



## HWS Advisory Board Meeting Minutes

**Date:** 20<sup>th</sup> November 2025

**Time:** 5.30-7pm

**Venue:** Microsoft teams

**In Attendance:** Graham Head (GJH), Rhyana Ebanks-Babb (REB), Anood Al-Samerai (AAS), Natasha Wright (NW), Sheona St Hilaire (SH), Mannah Kargbo (MK), Carol Vincent (CV), Charlene Young (CY).

**HWS Advisory Board Members:** Graham Head, Natasha Wright, Carol Vincent, Mannah Kargbo, Sheona St Hilaire, Charlene Young

**HWS/ CS Staff:** Rhyana Ebanks-Babb, Anood Al-Samerai

**Apologies/Absent:** Hyacinth Chapman (HC), Cedric Whilby (CW)

	Agenda Items		
1.	<b>Introductions and apologies</b>  The Board discussed apologies and attendance. The Board have not heard from HC. At the time of the meeting, REB did not see the apologies sent by CW		
2.	<b>Confirm minutes, review of actions</b>  Minutes reviewed and confirmed, action log reviewed Action log from Board meeting on 21 <sup>st</sup> August 2025		
	Send the HWS Annual report along with minutes	REB	Completed
	Share national petition regarding the concerns of losing independent patient voice	REB	Completed
	Send out request for a working group to shape local campaigning messaging	REB	Completed
	Share information about Samaritans for REB to share with Healthwatch national working group	NW	Completed

	Circulate method of applying for vice chair role	GJH	Completed
	Share HWS transition proposal and gather board members input	REB	Completed
	Resend away day (Sep 12) invite to Graham & Natasha; add venue details	AAS	Completed
	Forward NHS info to be included in newsletter/Ambassador Network	CV	Outstanding
3.	<b>Conflicts of Interest</b>		
	No conflicts declared		
4.	<b>Q2 monitoring</b>  REB provided a summary of HWS activities in Q2, including attending 15 events, collecting 51 pieces of feedback, and collaborating with ambassadors on 3 events. Key themes from the feedback included complaints, access/rights, appointments, vaccine hesitancy, and financial/food insecurity.  The team continued work on priority projects like temporary accommodation and enter and view preparation, and raised concerns/community voice/awareness through 49 stakeholder meetings  The Board expressed their gratitude despite the challenges faced and asked for REB to thank staff for their hard work over the last quarter.		
5.	<b>Project updates</b>  <u>Temporary accommodation</u> REB provided an update on the stage where we are at with this project focusing on the health impacts post move on from home office accommodation has on refugees and asylum seekers.  REB noted that we have completed 4 out of 5 workshops, currently scheduling staff interviews and have a few presentations upcoming to share the work/gain interest in interviews with staff working in Temporary accommodation who support these communities.  REB noted that due to the emotional impact, wellbeing sessions are being planned for all staff involved, from a trauma-informed approach to wellbeing. The Board expressed their support with this decision.  <u>Enter and View</u>		

	<p>REB provided an update on the Entering View project, noting progress on training volunteers and establishing a steering group, but challenges in coordinating shadowing opportunities with other Healthwatch organisations due to capacity constraints and safety/dignity arrangements already in place with their providers and service users.</p> <p>REB noted a concern raised by a commissioner around the scope of the Enter and View, the Board agreed that this appeared to present itself as attempts to steer the focus away from the full Resource Centre and focus on areas considered as performing well.</p> <p>REB stated that an updated version of the terms of reference have been shared to reflect some of the feedback, however due to confusion of what services run out of the resource centre, changing the whole scope to solely focus on the hubs being counter-productive.</p> <p>The Board stated that we should stick to our plan, where the hubs can be considered as a starting point. The Board offered any support needed to challenge if required.</p>
6.	<p><b>Future Healthwatch</b></p> <p>i. <u>CS Health strategy subgroup</u>  AAS shared details on Community Southwark's strategy review, which aims to put health equity at the centre of their health team's work. This includes building on Healthwatch's community connections, advocating for community-led approaches, and addressing structural racism. They are also exploring funding opportunities to support this work.</p> <p>AAS informed the Board that Southwark Council is offering a grant to Community Southwark to continue Healthwatch functions as the contract has been extended for six months and further funding has not been agreed yet due to lack of clarity about closure timescales.</p> <p>ii. <u>Involvement in Integrated Neighbourhood Teams (INTs) proposal for VCS engagement</u>  AAS provided an update on a number of proposals submitted to fund our involvement in health work across the borough (e.g VCS involvement integrated neighbourhood, representation on Integrator Delivery Boards and committees).</p> <p>AAS informed the Board of a VCS strategic lead role being advertised by the INT integrator for Southwark (GSTT and GP federations). This aligns with the shift REB has applied for the role and interview is confirmed.</p> <p>iii. <u>Updates on 3 shifts</u>  REB and GJH provided details on a discussion with HWE London manager and how HWS are supporting ICB planning with INT as this is of most priority</p> <p>iv. <u>Pan-London HW Chairs meeting</u></p>

	<p>GJH provided an update on the recent meeting and agreed to distribute the London chairs letter and ICB co-production guidance</p> <p>GJH provided an update on the national situation, noting that the closure of Healthwatch will likely be delayed until spring 2027 due to the parliamentary process. Healthwatch England and local Healthwatch are working to advocate for continued patient engagement capabilities, even if Healthwatch is disbanded. Southwark is exploring options to continue Healthwatch functions through Community Southwark.</p> <p>v. <u>Ambassadors Programme proposal for Public Health will address the contract's March end date.</u></p> <p>AAS provided an update on proposal sent to PH colleagues and informed the Board that CS will put in a bid for the contract once it has been published.</p>
7.	<p><b>Campaigning sub-group updates</b></p> <p>REB summarised the local and national campaigning 2 pager detailing the efforts to advocate for the continuation of Healthwatch, including the petition, engagement with MPs, and Healthwatch England's interactions with the Department of Health.</p> <p>GJH added the constraints Healthwatch England staff faces as civil servants in opposing the government's decision. A further update will be provided in January from DHSE.</p> <p>The next HWS campaign working group will be held on 26.11.25 and an update on next steps will be provided at the next Board meeting</p>
8.	<p>AOB</p> <p>REB thanked the board for their contributions and support, and wished everyone a happy and restful holiday season.</p>

#### Action log:

Action	Owner	Status/update
Send proposal presentation, strategy slides and detailed strategy document to the Board	AAS	
Send Kings Fund and Healthwatch England project page to the Board: <a href="#">Learning From Healthwatch   The King's Fund</a>	REB	Complete
Send London chairs letter and ICB co-production guidance to the Board	GJH	Complete

Provide an update to the Board from the meeting with DHSC on 27.01.26	REB	
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**Next HWS Advisory Board Meeting - Thursday 19<sup>th</sup> February 2026**