Healthwatch Southwark Advisory Board Meeting

Date: 19/05/2022, Time: 5:30pm- 7.20pm

Location: Zoom

In Attendance:

HWS Advisory Board Members: Sheona St Hilaire (Chair), Graham Head (Deputy Chair), Jonny McDaniell, Chinelo Njaka

HWS/ CS Staff: Shamsur Choudhury (HWS Manager), Megan Isherwood (Research and Projects Officer)

Apologies: Lisa Mitchell, Mannah Kargbo, Chris Mikata Pralat; Chris Henry; Robert Ede; Mannah Kargbo

	Agenda Items	Time	Lead
1.	Welcome and Introductions (Board Members attendance)	5.30 - 5.35	Sheona / All members
2.	Review minutes of 17th March 2022 meeting (see attached)	5.35 - 5.45	Sheona / All members
3.	HWS Priorities 22-23	5.45 – 6.05	Megan Isher-wood
4.	Decision Making / Safeguarding Policy	6.05 – 6.20	Sheona
5.	HWE Quality Framework Working Group Up-date	6.20 – 6.30	Chris/ Graham/ Sheona
6.	AGM Process: Discussion	6.30 – 6.45	ALL
7.	AOB: • Members question on Council Q4 Moni-toring Report (see attached) • HWS AB Representation/ HWS Meeting Updates: • AB ratify Sheona and Graham post	6.45 - 7.00	All

Notes of Meeting

Welcome and Introductions (Agenda Item 1)

- The meeting was chaired by Sheona St Hilaire.

- Mannah, Chris Henry and Robert sent their apologies for not being able to attend today's meeting.

- Lisa Mitchell has not attended last 3 meetings in succession. Shamsur and Sheona have reached out to her but have not any success in getting a

response. It was suggested that Lisa's membership to the Board be suspended in the interim whilst we retry to engage with Lisa to review if she is happy to be involved. Shamsur will try to call Lisa and check if she is okay. (Action)

Review of Minutes from 6ᵗʰ January 2022 (Agenda Item 2)

All member's agreed minutes are accurate, and no additional amendments are required.

Follow up actions from minutes (Shamsur):

- Resend 'list of meetings' stating which meetings members can attend.
- Shamsur mentioned that we are not able to actively promote HWS at the new offices, he mentioned currently only an A-Board outside the office is feasible- it was requested that shamsur email members to say what are the current options to promote HWS at the new office. It was suggested that this discussion be taken up with the new CEO of CS.
- Add previous minutes to the website and update new meeting dates for the year.

Discussion around how to host meetings in the future: (**Ongoing Review**)

- Majority of Board members mentioned that they still preferred to meet online for the foreseeable future (due to health issues/ covid/ work commitment).
- Members agreed that the format for hosting meetings should be reviewed at every meeting and a decision will be made about how to progress with the next meeting.
- It was agreed that future meetings should start at 5.30pm to accommodate board members attending meetings coming from work.
- Possibly look at Hybrid options.

HWS Priorities 22-23 (Agenda Item 3) Megan Isherwood - HWS Research and Projects Officer

Megan presented the HWS priorities for 22-23, which covered background, methods, findings, recommendations – to view the presentation please click here.

Megan also sent a draft 'Priorities Report' on the 17ᵗʰ May, which has detailed information that was covered in the presentation. This report was sent to inform the discussion at this meeting and agree priorities for 22-23.

Members Feedback

- The Board members thanked Megan for a thorough report, it was acknowledged that a lot of work had gone into compiling the priorities report.
- It was agreed that 2 priorities should be chosen for the next year, as we there are still priorities outstanding to be completed from last year.
- The main priorities as suggested by people engaged in the priorities work are very similar to last year (i.e Mental Health, GP Access should be main priorities). However, majority of the suggested priorities for this year, have already

been priorities in the last year, therefore it was suggested that we do not focus ion them again. But it was suggested in relation to last year's priorities that we could provide a snapshot of what has changed as a result of the work and what is outstanding and still key issues.

The following priorities were discussed in depth as potential priorities for next year:

- Communication/access
- Multiple deprivation
- Multiple long-term condition

However, a decision could not be made about which priorities to choose, so it was suggested that we should organise a separate meeting to discuss the priorities in more depth and can make an informed decision. It was suggested that all members should read the draft priorities report sent so they are more informed of key issues and background information.

Megan was requested to organise a separate meeting and this meeting needs to take place before 16th June, as we need to publish our annual report by 30th June (which needs to have our priorities for next year). (Action)

Decision Making / Safeguarding Policy (Agenda Item 4)

Safeguarding Policy

The discussion was around DBS checks:

It was confirmed that under Community Southwark Safeguarding Policy only Enter and View Representatives are required to undertake DBS check, as per DBS regulation no other roles (staff or volunteer) requires DBS checks unless staff/volunteers are undertaking DBS regulated activity.

Reference below from CS Safeguarding Policy:

5.2. DBS Checks

The level of DBS disclosure (Basic, Standard or Enhanced) is dependent on the nature of the role and the level of contact with children, young people and adult at risks in line with regulations.

Anyone is eligible for a basic check. However, only those undertaking regulated activities are allowed to have Standard and Enhanced DBS checks conducted on them. It is against the law to DBS check someone whose role is not a regulated activity. The definitions are available under: https://www.gov.uk/government/collections/dbs-eligibility-guidance The eligibility tool, which helps determine what is a regulated activity is available under https://www.gov.uk/find-out-dbs-check/y

The responsibility for ensuring that this takes place lies with the relevant managers. The checks will be conducted by the HR and Office Manager. Currently, the following CS roles have been identified as falling within DBS regulated activity:

• All CS staff conducting 'Enter and View' activities on behalf of Healthwatch Southwark (enhanced check without a barred list)

Feedback:

- It was suggested our current activities (working with young people, engagement with vulnerable individuals in the community) is a risk, as we don't have capacity to know if staff/volunteers undertaking such roles are able to undertake role from a safeguarding perspective. Also, staff/ volunteers not having DBS checks can also be limiting to fulfilling work roles, as some settings require that all visitors are DBS checked prior to entering their premises.

- It was suggested the above concern be raised in the Risk Register as a high-risk issue.

HWS Decision Making Policy

- The Healthwatch England Decision making policy was circulated to members to review for discussion.
- It was agreed that we adopt the Healthwatch England Template as our Decision-Making Policy. Shamsur mentioned that this is what he has done already and will send a copy with minutes (Action)
- The chair mentioned that there is an 'Easy Read' version of the 'Healthwatch England Decision Making Policy Template' and we should also use this and also publish on our website. (Action)
- Shamsur mentioned that there needs to be 'decision making policy' between the Host and HWS Advisory Board, he mentioned Healthwatch England encouraged this practice, as it provides clarity on roles and responsibilities. He suggests that these discussions take place with the new CEO and CS Board members.
- The final ''decision-making policy' should also be made available to Community Southwark Board members. (Action)

HWE Quality Framework Working Group Update (Agenda Item 5)

- The working group (Chris H, Sheona, Graham, Jonny, Shamsur) have met twice since last Board meeting and covered the following domains: Leadership & decision making, and People.
- Working Group looking to finish the Quality Outcome Framework at the end of calendar year (December) to send to Healthwatch England.
- Next meeting will take place 22nd June and will cover the domain 'sustainability and resilience'.

AGM Process: Discussion (Agenda Item 6)

It was agreed that we will the hold AGM in September 2022.

It was agreed that the AGM will be a in-person event, with Hybrid access for people that are not able to attend.

Shamsur suggested that AGM will be a good opportunity to organise a community event. And as part of the community event, the AGM can be the central focus- this will encourage more people to attend and take part.

Sheona presented the following draft agenda Items for AGM:

- Introduction and Apologies, declarations of interests
- Introduction includes 5 minutes on the role of Healthwatch
- Volunteer voice experience
- Presentation (5 minutes each):
     -Highlighting achievements
     - HWS - Our impact
     -HWS - Agreed Priorities

- Stakeholder feedback on the benefits of HWS input e.g., SLAM
- Presentation of Healthwatch Southwark Annual Report
- Questions from the public to be held at the end and AOB
- Chairs closing remarks

It was agreed that we will organise a small working group meeting to plan the AGM and review/agree agenda. (Action, July)

AOB (Agenda Item 7)

Members question on Council Q4 monitoring Report

- There were no questions around this agenda item.

HWS Members Representation

Southeast London Patient Group – Graham Head (HWS AB Vice Chair) represents HWS at this group and gave the following feedback on his involvement/engagement with the Southeast London Patient Group and Data Usage Committee: He provided the following information in an email prior to the meeting:

SEL Data Usage Committee

1. This group met on the 17th May. There were no applications for data access to consider. The meeting consisted of (i) discussions of some of the contract, infrastructure, data flow, and technical aspects of the SEL Discovery Data Store, and anticipated proposed changes, and a developing strategy to attempt to construct a combined health data source covering all of London; and (ii) consideration of the changes to the information governance and data protection rules, given that the Covid rules that allowed some forms of access no

longer apply, and that SEL CCG has been disbanded, and the ICB established.

2. In addition, we agreed that information regarding all agreed data flows would be made public via the relevant Web site (details to follow). The group also agreed to my proposal that in the future we would seek a plain language, layman's description for each request for data, alongside the usual technical, security and information governance sections. I hope these descriptions will also appear on the Website in due course.

SEL Patient Group (Also sometimes called 'SEL Healthwatch')

A 'Task and Finish' Review and Development Group meeting was held on 18th May. Given the implementation of the ICB, and their draft engagement plans, this group was called to consider the role and purpose of the pan-SEL patient group. This will be a process of co-creation of new Terms of Reference for the group.

The discussion was rich and complex, but I think a few themes arose.

1. The ICB was focused on system-wide engagement issues currently, and there was less of a sense of focused engagement at the local or borough level (although this may change).
2. The chair of the SEL Patient Group is funded by the ICB, but it must not be seen as an ICB organisation. Rather it should be empowered to challenge (as a 'critical friend') the ICB and help hold them to account.
3. It must be additional to the Borough Healthwatches and NOT duplicate their responsibilities and work.
4. There was a role for helping with coordination between the six local Healthwatches, and for helping to present common concerns to the ICB.
5. There was also a need to reach across to the other local Integrated Care Systems, and their patient groups, as part of developing best practice (also, there are common services - eg Guys & St Thomas's sees a lot of patients from North of the river - and wider afield).
6. As this was a new departure, there might be an opportunity to acquire additional external support as the group bedded in.
7. The officers and staff from the six local Healthwatch groups already collaborate closely, and we need to develop this wherever possible.
8. There were differences between the hosted and independent HW groups, and their freedom to act, which would need to be recognised.
9. This was a first discussion - further meetings will occur. The group would also welcome comments from the local Advisory Boards and other HW governance groups in the six boroughs.

AB to ratify Sheona and Graham post

This agenda item was not discussed at the meeting today as there were not enough members in presence to ratify the chair and vice chair, this is deferred to the next meeting. (Action)

Other Items Discussed:

- Community Southwark are organising a community fun day on 17th June (11 Market Place), the chair requested the Advisory Board members to attend to meet CS board members and the new CEO of CS, an event link will be sent by Shamsur (Action)

- On the 30th August, Community Southwark have organised an Away Day, and they have invited HWS Advisory Board members to attend the meeting and meet CS Board members. The chair encouraged members to attend. (Action: Shamsur to send calendar invite)

- Shamsur suggested that he would like to organise a social for AB members, it was suggested that this social can take place on 30th August.

- The chair mentioned that she has sent all AB members Healthwatch England Training links, she encouraged all to undertake relevant training

Future HWS Board meeting Dates:

- **4th August 2022**
- **10th November 2022**
- **9th February 2023**