

## Healthwatch Redbridge Board Meeting Minutes and Action points

14 July 2016 - 2:00pm - 4:00pm

Present: Cathy Turland - CT Vanda Thomas - VT ( Athena Daniels - AD Lorraine Silver - LS	·	Apologies: Mo Dedat - MD Mike New - MN In Attendance: Karoli - Minute Taker John Powell (JP) - Dir Redbridge ASC	ector of	, ,
Item	Discussions		Actions	Update
1. Welcome and Housekeeping	1.1 Declarations of Interest - none.			
2. John Powell	2.1 Reconfiguration of H&SC Care Se	ervices in Redbridge		
	JP offered to send the presentation	on over to CT.	JP	
	VT asked if patients were being made changes. JP assured her that the chaservice users as they should receive AD expressed concern as to whether dilute specialisms such as learning dobeen made aware that a number of had left recently. JP confirmed that some who had taken voluntary reduits begun to recruit replacements. Some fed back that they see the changes at to specialise in one particular client CT asked for figures from March to JCT asked for figures fr	anges will not affect an improved service. The changes would isabilities. HWR had LD social workers there had been ndancy, but they had e social workers have as an opportunity not group.		
	workers leavers with learning disabi	lity experience. JP	JP	
	said that he can ask for figures, but make an assumption as to the specia	-		
3. Minutes of last meeting - 26 May 2016	3.1. Matters arising and actions not 2.2.1.15 Scrutiny Committee appointed to the committ to send a replacement if VT is una 2.3.1.1 Issues regarding potential Emergency Department: outstand	on the Agenda bintment: VT has ee. There is no right available to attend. closure of KGH ding item - CT to		
	write a freedom of information about how many ambulances we last few months after 9pm, incluance at metagether notes from March and meetings.	ere received within uding black-flagging. eetings: VT to put	СТ VT	



	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.	LS/CT	
	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.	СТ	
	2.3.1.10 Transforming Services Together: CT will discuss with MN when he is back and any information will be drafted and forwarded to everyone. LS added that a meeting was due to take place on 28th July. Despite concerns regarding Redbridge patients use of Whipps Cross; Barts' are still not adequately involving our patients. 2.4.1.1 Barts Health Patients Engagement Strategy:	CT/MN	
	Naina attended the meeting and CT will pick this up with her for review. 3.1.1 MD to explore free/off the shelf tool (for directors to be able to share calendars, materials, minutes, etc) - outstanding item 4.3 Healthwatch budget in Cabinet papers: the issue	MD	
	to be discussed with John Turkson during next monitoring meeting. Letter to be forwarded for a formal response.  5.2 Director recruitment update: there has been little	СТ	
	interest since recruitment information was publicised. This item would be revisited at the September Board meeting. 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)	СТ	
4. CEO Briefing	4.1. CEO Briefing: 4.1.1. CT to resend her briefing. 4.1.2. The meeting with Age UK was a marketplace event so we had a stall.	СТ	
5. Financial Management	The item was deferred to the next meeting.		
6. HR	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.	СТ	
7. Membership Update	7.1. <b>Membership Update:</b> 9 new members were confirmed by the directors.		



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8.	Risk Meeting	<b>8.1</b> The directors discussed the agenda and agreed it		
	introduction	should contain standing items and work plan. <b>VT will</b>		
		forward draft to CT to circulate. It was also agreed that	VT/CT	
		a proper Risk register should be developed.		
9.	Projects, items	<b>9.1 AIS Workshop</b> - the event was extremely successful		
	and events	with over 60 practice managers attending. Future work		
	updates	was discussed with CCG to create a Practice Managers	СТ	
		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.		
		9.2 Intermediate Care Review - 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	СТ	
		proposal with NELFT to carry out the review. The project	Ci	
		will be taken forward by the staff team over the next		
		few months and a report will be provided to the Board		
		and HSC.		
		9.3 Redirection of A&E patients at Queens - a 2 week		
		pilot redirection pilot to identify patients who should use		
		different service than A&E is being conducted by BHRUT		
		from 22 July; HWR asked during HSC if we might attend	СТ	
		and observe. NT is leading on this and will report on		
		outcomes.		
		<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	СТ	
		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.		
		9.5 Tower Hamlets Healthwatch - CT attended an initial		
		meeting where the tender was discussed. CT to review	CT/MD	
		the tender with MD and report on appropriate potential		
		risks and opportunities before a Board decision is		
		requested.	C-T	
		<b>9.6 HENCEL</b> - the steering group agreed to create AIS	СТ	
		signposting opportunity (with £7k under spent). Sarah		
		will prepare briefing for September meeting.  9.7 CQC visit to Barts Health - 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.		
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10. AOB	<ul> <li>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. 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.</li> <li>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.</li> <li>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.</li> </ul>	LS/CT	
	were currently changing to a new system called the patient partner council. LS will provided further information when available.		
11. Future Meeting	08 Sept 2016		
Dates:	10 Nov 2016		
	05 Jan 2017		
	09 March 2017		

Signed	Date