

Minutes of the Meeting of the Healthwatch Tameside Board

30 March 2017

Venue: Volunteer Centre, Penny Meadow

Present:	Members:	Actions
	In attendance: Ben Gilchrist (BG) (CEO), Peter Denton (PD) (Manager), Kailash Chand (KC) (Chair), Dorothy Cartwright (DC), Murtaza Husaini (MH), Hanif Malik (HM), Lyndsey Sims (LS), Sue Pomfret (SF) (minute taker)	
1.	Welcome: chair welcomed everyone to the meeting.	
2.	Apologies for absence: Cllr Ged Cooney, Frank Downs, Gideon Smith, Cllr Dawson Lane	
3.	Declarations of interest: None. It is to be recorded that we have the Declaration of Interest paper regarding the work Lesley Surman (LSM) carries out with the Healthwatch Tameside (HWT) team on complaints cases, whilst also being a governor at Tameside Hospital. The duties as a governor include holding directors to account for Tameside residents, a role which aligns itself with the values of Healthwatch (HW). LSM understands the confidentiality of the HW role and residents have the option of her not being involved with their case. KC says this should be in writing to minimise risk. LS asked: 'What type of contract does LSM have? What terms is she paid on? How can the contract be terminated if there was to be a problem?' PD reassured the board that the contract could be terminated with a months' notice.	HW staff
4. & 5.	Minutes of the previous meeting: Accuracy - OK Matters arising: Contract Update: PD and BG met with the commissioners and confirmed that HWT contract ends 31 st March 2018, Healthwatch Oldham (HWO) had an extension to their contract for 12 months so that falls in line with Tameside in terminating on 31 st March 2018.	
6.	Interim Management arrangement: PD - has done preparatory work in terms of work plans, spending and staffing. Advert for 2-year secondment has gone out with a closing date of 7 th April. There has been a proactive approach in terms of people who may be interested. It has been circulated to HW England, Public Health and the council. KC - 'What is the timeline?' Answer from PD - Mid April for shortlisting and interviewing LS - 'Given that this timeline could be 6-8 weeks, how will the workload be managed?' Answer - BG will still be around and there has been the recruitment of new HW officer with underspend. PD still has hours in the bank for HWT so can offer support e.g. new staff induction	BG

7.	<p>Governance Decisions update: Refer to Paper 1 Board Membership: Action not picked up yet so still pending. Local Authority representation: Cllr Ged Cooney is to replace Cllr Lynn Travis, Cllr Dawson Lane is to replace Gill Peet and Gideon Smith is to replace Pam Watt. PD- Agreed resolution of closure of CIC. This has to be done with 75% of Board members present. If it is done electronically then you have to have 100% of the board. As we don't have 75% of the board present today, that will be an action for BG.</p>	BG
8.	<p>Chairs Update: National issues affecting patient care</p> <ol style="list-style-type: none"> 1. Budget - Government had increased the social care budget by 2 billion, but that doesn't even cover the deficit. The system is under strain. No extra money was given to the NHS apart from A&E - suggesting that GP's should be put in to triage patients. There is already a shortage of GP's with people waiting 3-4 weeks for an appointment to see a GP at their own surgery. 2. Article 50 - 100,000 workers in the NHS including nurses, GP's and junior doctors are not sure of their future. A survey by the BMA says that 54% are considering going home. There are already issues recruiting enough staff at hospitals. 3. NHS medication - some medications not being prescribed will impact on poorer people. PD - there will be some of our local people who will not take medication either because they cannot afford them or cannot get out to buy it. 4. STP's (Sustainability & Transformation Plans)- concern about funding gap. Need 30 billion just to stay still. In Greater Manchester (GM) there is only 1 STP but already there is locality work going on, e.g ICO (Integrated Care Organisation) in Tameside. In order for this to work, we need to truly integrate. GM is in a good position as this work had already started with GM devolution. 	
9.	<p>Managers Update: - refer to paper 2</p> <ol style="list-style-type: none"> 1. Mental Health work- one third of the way through a big project. The event on Saturday will shape the agenda for the next step. 2. Healthier Together - Starting on implementation around High risk acute general surgery with Stepping Hill (SH) and Tameside Hospitals. They are putting together a patient experience group. Concerns that the Trust (Tameside) could be at risk of missing out. DC expressed concern about the state of care on some wards at SH. Answer - PD - This has a higher set of clinical standards. If SH can't/doesn't reach those standards, we say sorry this cannot happen at this time (ie Healthier Together plans) Need to ensure that the patient voice group listens to lots of patients. Comment - HM - PPG's are good for this. 	

