

## **MINUTES**

of a meeting of the Management Board  
12 December 2019 (12noon-1:25pm)

**Present:**

**Directors:**

**Anne-Marie Dean, Chairman**  
**Ian Buckmaster, Company Secretary**

**Carole Howard, Office Administrator**

**Members Mary Bell, Helena Cowin, Carol Dennis, Jenny Gregory, Dildar Khan, Dawn Ladbrook, Robyna Levitt, Di Old, Vivien Saxby\* and prospective member Ashley Doctors**

\* for part of the meeting

**Apologies were received for the absence of: Hemant Patel (Director), Bev Markham, Emma Lexton, Val Perry and Jennifer Smith**

All resolutions were passed unanimously

**386 MINUTES OF LAST MEETING**

The minutes of meeting of the Board held on 12 February 2019 were confirmed as a correct record and the Chairman was authorised to sign them.

**387 DECLARATIONS OF INTEREST**

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

**388 OUTSTANDING ACTIONS**

Action item 41 – 16/2/16 The Domiciliary Care Survey was complete but the final report was not yet ready.

Action item 50 – 6/3/18 The Red Bag scheme had not developed as expected. Enquiry would be made of BHRUT as to progress.

It was noted that Action items 47 and 51 were now complete.

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**389 CHAIRMAN'S REPORT**

The Chairman's report is appended to these minutes.

**390 FINANCE REPORT**

The Company Secretary submitted the Finance Report for November 2019. £9,945. A refund of £120 in respect of anti-virus software no longer required had been received.

In response to a question, the Company Secretary explained that the format of the report was intended to assist those members who did not have formal training in financial accounting to understand how the Company's money was spent.

**391 GOVERNANCE COMMITTEE**

The minutes of the meetings of the Governance Committee held on 9 July, 17 September, 8 October and 12 November, were received and noted.

The Board noted that the Committee had agreed proposals for the election of members of the Committee with effect from the AGM in 2020 and had recommended that they be adopted. The proposed criteria for eligibility for election were that a candidate should:

- Be able to demonstrate a solid background of work with Healthwatch, over a minimum period of 3 years
- Have participated in a minimum average of 5 Enter & View visits or Engagement events annually over that 3-year period
- Be able to commit to attending at least 8 monthly meetings a year
- Be prepared to take part in specialised work or attend meetings with Havering Council, the CCG, BHRUT, NELFT or GPs to help with the overall development of service changes
- Be prepared to read the Governance meeting papers (which on occasion can be quite large!)

**The Board ACCEPTED the recommendation and APPROVED the proposal for the election of members of the Governance Committee.**

There were no other matters arising.

**392 MEMBERSHIP OF THE COMPANY**

The Board noted that the Governance Committee had agreed to separate membership of the Company from the granting of approval to Enter & View.

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One recruit had now provided satisfactory references and It was, accordingly,  
**RESOLVED:**

**To admit as a Member:**

John Ladbrook

**393 CARE HOME IN ROMFORD**

A member referred to concerns previously raised in relation to a care home in Romford. The Company Secretary reported that the CQC had not yet responded to the request for a meeting to discuss the position, and accordingly it was proposed to proceed to publication of the report about the recent Enter & View visit to that home.

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**Chairman**  
**24 March 2020**

## **Chairman's Report**

This time last year we were submitting a bid to win a 5-year contract with LBH to continue to run the service. I don't think any of us realised how passionate we felt about the work that we do, until we were tested by the realisation that our contract would end in March 2019.

Thank you to all our Volunteer Members and staff for the tremendous effort that they put into helping us submit the Winning Bid.

### **Healthwatch Havering**

During the year we restructured slightly to lighten the burden of 'meetings for meetings' sake. We now have a Governance Committee which meets monthly and takes responsibility for the formal processes. The Engagement Panel (formally the Enter and View meeting) now has a much wider role. The Engagement Panel takes forward the new initiatives which directly engage with our residents, patients and carers. Both boards have terms of reference and consist of a mix of staff and volunteer members.

#### During this quarter

##### Contractual Matters

We meet every quarter with the LBH to discuss our progress and our plans. All matters related to Policies and Procedures are updated and complete.

##### Board Development/Away Day -Community Safety

This is an important aspect of everyone's day to day life, which can span from personal and neighbourhood safety to safeguarding responsibility for children and vulnerable adults. During the coming year, as part of our Development/Awayday, we will be discussing how we play our part in this important aspect of community life. There will be a presentation from the Local Area Co-ordination team who are launching a pilot in Harold Wood a new approach to support people of all ages who are dealing with complex situations in their lives.

##### Healthwatch England

The role of HWE continues to develop a wider national and more influential voice with Government. As part of this work HWE are encouraging and supporting local HWs to develop a more comprehensive and business-like approach to their organisations. Much of this work we already have in train however we are always keen to develop further, and we will be attending the HWE's Quality Framework development session in February.

An excellent example of demonstrating our work is the recent launch of HWE's database of Healthwatch reports - see <https://www.healthwatch.co.uk/news/2019-12-03/thousands-peoples-views-all-one-place> There are 70 of our reports there (I think there are a few more to be added). The most interesting data is the column showing how many people have indicated that they found any particular report helpful. A 112 found our report on The Oaks helpful

Vision Services Report – our report continues to resonate positively with BHRUT, NEL Eye Health Network and local Sight Voluntary organisation.

- BHRUT - An Eye Clinical Liaison Officer (ECLO) has been appointed and finally good progress is being made for the 'Pod office' to accommodate the role. It is expected that both will be operational by January 2020.
- NEL Eye Health Network - we attend quarterly, and the Chair has asked us to consider developing a Case Study – this is under consideration.

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- Havering OSC – is taking forward a new initiative with BHRUT requiring them to identify important metrics which allows the borough to measure the success that is being achieved on our recommendations and most importantly for our residents who are blind or partially sighted.

#### Moorfields Hospital Consultation

We are members of the consultation process on new premises and service models and this work with Moorfields is led by a Volunteer member.

#### St Georges Hospital

The funding for the capital build had been approved. The CCG are developing the plans and business case for final approval. In 2020 the steering groups will be established and Healthwatch will be offered the opportunity to join one of the groups.

#### Recruitment of Volunteers

We have seen increasing requests from the CCG and LBH to support their service developments by providing local people's views on service models. We continue to develop new ways of attracting volunteers which has included advertising in Voluntary sector magazines.

#### **BHRUT**

We have submitted two substantial reports on services at the hospital - Urgent care services provided by PELC and the Meals services for patients.

The PELC report identified concerns regarding the queuing and waiting times including children. A key recommendation, as demonstrated in many other hospital A & E departments was a Ticket Machine be installed to monitor accurately the waiting times. We have been advised that the Ticket Machine will be installed during the week of 3<sup>rd</sup> December.

The Clinical Strategy has been launched.

A new acting CEO joins in the New Year and we were members of the Stakeholder assessment process

Meeting between the 3 HW Leads and BHRUT – continues to provide good opportunity to understand and influence the hospital services.

A & E continues to remain under serious pressure with one of the highest attendances in the country.

#### Primary Care Developments

##### Primary Care Networks (PCNs)

These are formally part of the NHS's 10-year plan. We have 4 in the borough – all were successfully launched in April. The PCN's each have Clinical Directors and will receive their funding as group. This will enable a better approach to planning and delivering primary care in each area– of particular benefit will be the ability to support single-handed GP practices. They are important providers in the 10-year plan, and we will be working closely with them and invitations have already been extended to us to join their meetings and work with their patient groups.

##### Havering Health

This organisation has emerged from the GP Federation. The organisation's membership consists of the majority of GPs in Havering. The emerging role for HH is as an overarching body to improve the funding opportunities and co-ordination of these opportunities. The organisation has a role with local Nursing homes, this opportunity will be further developed through the Engagement Board

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#### CCG

The NHS continues to roll out the 10-year plan and we have been updated and advised by the CCG. There are plans in place to continue with our involvement in the roles of all organisations as the NHS 10-year plan rolls out further