

## **MINUTES**

of a meeting of the Management Board  
4 April 2017 (2.30pm-3.10pm)

**Present:**

**Directors:**

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

**Bev Markham, Community Support Officer**  
**Carole Howard, Officer Administrator**

**Members Mary Bell, Robyna Levitt, Diane Meid, Dianne Old, Val Perry and Ron Wright**

**Prospective Member Helena Cowin**

**Apologies for absence were received from Helena Cowin, Carol Dennis, Maria Dugdale, Jenny Gregory, Dildar Khan, Dawn Ladbrook, Emma Lexton, Terry Matthews, Sylvia Patten and Vivien Saxby**

All resolutions were passed unanimously

**288 MINUTES OF LAST MEETING**

The minutes of meeting of the Board held on 14 February 2016 were confirmed as a correct record and the Chairman was authorised to sign them.

**289 DECLARATION OF INTERESTS**

There were no declarations of interest in business before the meeting.

**290 OUTSTANDING ACTIONS**

Action item 33 – 19/5/15 There had been no further development in this action.

Action item 34 – 8/12/15 Advice awaited.

Action item 39 – 16/2/16 The Joint Topic Group (with the Health OSsC) report was now in its final draft and would be published shortly.

Action item 41 – 16/2/16 Healthwatch support for monitoring the new contractual scheme for Domiciliary Services had

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been requested by the Council. The precise format of support was to be decided.

Action item 42 – 13/12/16 It was noted that the Enter & View Panel had approved the Relevant Decision Making Policy.

Action item 43 – 13/12/16 Further action on the STP was awaited.

Action item 44 – 13/12/16 This action was now complete.

Action item 45 – 13/12/16 it was noted that Locality Development Group meetings were continuing.

Action item 46 – 13/12/16 Workplace Pension arrangements were now in place for implementation on 1 July 2017.

Action item 47 – 14/2/17 There would be a further review of hospital discharges through the Enter & View programme in due course.

### 291 FINANCE REPORT

The Company Secretary submitted the Finance Report for March 2017. £10,971.71 had been spent on Healthwatch activity and there had been income of £2,000.

Current forecasts indicated that the Council grant would be expended in full but, after applying other income (not yet due), there was likely to be a modest end-of-year surplus.

### 292 WORKPLACE PENSION SCHEME

**Note: this minute is publicly available but, to comply with Data Protection and other legal requirements, does not identify individuals.**

Further to the discussions at the last and previous meetings, the Board NOTED that the Company's Workplace Pension scheme had now been set up with the provider NEST. Only one employee had opted to be enrolled in the scheme, which would come into effect on 1 July. As agreed, the Company would be contributing the equivalent of 2% of the employee's pay until April 2019 and 3% thereafter.

### 293 MEMBERSHIP OF THE COMPANY, AND AUTHORISATION TO ENTER AND VIEW

Four recruits had now provided satisfactory DBS checks and were nearing completion of (or had completed) their training. It was, accordingly, **RESOLVED:**

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**To admit, and approve for Enter & View (subject to satisfactory completion of all necessary training):**

Helena Cowin

Dildar Khan

Robyna Levitt

Sylvia Ann Patten

**294 PRIORITIES FOR 2017/18**

The Board NOTED that the membership had agreed earlier in the day that the priorities for 2017/18 would be based upon:

- Healthwatch England – Business Plan, 2017/18: Bring the public's views to the heart of Local decisions
- Queens Hospital – persuading patients and visitors to stop smoking on the premises
- STP/ACS/Locality Development
- Domiciliary care services
- Patient empowerment
- Develop the Enter & View programme to facilitate inter-action between the residential care sector and BHRUT

**295 BHR CLINICAL COMMISSIONING GROUPS (CCGS)**

The Board noted that NHS England (NHSE) had issued formal Directions to the three CCGs requiring them to produce action plans to address deficiencies identified by NHSE in financial controls and budgeting and governance arrangements. NHSE would also be taking a close interest in appointments that were proposed to the CCGs' executive teams and the next tier of management.

The CCGs had been set a target of reducing expenditure by 6%. They had confirmed their intention of meeting that target while maintaining high quality standards of care for local people.

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**Chairman**

**Havering Healthwatch Limited**  
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