

HAVERING HEALTHWATCH LIMITED

Company number 08416383

MINUTES

of a meeting of the Management Board
12 August 2013 (2pm-4.30pm)

Present:

Directors:

Anne-Marie Dean, Chairman
Ian Buckmaster, Company Secretary
Hemant Patel

Joan Smith, Manager

Note: except as noted, all resolutions were passed unanimously

38 MINUTES OF LAST MEETING

The minutes of meeting of the Board held on 18 July were confirmed as a correct record and were then signed by the Chairman.

Oral updates were given on the following matters referred to in the minutes (and not otherwise dealt with at the meeting):

- (i) Office accommodation (Min 30): the printers transferred from Shaw Trust and LINK had proved to be less than reliable and, accordingly, two new printers had been acquired, one for low-volume printing and scanning, the other for high volume work.
- (ii) Statutory business: Registered Office (Min 33): Companies House had accepted the change of Registered Office to Morland House.
- (iii) Opinion Research (Min 35): a year's subscription to SurveyMonkey had now been taken out.
- (iv) Storage of Company Assets (Min 37): subsequent to the decision at the last meeting, the Company's payroll providers had advised that any such payment was regarded by HMRC as a taxable payment and could not be treated as an expense. Following discussion, the Board agreed that the payment be treated as an *ex gratia* payment in the particular circumstances and that the Company should make a further payment equivalent to the Manger's tax and NIC liability in order to ensure that she remained entitled to a payment of £200.

Note: the Manager was not present for the discussion or decision on this item

Havering Healthwatch Limited
Minutes of a meeting of the Board

RESOLVED:

That the payment of £200 to the Manager agreed at the meeting on 18 July be clarified as being net of any tax and NIC liability, which will be borne by the Company.

39 FINANCE REPORT

The Company Secretary submitted the Finance Report for June.

Total expenditure had amounted to £10,241.56 against income carried forward of £44,044.32.

Details were **NOTED** of contracts and business arrangements entered into by or on behalf of the Company to the end of July.

RESOLVED:

That the Finance Report be NOTED and ACCEPTED.

40 MANAGEMENT OF HEALTHWATCH HAVERING

A proposal for the formal arrangements for the management of Healthwatch Havering at Board and Lead Member Level through the Management Board, Strategy, Governance and Assurance (SGA) Board and Policy Advisory Board was considered and approved, subject as follows – see appendix 1 to these minutes.

It was agreed that:

- (i) all meetings envisaged in the proposal shall be scheduled but that any meeting should be cancelled if there was no need for it.
- (ii) the Policy Advisory Board be re-named as “Advisory Board” and that its role be described as being to advise the Management Board and/or SGA Board on matters of interest.
- (iii) agendas for the Strategy, Governance and Assurance (SGA) Board and Advisory Board shall be divided into Part 1 – open to the public - and Part 2 – open only to Healthwatch Havering Members. Part 2 items would be those where the disclosure of personal details would be possible and discussion of matters still in progress on which a public position could not yet be taken. Active Members and those Lead Members not appointed to the SGA Board shall be notified of all meetings of both Boards and be entitled to attend (including Part 2 discussions).

Havering Healthwatch Limited
Minutes of a meeting of the Board

- (iv) the quorum for the SGA and Advisory Boards shall be 50% of their appointed membership, plus 1, and to include at least two Directors.
- (v) the Advisory Board shall meet in the late afternoon in November and January and otherwise in the evening.
- (vi) the arrangements shall be reviewed after they have been in operation for a year.

RESOLVED:

That the arrangements set out in Appendix 1 to these minutes be approved

41 PARTICIPATION IN HEALTHWATCH HAVERING

A proposal for the formal arrangements for participation in Healthwatch Havering by Members and Supporters was considered and approved.

RESOLVED:

That the arrangements set out in Appendix 2 to these minutes be approved

42 REPORTS OF MEETINGS WITH STATUTORY AND OTHER BODIES

A. CCG

The Chairman and Manager had met Jacqui Himbury, Director of Nursing for Barking & Dagenham, Havering and Redbridge CCGs. The meeting had been useful and good progress made. A request by the CCG to be advised of intended "Enter & View" visits (E&V) had been refused on the basis that Healthwatch Havering had to reserve the right to carry out unannounced E&V when matters of concern arose.

B. St. George's Steering Group

It had emerged during discussion that the CCG's proposals for the vacated site might not now come fruition. The CCG no longer controlled it or its potential capital value as, on 1 April, its ownership had transferred to NHS Properties and its future would be decided by them in the light of all possible future uses, including but not limited to that proposed by the CCG, which would have to bid competitively. There was a possibility that no part of the site would be reserved for NHS use, if suitable premises for proposed uses existed elsewhere or the CCG proposal was considered too expensive.

Havering Healthwatch Limited

Minutes of a meeting of the Board

C. Urgent Care Committee

Much data had been presented but it was of limited value. The UCC would meet monthly.

At the meeting, BHRUT had announced (unexpectedly) a proposal to close the A&E at King George's overnight and to deal with all A&E night-time cases at Queen's in order to make better use of the available consultant cover; it was claimed that, on average, only 23 patients per night would be affected.

On A&E generally, it was claimed that many A&E attendances would be better treated at an urgent care centre; there were suggestions that some GPs were referring patients to A&E because their personal clinical knowledge was not sufficiently up-to-date, and that pressure was needed on NHS London to review GP arrangements in Havering.

The urgent care centre at Broad Street in Dagenham was to close as attendances there had not been sufficient to justify maintaining it.

D. Barking, Havering and Redbridge University Hospitals Trust

The Chairman and Lead Member, Clusters Co-ordination, and representatives of Healthwatches B&D and Redbridge had met BHRUT representatives to discuss a range of issues

There had been little progress in dealing with the consequences of the Maria De Jesus case. Indeed, the BHRUT staff had displayed a general attitude bordering on the callous in the views they expressed. Clinical management had clearly been poor and there appeared little appreciation that an apology alone was insufficient response; no one appeared to be taking responsibility for remedying the errors that had been made, there was no evidence of remorse on anyone's part and there did not appear to be any action plan to improve care for the future.

BHRUT had also been asked for an update on the position with A&E but nothing had been forthcoming so far. A response from the CCG (about their involvement as commissioners of hospital services) had been received but was not overly helpful.

E. CQC

The CQC had been made aware of Healthwatch Havering's contact with some residential care homes that had been reported upon adversely, and of a safeguarding issue that had recently come to attention.

Havering Healthwatch Limited
Minutes of a meeting of the Board

43 REQUEST FOR SUPPORT WITH CAMPAIGN AGAINST GOVERNMENT'S "GO HOME" INITIATIVE

The Chief Executive of Healthwatch Redbridge had circulated an email requesting support for campaign against the Government's "Go Home" initiative (which had been operating in that borough).

The Company Secretary advised that it would be inappropriate for Healthwatch Havering to express any view on the matter. The law forbade Healthwatch organisations from becoming involved in campaigning for or against any government or other political policy. Doing so could place funding at jeopardy at risk.

RESOLVED:

That no action be taken in response to the request from Healthwatch Redbridge

44 INDUCTION ARRANGEMENTS FOR HEALTHWATCH HAVERING MEMBERS

The Manager reported that she had made enquiries about a suitable venue for the event and that it seemed that using MyPlace in Harold Hill offered the best opportunity. A large function room was available there at the times desired and catering was provided.

It was agreed that the induction awayday should be held there on 11 September and that the E&V training should take place on 19 September. The Manager was authorised to make the necessary arrangements (including catering) and to notify Members accordingly.

It was also agreed that Healthwatch Havering should aim to provide training/development opportunities at roughly quarterly intervals for all Members.

45 OTHER MATTERS

A. The Manager had been contacted about an individual's health problem, with allegations of poor/mis-diagnosis by both GP and Queen's Hospital. Although the main issue appeared to be advocacy (and the complainant should therefore be referred to Voiceability), there was evidence of possible systemic failure that was a matter for Healthwatch Havering. The Manager was authorised to pursue the matter as necessary and to report back in due course.

B. An invitation had been received for attendance at a meeting of the Health OSC Topic Group on hospital discharge, to follow up on work done by the LINK in 2011. It was agreed that Active Member Donal Hayes should be

Havering Healthwatch Limited
Minutes of a meeting of the Board

invited to review that work and to consider what further, if anything, Healthwatch Havering should do.

- C. It was noted that the Company Secretary and the Manager were preparing a register of the Company's assets.
- D. The Chairman had suggested that the possibility of Healthwatch Havering taking out a corporate subscription to the *Heath Service Journal* for the benefit of Members, so that they could keep abreast of developments in healthcare. The Company Secretary reported that his enquiries indicated that a subscription would cost of the order of £3,000 per annum.

It was agreed that the likely cost was prohibitive and therefore that the matter should not be pursued.

Chairman
9 September 2013

Management Structure

Management Board

Role:

- To manage the corporate and financial affairs of Healthwatch Havering as a limited company and employer, and in exercising statutory functions
- To ensure due and proper compliance with the Companies Acts, the Health & Social Care Act 2012 and the Local Government & Public Involvement in Health Act 2007, and all other relevant regulations and regulatory requirements
- To liaise with the Havering Council as funder of Healthwatch Havering
- To authorise (and where appropriate to withdraw authorisation of) Directors, Lead Members and Active Members to undertake activities on behalf of Healthwatch Havering, including (but not limited to):
 - Representing Healthwatch Havering at meetings
 - of Havering Council
 - with other Healthwatch organisations at local, regional or national level
 - with other local authorities
 - of relevant NHS bodies
 - carrying out “Enter and View” of premises and facilities within the purview of Healthwatch Havering
 - meeting with community groups and charitable and other voluntary organisations with interests in Health and Social Care issues
- To prepare the Annual Report of Healthwatch Havering
- To approve all statutory and other returns required of Healthwatch Havering as a limited company

Membership: Chairman, Company Secretary and Director (Quorum: 2)

Frequency of meetings: The Management Board will meet monthly,

Strategy, Governance and Assurance Board (SGA Board)

Role:

- To ensure there are appropriate tools and mechanisms in place to enable any individual to express their views and concerns about the local health and social care services and ensuring that this contribution is recognised and helps to build a picture of local services.
- To ensure that appropriate support is available to provide people with information about their choices and what to do when things go wrong; information about local health and care services and how to access them

Havering Healthwatch Limited

Minutes of a meeting of the Board

- To provide authoritative, evidence-based feedback to organisations responsible for commissioning or delivering local health and social care groups, and support Clinical Commissioning Groups to make sure the services really are designed to meet individual's needs.
- To ensure the views and experiences of patients, carers and other services users are taken into account by the Health and Wellbeing Board when local needs assessments and strategies are being prepared.
- To promote public health, health improvements and tackling health inequalities
- To alert Healthwatch England, Care Quality Commission (CQC) and/or other statutory regulators to concerns about specific care providers
- To work with the CCG and Havering Council to develop a consistent set of quality standards that support best practice and define good outcomes.
- To ensure sound stewardship of the funds and working methods of the organisation
- To support and develop the members of Healthwatch Havering, enabling them to become vibrant and effective ambassadors on behalf of their local communities.

Membership: 8 persons (Quorum: 50% of appointed membership, plus 1, provided 2 Directors are present)

Healthwatch Havering Chairman, Company Secretary, Director and Manager

Lead Member with responsibility for Quality, Safety and Risk

Lead Member with responsibility for Hospital Services

Lead Member with responsibility for the co-ordination of the 6 CCG Healthwatch cluster teams

Lead Member with responsibility for Social Care

Other Lead Members and Active Members shall be notified of meetings and have the right to attend (including any part of the meeting not open to the public).

Frequency of meetings: The SGA Board will normally meet monthly, usually immediately following the monthly Management Board meeting. Meetings will be held in public, except to the extent that it may be necessary to exclude the public if the personal details of individuals are likely to be discussed or if work not yet ready for publication is to be considered.

Note: The meeting arrangements will be reviewed in 2014.

Havering Healthwatch Limited

Minutes of a meeting of the Board

Advisory Board

Role:

To consider reports from the Healthwatch CCG cluster and specialist teams on matters of interest, and to advise the Management Board and/or Strategy, Governance and Assurance Board thereon, including (but not limited to):

- Outcomes of “Enter and View” exercises
- Public consultations
- Presentations to, and other activities with, local community groups and charitable and other voluntary organisations with interests in Health and Social Care issues
- To consider reports from Healthwatch Havering representatives at meetings of local authority and NHS bodies
- To determine the action to be taken, if any, in the light of such reports
- To approve the Annual Report of Healthwatch Havering
- To approve all formal reports by Healthwatch Havering to any local authority or NHS bodies

Membership: 19 persons (Quorum: 50% of appointed membership, plus 1, provided 2 Directors are present)

Healthwatch Chairman, Company Secretary, Director and Manager.

The 9 Specialist Lead Members and the 6 Lead Members representing the individual Cluster groups

Active Members shall be notified of meetings and have the right to attend (including any part of the meeting not open to the public).

Frequency of meetings: The SGA Board will normally meet in alternate months, usually during the second week after the Management Board meeting for that month. Meetings will be held in public, except to the extent that it may be necessary to exclude the public if the personal details of individuals are likely to be discussed or if work not yet ready for publication is to be considered.

Committees

The Strategy, Governance Assurance Board and the Advisory Board may, with the approval of the Management Board, establish such Committees as they think fit. Such Committees may be permanent or set up for a specific task, then dissolved. No Committee shall have power to commit Healthwatch Havering (or Havering Healthwatch Limited) to expenditure without the approval of the Company Secretary. The terms of reference of all Committees shall be agreed by the Board establishing them (but may be altered and amended subsequently), subject to approval by the Management Board.

Participation in Healthwatch Havering

Healthwatch Havering aims to develop wide, comprehensive and inclusive involvement in Healthwatch Havering, with three levels of participation which should allow every individual and organisation of the Havering Community to have a role and a voice at a level they feel appropriate to their personal circumstances.

Participants comprise

- “Lay People” – people who do not work within the health and social care sector; and
- “Volunteers” – people who work within the health and social care sector

although there is no distinction operationally between Lay People and Volunteers – all carry out Healthwatch activity voluntarily.

Lead Members

Lead Members will be registered as members of the company¹ and will be the trustees of Healthwatch Havering. They will play a vital role in managing the operational activities of Healthwatch Havering.

This is the most senior voluntary role, helping to provide stewardship, leadership, governance and innovation at the Strategic, Governance and Assurance Board and the Policy Board. A Lead Member will also have a dedicated role as described in the Structure section and manage a team of members and supporters to support their work.

- The time commitment is approximately equivalent to 5 days per month
- The role is subject to a formal recruitment process
- The role will receive a full induction and be supported with on-going training were appropriate
- A Lead Member will be an authoritative representative of Healthwatch Havering at external meetings
- All travelling and when appropriate subsistence expenses will be paid

Active members

Active Members will be registered as members of Havering Healthwatch Limited.

This role is the key working role. For some, this role will provide an opportunity to help improve an area of health and social care where they, their families or friends have experienced problems or difficulties. Very often a life experience has encouraged people to think about giving something back to the local community or simply personal circumstances now allow individuals to have time to develop themselves. This role will enable people to extend their networks, and can help

¹ *Healthwatch Havering is the operating name of*

Havering Healthwatch Limited: A company limited by guarantee, Registered in England and Wales No. 08416383

Havering Healthwatch Limited

Minutes of a meeting of the Board

prepare for college, university or a change in the working life. There is no need for any prior experience in health or social care for this role.

The role provides the face to face contact with the community, listening, helping, signposting, providing advice. It also is part of ensuring the most isolated people within our community have a voice.

- The time commitment is from 2 days a month
- The role is subject to a formal recruitment process
- The role is a team role, working with other colleagues and has the support of a Lead Member
- The role will receive a full induction and be supported with on-going training were appropriate
- All travelling and when appropriate subsistence expenses will be paid

Register of Members

The membership register will be kept by the Company Secretary and administered by the Healthwatch Havering Manager. Lead Members and Active Members will be issued a numbered identity badge.

Supporters

Participation as a Supporter is open to every citizen and organisation that lives or operates within the London Borough of Havering. Supporters ensure that Healthwatch is rooted in the community and acts with a view to ensure that Healthwatch Havering represents and promotes community involvement in the commissioning, provision and scrutiny of health and social services.

Support members will not be members of Havering Healthwatch Limited but their participation will be registered and acknowledged by a certificate.

Supporters

- Will be interested in what is happening in the local community regarding their health and social care services. They are people who do not have the opportunity to provide a dedicated time commitment but who do want the opportunity to influence the services that are being provided.
 - Will want to be kept up to date with the latest issues, be part of any opportunities that enable them to influence and create better quality services and part of a network which can quickly respond to any individual or family that needs advice and support regarding their health and social care services.
 - Will encourage high standards of health and care provision and help to challenge poor services
 - Will participate in Healthwatch activities but, for whatever reason, will not be in a position to give a regular time commitment
- There is no need for any dedicated time commitment
 - There is no formal recruitment process but Supporters will be registered

Havering Healthwatch Limited

Minutes of a meeting of the Board

- A certificate of membership will be provided
- Supporters will not act in any capacity on behalf of Healthwatch Havering (but will have opportunity, for example, to be part of a team providing information stands at events)
- A bi-monthly newsletter, where support members views can be published
- Opportunities to influence services and decisions by taking part in postal or on-line surveys