

Minutes of the Meeting of the Healthwatch Tameside Board (Part A)

21st November 2022

Venue: 4C Community Centre, Ashton

Present:	Members: In attendance: Tracey McErlain-Burns, HWT Chair (TMB), Jyoti Rao, HWT Vice-Chair (JR), Glenis Lee (GL), Anna Hynes (AH), Camilla Guereca (CG), Royce Goodier (RG), Julie Wood (JW), Jessica Johnson (JJ, Contract Performance Officer), Karen Whitworth (KW, HWT staff member), Imogen Shortall (IS, Minute taker).	Actions
1	Welcome and Introductions: TMB welcomed everybody to the meeting, and introduced Jessica Johnson (Contracts Performance Officer) and Karen Whitworth (Healthwatch Tameside staff member) to the Board. Everyone introduced themselves and spoke briefly about their role/interests/experience. TMB mentioned that building closer relationships with the Contracts Performance Officer was highlighted as an aim during the Quality Framework review, and that JJ's attendance at this meeting is a good start to developing this.	
2	Apologies for absence: Received from Maria Bailey, Fleur Piacentini, Liz Windsor-Welsh, and Slawomir Pawlik. TMB will ring Fleur to check in with her, as she has missed 3 out of 4 of the Board meetings she has been invited to – members are happy for her to have access to Fleur's phone number and make this call. IS to send TMB the relevant contact number.	IS

<p>3</p>	<p>Registration of interests and declarations of interest to any agenda item:</p> <p>Registration of interest forms:</p> <ul style="list-style-type: none"> • Not yet received from Fleur – IS and TMB to follow up <p>Declarations of interest:</p> <ul style="list-style-type: none"> • TMB reiterated her position as Chair of the HWinGM network as a relevant interest to Agenda Item 10. 	<p>IS/TMB</p>
<p>4</p>	<p>Information – Minutes of the meeting held on 26 September 2022</p> <p>TMB ran through the actions and decisions from the last HWT Board meeting. All actions completed. The Minutes were approved as accurate.</p>	

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Discussion – Feedback on the Quality Framework review, carried out on October 31st 2022 with HWE.

TMB reminded members of the five key aims the Board had identified at the last meeting:

- Improve methods of assessing the impact of our work (Jon Turner agreed with this aim) - e.g. we could gather feedback from organisations on what they have done with the data we provide
- Work with Action Together on an Equality and Diversity plan
- Improve support and development opportunities for HWT staff
- Increase engagement with young people
- Build relationships with new system leaders

There are six criteria that Jon Turner expects all HWs to meet – currently we are meeting four:

What we have:

- Complaints policy
- Conflict of Interest Policy
- Data Security policy
- Publicly available Board Minutes

What we need:

- Business Plan and Strategy – It was agreed that we would defer the start on this until the new HW Manager is in place in Jan 2023.
- Published Decision Making policy – this should be done asap. Jon Turner has sent over a link to some guidance - TMB offered to bring a draft to the next Board meeting, members happy with this. AH suggested that we use the Action Together policy as a framework.

TMB

Questions and Comments:

JR highlighted that Jon Turner has asked us to consider the analytical quality of our reports – the data is there, but not much analysis has been done beyond this. TMB has asked him to send over examples of high-quality HW reports, for us to compare our work to. We

will also be comparing our work with that of other Manchester HWs at the next HWinGM meeting.

GL stated her disappointment at the lack of quality feedback on reports from providers.

AH asked about our Decision Making policy – will we use Action Together’s policy, or create a separate one?
TMB will review the AT one - IS/AH to send over.

IS/AH

The 'Theory of Change and Logic Model' was mentioned in 3.1 under Influence & Impact of the Healthwatch Quality Framework. JR had queried the applicability of the model in the 31st Oct meeting. Jon Turner had developed a training module on the subject - AH stated that she had undertaken this training.

TMB suggested adding a new column to the meeting Agenda for us to check that we are meeting the HWE requirements. JR enquired as to what this would look like - TMB/IS to draw up new template for next meeting.

IS/TMB

Actions:

- Develop Decision Making policy
- Amend agenda for this meeting to include the standard as an attachment
- Get examples of high-quality HW reports from Jon Turner, for us to compare our work to

Actions once new manager is in post:

- Work on improving our impact assessment
- Develop Action Plan
- Prepare for our next review (in 12 months' time)

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Information – Quarter 2 Monitoring

TMB provided a summary of our Quarter 2 Monitoring from the provided reports:

- Reports on the General and Non-Urgent Care surveys have been published
- Mental Health survey is still open (we are leaving it open for longer to gather as many responses as possible)
- HWinGM have contributed to an ICS Phase 2 survey, which all local HWs have promoted in their areas - we gathered 97 responses (but not all of these were completed). Budget provided for each HW for this work - TMB/AH to arrange getting this money to HWT.
- Attendance at events – TMB wants to ensure that no one is left in a vulnerable position working alone - Julie Beech has given assurance that no team members ever works alone behind closed doors; the only time a team member would work alone would be at a public event.
- The team are working on recruiting more volunteers – TMB will leave this for new manager to lead. HWinGM are doing a piece of work around volunteers - there will be an update next week. AH asked if anyone in GM is working directly with young people (TMB to find out at next meeting).
- Complaints monitoring – time spent on complaints has reduced, while the amount of complaints has stayed the same - do the team need any support with this?

TMB/AH

KW also gave an update on the team's outreach activities:

- Reestablished meetings with hospital last week, (had been doing lots before Covid) – we will be meeting on a monthly basis, and new Patient Experience lead will attend.

- Hospital engagement sessions now restarted – one regular session is happening, and we are hoping to reestablish the second monthly session.

Questions and Comments:

TMB asked AH if we have any room in the budget to help the team with our complaints work. AH said that this is unlikely, as the new manager will be on a full-time contract, but she will discuss the issue with Phil Trelease.

AH

KW provided her perspective on the complaints work, as one of the HWT Complaints Officers:

- Speed of complaints process is affected by external deadlines – we have no influence over outside forces
- Complaints are currently in a transition period, with most changing from wide ranging to more specific
- We are asked for more face-to-face time now that lockdown is over, which takes up more hours

Questions and Comments:

JR – how long have complaints been passed over from PALS?

KW explained that complaints are not passed over to us, we are an advocacy service that help people use the PALS service.

TMB asked JJ about her interest in the complaints monitoring work. JJ has a meeting set up with AH to discuss it.

KW would like to know more about the new Voiceability contract (they have taken over from Cloverleaf)– we have not had much contact with them yet, and would like to know how the new working relationship will look. IS to send JJ her details so that they can set up a meeting.

IS/JJ/kw

JJ has been sent all up to date monitoring information – she will let us know if we should include any other data in these documents.

JJ

JR – is there a reason that some text on the monitoring documents is blue?
IS to ask Julie Beech.

IS

Discussion – Quarter 4 Work plan

Discussion around the new Work plan has been delayed due to the post of HWT manager being empty.

Members discussed ideas for potential areas of focus (these need to both reflect feedback from the community and be something that we could impact):

Workplan ideas:

- Follow up on old survey e.g. 2015 Hospital and GP Survey – suggested by HWT staff
- Cost of living affecting people's ability to pay for prescriptions – suggested by TMB
- Virtual wards (experience of discharge from hospital into virtual ward) – suggested by TMB
- Transition between children and adult services – suggested by AH (GM family hub work, good to see what this looks like from a user perspective)

Questions and Comments:

AH noted that the cost of living is a big issue currently, and there is scope to look at how this is affecting health more widely e.g. not turning on health equipment at home to save energy – cost of living and its direct impact on health is not a topic being discussed much, so it would be good to have some data gathered to start these conversations.

KW agreed about widening the project, so that it doesn't just focus on prescriptions. We will be at an upcoming Cost of Living outreach event, so can start to gather feedback there.

KW and GL both noted that it may be difficult to contact people to whom this topic is relevant (GL – people might be embarrassed to talk about it)

TMB summarised the Board's decisions:

- Team will develop a piece of work around the impact of the cost of living on health decisions –

we will work with Action Together and other voluntary organisations on this project

- AH and JW to support the team with designing this work

Board members happy with this decision

AH / JW

<p>8</p>	<p>Information – Update on the appointment of a HWT Manager</p> <p>AH gave a short update on the recruitment process for the post of HWT manager:</p> <ul style="list-style-type: none"> • Alex Leach has been appointed – he was previously CEO of HW Salford, and also used to work for HW Rochdale • No set start date yet, but looks like it will be the first week of the New Year • Appointed on a full-time basis <p>Questions and Comments:</p> <p>JW – why Alex is coming back to work for Healthwatch?</p> <p>AH – He tried a career change but has decided to come back to Healthwatch to help make a difference again.</p> <p>IS/AH/TMB will put induction plan together for Alex, and discuss future work plan with him.</p>	<p>IS/AH/TM B</p>
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Discussion – Risk register

IS/TMB offered their thanks to Phil Trelease for getting the register updated and sent over quickly.

Phil has made some small changes to the register from when Peter used to update it (e.g. changes to colour system – colour coding is only added to points that have changed).

TMB gave an overview of some of the standout points on the register:

2.3 – Work plan

- This will be discussed at the next Board meeting with the new manager

4.2 – Manager recruitment

- Current score of 15 – will reduce in the New Year once the new manager starts in post

6.2 – Data loss

- Significantly reduced thanks to new Sharepoint system

8.2 – Gathering data to analyse and assess impact

- Builds on HWE feedback – something to work on

8.3 – Contract

- Working on developing closer relationship with contract manager – aim stated following Quality Framework review

The register is owned by Action Together, so most risks are managed by them, but Board members are responsible for the following points (mostly regarding governance and reputation):

- 2.4 – Board recruitment
- 2.5 – Skills of Chair and Vice-Chair
- 3.1 – Reputation/Representing the values of HWT
- 3.2 – Maintaining the independence of HWT

	<p>TMB asked Board members to take account of these responsibilities during Board activities.</p>	
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<p>10</p>	<p>Information – Healthwatch in Greater Manchester Network update</p> <p>TMB provided an update on the work of the HWinGM network, of which she is Chair:</p> <ul style="list-style-type: none"> • Review Meeting scheduled for January – will be reviewing the Strategy and Work plan, and comparing each other’s HWE Quality Framework reports to address the strengths and weaknesses of each HW and see what we can learn from each other • Case For Support from the ICB – couldn’t meet them at the agreed time due to them reprioritising their agenda, so we have been added to the agenda for the 21st December meeting. If approved, we should then be able to appoint a Chief Coordinating Officer. • Next meeting will include an update on the volunteering work, discussion of a draft Data Sharing protocol, discussion of protocol on speaking to the press, and a visit from guest speaker Niamh Carroll (from Community adult Mental Health transformation) 	
<p>11</p>	<p>Discussion – Arrangements for 2023 Board meetings</p> <p>Members discussed their preferences for next year’s Board meetings. Members decided on:</p> <ul style="list-style-type: none"> • Every 2 months • Face to face • 2 hours • Time - between 11am and 3pm (allows people to use their free bus passes in the morning, and gives time to people travelling home in the afternoon) <p>IS/TMB/JR to organise first two meetings and check the remaining 2023 dates with the new manager, before sending out all dates to Board members.</p>	<p>IS/TMB/JR</p>

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Any other business

GL – Discharge letters from Hospital (specifically Tameside)

- Patients being discharged back to GP with care plan, but had no follow up/contact from GP – feel a bit abandoned and worried, especially people with cardio problems (some have only had 1 appointment over the phone in 3 years)
- Some patients are also being discharged without a conversation beforehand
- Letters still not arriving in visually accessible format – they do for eye issues, but not when visually impaired people are receiving letters from other departments regarding other issues
- GPs need to make reasonable adjustments e.g. calling out names of visually impaired people instead of flashing them up on the board

KW will pass this feedback on to the hospital – asked GL to pass on any other feedback that would be useful for her to raise.

GL not heard from PEN regarding meetings – AH to chase up

GL to invite KW to Macular Degeneration Society meeting

KW/GL

GL – infected blood inquiry

- Witnesses finished giving their testimonies – report is due next year
- MPs are debating this Thursday

TMB ran through a summary of the decisions from the meeting:

- Looked at required standards from HWE and how we can meet them
- Considered ideas for the new Work plan, and agreed on a project around the Cost of living and its effects on health decisions

- Reviewed risk register
- Agreed to hold six Board meetings in the New Year

TMB thanked members for attending and ended Part A of the meeting.