



	<p>2.3.1.3 Meeting with Bob Edwards: CT received email confirming the date of the meeting (12/8/16); if AD cannot attend, LS is available.</p> <p>2.3.1.6 Healthbridge Direct (Hub Usage): CT has raised the issue of patient referrals at the last CCG meeting. This is now an action for CCG CT will report back if any further information is made available.</p> <p>2.3.1.10 Transforming Services Together: <b>CT will discuss with MN when he is back and any information will be drafted and forwarded to everyone.</b> LS added that a meeting was due to take place on 28<sup>th</sup> July. Despite concerns regarding Redbridge patients use of Whipps Cross; Barts' are still not adequately involving our patients.</p> <p>2.4.1.1 Barts Health Patients Engagement Strategy: Naina attended the meeting and CT will pick this up with her for review.</p> <p>3.1.1 MD to explore free/off the shelf tool (for directors to be able to share calendars, materials, minutes, etc) - <b>outstanding item</b></p> <p>4.3 Healthwatch budget in Cabinet papers: <b>the issue to be discussed with John Turkson during next monitoring meeting. Letter to be forwarded for a formal response.</b></p> <p>5.2 Director recruitment update: there has been little interest since recruitment information was publicised. This item would be revisited at the September Board meeting.</p> <p>5.4 Risk meetings: it was agreed that the meeting should take place on Monday 15<sup>th</sup> August at 5pm (subject to confirmation with MN and MD)</p>	<p>LS/CT</p> <p>CT</p> <p>CT/MN</p> <p>MD</p> <p>CT</p> <p>CT</p>	
<p>4. CEO Briefing</p>	<p>4.1. <b>CEO Briefing:</b></p> <p>4.1.1. <b>CT to resend her briefing.</b></p> <p>4.1.2. The meeting with Age UK was a marketplace event so we had a stall.</p>	<p>CT</p>	
<p>5. Financial Management</p>	<p>The item was deferred to the next meeting.</p>		
<p>6. HR</p>	<p>6.1. Staffing update: Projects Coordinator position: CT informed the Board that the post holder was now confirmed. CT also informed that another candidate had been impressive and directors discussed the possibility of a short term future project that might use the candidate's expertise. CT to review and report to Board.</p>	<p>CT</p>	
<p>7. Membership Update</p>	<p>7.1. <b>Membership Update:</b> 9 new members were confirmed by the directors.</p>		

<p><b>8. Risk Meeting introduction</b></p>	<p><b>8.1</b> The directors discussed the agenda and agreed it should contain standing items and work plan. <b>VT will forward draft to CT to circulate.</b> It was also agreed that a proper Risk register should be developed.</p>	<p>VT/CT</p>	
<p><b>9. Projects, items and events updates</b></p>	<p><b>9.1 AIS Workshop</b> - the event was extremely successful with over 60 practice managers attending. Future work was discussed with CCG to create a Practice Managers Network. HWR has been approached by WF CCG to undertake the same workshop. CT will send the workshop presentation across the HW network. CT informed the Board that 2 senior director's from HW England attended the workshop and were very impressed. Feedback from practice managers was very positive.</p> <p><b>9.2 Intermediate Care Review</b> - VT and CT presented to Health Scrutiny Committee. Further work is being undertaken with a complete service review (to include home care surveys and ward visits). HSC has been supportive of the project and has enable HWR to agree a proposal with NELFT to carry out the review. The project will be taken forward by the staff team over the next few months and a report will be provided to the Board and HSC.</p> <p><b>9.3 Redirection of A&amp;E patients at Queens</b> - a 2 week pilot redirection pilot to identify patients who should use different service than A&amp;E is being conducted by BHRUT from 22 July; HWR asked during HSC if we might attend and observe. NT is leading on this and will report on outcomes.</p> <p><b>9.4 Brookside Adolescent Unit</b> - CT requested further information on the closure of the in-patient services for young people. NELFT released a statement saying the unit should reopen by the end of August (originally by the end of June). CT to provide a further update when more information is available.</p> <p><b>9.5 Tower Hamlets Healthwatch</b> - CT attended an initial meeting where the tender was discussed. <b>CT to review the tender with MD and report</b> on appropriate potential risks and opportunities before a Board decision is requested.</p> <p><b>9.6 HENCEL</b> - the steering group agreed to create AIS signposting opportunity (with £7k under spent). Sarah will prepare briefing for September meeting.</p> <p><b>9.7 CQC visit to Barts Health</b> - HWR were invited by CQC (along with WFHW) to meet regarding the inspection at Whipps Cross Hospital starting at the end of July. HWR has had an opportunity to provide direct and up to date patient experience. This information will be used in the inspection. HWR is also arranging for a number of our volunteers to assist in gathering patient experience at the4 hospital with CQC inspectors.</p>	<p>CT</p> <p>CT</p> <p>CT</p> <p>CT</p> <p>CT/MD</p> <p>CT</p>	

<p><b>10. AOB</b></p>	<p>10.1. Wanstead Hospital phlebotomy service closure: The service was closed temporarily due to a boiler incident, which prompted HWR to initiate an unannounced E&amp;V visit. The report will be reviewed shortly and sent to all. <b>LS will be attending Patients Engagement Forum and will raise it with the CCG. CT to forward email to Jilly Szymanski; CT to forward email to LS as well.</b></p> <p>10.2. CT will be on Annual Leave from 25 July to 9 August, she asked for directors' availability as VT will be away at the same time. LS and MD will be available if required.</p> <p>10.3. LS reported that she had been involved in a review of the patient engagement groups at BHRUT. They were currently changing to a new system called the patient partner council. LS will provide further information when available.</p>	<p>LS/CT</p>	
<p><b>11. Future Meeting Dates:</b></p>	<p>08 Sept 2016 10 Nov 2016 05 Jan 2017 09 March 2017</p>		

Signed

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