request cost scoring criteria from the council
- SE to include profit and loss statement in bid

9. Risk management (paper 5)

9.1. A question was raised about the medium scoring for 'Inability to maintain positive partnership working with stakeholders': this score is related to the absolute target and it is considered to be of medium risk.

10. Trend analysis (paper 6)

10.1. Compared with the past 12 months, reviews of service have been very positive over the past three months. Ambulance and dental services received the highest amount of negative feedback.

10.2. One dental practice has received several negative comments which needs further investigation, including looking at NHS England and CQC data. BB recommended contacting the dental adviser at NHS England too. It was thought beneficial for KI to have an introductory meeting with North East Ambulance Service NHS Trust (NEAS) Chief Executive, Yvonne Ormston.

Actions

- SE to look into dental practice that has received negative comments
- KI to meet with Yvonne Ormston at NEAS

10.3. The Healthwatch app has been launched.

11. Any other business

- 11.1. A bid has been submitted for the North Tyneside user involvement forum, which is £10k in value.
- 11.2. Two pharmaceutical companies have approached us about the possibility of providing patient experience for two of their products. Any research done by us would remain our intellectual property. The Board agreed that SE should explore this opportunity further.
- 11.3. Newcastle upon Tyne Hospitals NHS Foundation Trust was recently rated outstanding following a CQC inspection. BB sent a letter of congratulations on behalf of the Board. The results of the NEAS inspection are expected shortly, and then later in the year results for Northumberland, Tyne and Wear NHS Foundation Trust will be available.
- 11.4. Another Board meeting in private may be required before the September Board meeting and AGM.

The meeting closed at 5.05pm.

Meetings in 2016

- 19 September Bewick Hall, Central Library (meeting in public/AGM)
12 December Broadacre House, room 0.2