## Minutes of the Meeting (virtual) of the Healthwatch Tameside Board (part A)

## 7 May 2021

## Venue: Virtual Board Meeting.

Present:	Members: Kailash Chand (KC), Tracey McErlain-Burns (TMB), Royce Goodier (RG), Maria Bailey (MB).	Actions
	In attendance: Peter Denton (PD) Healthwatch Manager.	
1	Welcome and Introductions: KC offered a warm welcome to all members of the Board.	
2	Apologies for absence: Received from Glenis Lee, Camilla Guereca, Jyoti Rao, Liz Windsor- Welsh, Anna Wardle and Slawomir Pawlik.	
3	Registration of interests and declarations of interest to any agenda item: None were declared.	
4	Minutes of the meeting held on 2 March 2021: The minutes had been circulated with the agenda. They were accepted for accuracy. Thanks were extended to TMB for drafting the minutes.	
	The only matters arising were already included on the agenda for this meeting and would be covered in the discussion of those agenda items.	
	Action log: All actions were either completed or covered in today's agenda.	
5	Chair's introductory comments:	
	KC shared some introductory thoughts with the Board.	
	He was very pleased to see progress with vaccine roll out in Tameside.	
	He noted concerns that whilst COVID infection rates had been decreasing it was important to be aware that infection is still a risk and the long standing messages about hand hygiene and face masks still apply. At the same time, he noted that people who had received both doses of their vaccine were much less likely to get serious disease if they were infected.	
	He also drew attention to the backlog in non-urgent health care. This means that some people will have to wait much longer than usual and he is concerned that they may need higher levels of care as a result.	
	Finally he mentioned the Integrated Care System changes which would be discussed later on the agenda.	

6	Contract Monitoring: Papers 6a and 6b were noted. The Board noted the increase in survey responses in Quarter 4 and also that, despite the pandemic, the amount of public engagement during 2020/21 was as good or better than previous years. The Board also noted that whilst the level of NHS Complaints worked on was lower than previous years there had been an increase in information signposting requests. This was particularly the case in Quarter 4 which had seen a massing increase in people asking about to access NHS dentistry. The Board asked PD to pass their thanks on to the whole staff team for their achievements during the challenging period of the COVID	PD
7	<ul> <li>for their achievements during the challenging period of the COVID pandemic.</li> <li>Annual Reporting Arrangements: <ul> <li>PD reminded the Board that the deadline for publishing our Annual Report was 30 June each year. This would be before the Board's next meeting. As a result to following process was agreed:</li> <li>PD and the HW Team would draft the annual report.</li> <li>The draft annual report would be circulated to the Board by e-mail with an opportunity for feedback and comments.</li> <li>Taking these comments into account the Annual Report could be confirmed by the Chair, Chief Officer and Manager for publication and formal submission, using delegated authority from the Board.</li> <li>At the July Board meeting the Board would formally accept</li> </ul> </li> </ul>	PD
8	the Annual Report. <b>Staffing update:</b> PD reported that short listing for the two vacant posts had taken place and that interviews would be held the following week.	
9	<ul> <li>Risk Register:</li> <li>PD presented an updated risk register which was discussed. The following changed risks were discussed:</li> <li>1.1, 1.2 &amp; 2.1 - Possibility that the new Bill that establishes Integrated Care Systems might see changes in funding/expectations for Healthwatch. Similar legislation in the past had resulted in these types of changes. Risk likely to reduce once the Bill has been published.</li> <li>2.3 - Risk reduced - workplan signed off at today's meeting.</li> <li>2.4 - Risk reduced - good response level to survey on our workplan priorities.</li> <li>3.2 - Risk remains but narrative clarified.</li> <li>3.3 - Risk reduced - links with Tameside's Inequalities Reference Group.</li> <li>4.2 - Risk remains but narrative updated to reflect current staffing and recruitment.</li> <li>6.1 - Risk remains but narrative updated to reflect recent systems test.</li> </ul>	PD

10 Sig	n Off 2021/22 Work Plant	
PD bas Thi	<b>gn Off - 2021/22 Work Plan:</b> O presented a high level timeline for the work plan which was sed on previous Board decisions about priority work areas. his was approved. PD will provide progress updates at future Board peetings.	PD
PD to a gav son It v The inc PD Gre Boa	<ul> <li>tegrated Care Systems:</li> <li>and circulated papers providing information about developments create a Greater Manchester Integrated Care System (ICS). He ve a brief presentation at the meeting which was followed by me discussion.</li> <li>was agreed that key questions include:</li> <li>1. Will the legislation change/clarify the definition of 'local people' for Healthwatch (HW)?</li> <li>2. Will the legislation change what HW is expected to do?</li> <li>3. Will the legislation add an ICS-level HW?</li> <li>4. Will legislators use this integration legislation to broaden the scope of the Independent Complaints Advocacy function - and will there be additional resources if they do?</li> <li>5. How will we continue to have influence in terms of quality monitoring?</li> <li>6. What will we be expected to do in terms of community engagement/representation and service change?</li> <li>7. How does the role of HW relate to the expectation of more co-production/co-design?</li> <li>8. How is HW expected to relate to the 'lived experience' movement?</li> <li>9. How can the 10 HW in GM most effectively work together and influence the ICS on behalf of local people?</li> <li>were was also discussion about whether or not Glossop would be cluded in the Greater Manchester Integrated Care System.</li> <li>P confirmed that he is engaged in discussions around these at eater Manchester and Tameside levels and will ensure that the ard is updated through as standing item on the agenda at each beeting.</li> </ul>	PD
PD ant wo	by other business: Informed the Board that although there had been a delay, it was ticipated that a Greater Manchester Healthwatch Dentistry report buld be ready for publication shortly.	
	ork, as our Deputy Chair.	