

Healthwatch Kingston Upon Thames

Board Meeting, Wednesday 30th September 2020, 5.00pm - 8.00pm**REVISED DRAFT PART A MINUTES from 30th July 2020 FOR BOARD APPROVAL**

Meeting held remotely on Zoom

PART A (OPEN MEETING)**Present**

Liz Meerabeau, HWK Chair/Trustee Board Member (Board Lead for Primary Care)	LM	Nigel Spalding, HWK Treasurer/Trustee Board Member/Acting Chair of the Community Care Task Group (Board Lead for Social Care)	NS
Grahame Snelling, HWK Trustee Board Member (Board Lead for Safeguarding)	GS	Nike Alesbury, HWK Trustee Board Member (Board Lead for Volunteering)	NA
James Waugh, HWK Trustee Board Member (Board Lead for Risk Management)	JW	Winnifred Groves, HWK Trustee Board Member (Board Lead for Hospital Care)	WG
William Ostrom, HWK Trustee Board Member (Board Lead for Communications)	WO	Scotty McLeod, HWK Trustee Board Member (Board Lead for Business Continuity)	SM
Stephen Bitti, HWK Chief Officer/Acting Chair of the Learning Disability Task Group	SB	Candy Dunne, HWK Deputy Chief Officer	CD
Jaimy Halliwell-Owen, HWK Communications and Engagement Officer - minutes	JHO	Persephone Pickering, Time to Change Kingston (TTCK) Hub Coordinator	PP
Kezia Coleman, HWK Projects and Outreach Officer (Disabilities and Mental Health)	KC	Tony Williams, HWK Active Affiliate Chair of the Mental Health Task Group	TW
Rona Topaz, HWK Learning Disabilities Support Officer	RT	Jane McVeigh, Hospital Services Task Group	JM
Tia Arberry, HWK Projects and Outreach Officer (Young People and Safeguarding)	TA		

Agenda No.	Item No.	Actions
1	<p>Welcome and apologies for absence (LM)</p> <p>1.1 Additional attendees: Jane McVeigh 1.2 Apologies: Graham Goldspring, Acting Chair of the Hospital Services Task Group</p>	
2	<p>Declarations of interest (LM)</p> <p>2.1 NA</p>	
3	<p>Minutes from 27.05.20 for approval</p> <p>3.2 p.3 LM writing to CCG requesting an update about EUPD.</p> <p>5.1 On Finances - please can this be amended to say: “note the provisional statements of income and expenditure for 2019/20, which are subject to independent examination starting in June”</p> <p>3.1 Minutes were approved by the Board, pending the above amendments.</p>	5.1 SB/ JHO
4	<p>Chair’s Report (LM)</p> <p>At the time of writing health and social care services are moving into the second phase of their pandemic response, but it is still at level 4, the highest level. Many restrictions are still in place and vulnerable people are still shielding by isolating themselves at home.</p> <p>Healthwatch Kingston staff are continuing to work effectively from home, and the annual report on our activities was very well received by our stakeholders. Bodies such as the SWL Clinical Commissioning Group are continuing to meet via Teams or other platforms and the Royal Borough of Kingston has resumed a considerable amount of its business remotely under the rubric of the Response and Recovery Committee. HWK can gather much valuable information from these sources, and from our open meetings and the Patient and Public Forum organised by the CCG. However neither the Health Overview Panel nor the Health and Wellbeing Board has yet resumed; when the latter does resume it will consider a refresh of the local Health and Care Plan in view of the inequalities which have been highlighted by the coronavirus pandemic.</p> <p><u>Temporary Changes to Health and Care Services</u> On 20th July, a letter was issued by Sarah Blow, Accountable Officer at the CCG, and Dr Andrew Murray the Chair, giving an overview of the changes made in response to the pandemic. Decisions were made through the SWL Incident Control Room and Gold Command, and it was recognised that</p>	

	<p>stakeholders had not been involved due to the urgency of the situation. The letter stated that some urgent elective procedures would restart, but that the need for infection control by physical distancing meant that they might be in different locations. (Cancer care in Kingston has been less affected than in some other boroughs, as it is delivered in a separate building and so infection control has been simpler). The letter also refers to prioritising patients for treatment in view of the backlog which has built up, and HWK has asked for information on how patients are prioritised and what clinical oversight they have during the extended waiting period. Changes outlined in the letter include:</p> <ul style="list-style-type: none"> - reconfiguration of A&Es - an increase in ITU capacity - more use of telephone consultations in outpatients - cessation of planned surgery for three months from early April - cessation of home births - a ‘phone first’ emergency mental health service - more use of telephone consultations in community mental health - discharging people with LD or autism home, or having them in smaller cohorts - provision of additional rehabilitation beds. <p>An additional service change has been delivering much of primary care through telephony.</p> <p>The main message from all of the SWL Healthwatches is that we recognise that these changes had to be made and that several of them may be preferable and become permanent, but that the views of service users should be sought before these decisions are taken.</p>	
<p>5</p>	<p>Finance Report (NS)</p> <p>5.1 NS reported that ongoing financial issues between HWK’s previous and current photocopier companies had resulted in a delay in the submission of the 2019-20 accounts to the independent examiner. However, sufficient progress had now been made for the accounts to be sent off.</p> <p>5.2 The Board noted the statement of income and expenditure for 2019/20 and estimated end of year financial position.</p> <p>5.3 The Board noted that some adjustments to the budget might be needed to take account of the impact of Covid-19 on HWK work.</p>	
<p>6</p>	<p>Activity Report (SB)</p> <p><u>6.1 HWK Priority Work Areas</u></p> <p>It was noted that HWK have switched from 5 priority work areas to 7 priority work areas in 2020/21. Now that the Making Safeguarding Personal (MSP) pilot (2020/21) is active, safeguarding has been lifted out of Community Care, into its own priority area. The MSP pilot is aiming to ‘go live’ this</p>	

	<p>Autumn (proposed September). In response to COVID-19, HWK has created a 7th priority work area that will focus on capturing experiences of residents during COVID-19.</p> <p><u>6.2 Mental Health</u> iCope Report - Delivery plan identifies deadline for report - supposed to go to iCope end of this month/beginning next month. Aiming to publish end of September.</p> <p><u>6.3 Changes requested to Activity Report</u> 1d - missed 1e - no implications for our priorities - waiting on how to get to Korean community 2b. more and more overlap will be engaging and supporting learning and disability task group to support work 2c. Agreed to focus on 2 workstreams - communications and health and wellbeing group - progress been made on those 2 areas. Next meeting will identify priorities moving forward. 4b. Making Safeguarding Personal Pilot - looked at what would be feasible with RBK on how to get this project off the ground.</p>	<p>6.2 KC</p> <p>6.3 SB/ JHO</p>
<p>7</p>	<p>Delivery Plan 2020-21 (SB)</p> <p>7.1 First tab outlines detail of what delivery plan is and 2nd tab has key dates for board.</p> <p>7.2 Board requested the delivery plan be part of HWK business continuity plans.</p> <p>7.3 NS Q - Delivery plan very useful in terms of timescales and what potential pinchpoints are. On reporting to Company's House - would it be possible to agree this at Sept Board meeting, not November? It would put us under less pressure. SB agreed to try. It would also be better worded as "Annual Report to Companies House" as it must include the short report on our work as well as the accounts. SB to write an executive report for Board review and approval.</p> <p>7.4 GS - really helpful as a reference when you're going to be busy and staff team are on holiday.</p> <p>7.5 NS requested that "Board/Volunteer Recruitment" be expanded to say "Board/Task Group Chair/Volunteer Recruitment".</p> <p>7.6 The Board thanked SB and noted the Delivery Plan.</p>	<p>7.2 SB</p> <p>7.3 SB</p> <p>7.5 SB</p>

8	<p>8.1 Potential survey on capturing experiences of Care Home residents, families and friends during COVID-19. NS, LM and SB provided a summary of discussions to date. NS - Community Care task group had identified issues around care homes - topic that Community Care Task Group is interested to explore. SB explained the work will be delivered through HWK priority 7. 'Response to coronavirus: Continue to gather views and experiences of NHS and social care services during and after the coronavirus pandemic, to ensure commissioners, providers and other system leaders respond appropriately to the health and care needs of local people'. So this work will involve the whole staff team and the CCTG will act as an advisory group.</p> <p>8.2 SB is in discussion with SWL HW colleagues and HW England to explore interest in partnership working on this area of work.</p> <p>8.3 Pending a successful completion of the HWK prioritisation process, the board agreed this project.</p>	8.1 All staff
9	<p>AOB</p> <p>9.1 SB - following up response from Ian Kent regarding EUPD services.</p>	9.1 SB
10	<p>Re-confirmation of dates/times for quarterly meetings: (5 min)</p> <ul style="list-style-type: none"> • Wednesday, 30 September 2020, 5-8pm • Tuesday, 24 November 2020, 5-8pm • January 2021 and March 2021 - dates to be set 	
11	Close of PART A	

Signed:

Liz Meerabeau, Chair HWK

Approval Date: