

**Minutes of the Meeting of Health Watch West Berkshire Board on 06 March 2018- 13:30pm**

**Thatcham Memorial Hall, Bath Rd, Thatcham RG18 3AG**

Present	Andrew Sharp Alison Foster Martha Vickers Mike Fereday Chris Noble Ann Standen Judy McCulloch Karen Swaffield Steve Masters Alice Kunjappy Clifton Nathan Pope	Chief Officer, Healthwatch West Berkshire (HWWB) Chair, HWWB Board Member Board Member Board Member, seAp Representative Board Member, seAp Representative Board Member Board Member Development Officer, Healthwatch West Berkshire Development Officer, Healthwatch West Berkshire Digital & Social Media Officer	AS AF MV MF CN ASt JM KS SM AKC NP
	Michelle Paice	Admin & Information Officer, HWWB	MP

Item No.	Agenda Item	Action
1.	<b>Welcome and Introductions</b> AF started the meeting and thanked everyone for coming. Each Board member introduced themselves to the meeting.	<b>AF</b>
2.	<b>Apologies for Absence</b> ZT has sent her apologies. Alison welcomed Judy to the board. Judy gave an explanation of her background and what her experiences lie in.	<b>AF/AS</b>
3.	<b>Declarations of Interest</b> AS – declared that he is Chair of West Berks Rapid Response Cars. MV – declared she is a councillor with Newbury Town Council. KS – declared she is a member of NHS England Improvement Patient Safety, Thames Valley and Milton Keynes Patient Experience Oversight Group, Respect Steering Committee.	
4.a	<b>Minutes of the meeting held 4 December 2017</b>  The Board reviewed the minutes and approved, AF signed the minutes of the last meeting.	
4.b	<b>Matters Arising and Actions from that meeting</b> AS went through the action log and explained the actions outstanding and what plans are in place to address the outstanding items. AS and MV work on maternity ongoing.  Thanks to KS and MF for attending many meetings, still need to ascertain areas for the board – ongoing. ZT – ongoing AS spoke to ZT – other members might want to get involved.	<b>AS/MV</b>     <b>AS/MP</b>

	<p>AF to write to the CCG          Discussing vice chair in the meeting          No questions from the board</p>	
<p>5.</p>	<p><b>Report of the HWWB Chief Officer</b></p> <p>AS thanked the public for coming, also thanked the Board and staff of HWWB.</p> <p>AS stated that it had been very busy since December. AS told the board that the volunteer contribution is essential and cannot be underestimated, and the Prospect Park Enter and View couldn't have been done without the volunteers. HWWB supplied more volunteers than any other of the local Healthwatch's taking part. AS explained that the launch of the report hadn't been as co-ordinated as HWWB had helped. AS said that there might be an opportunity to revisit other wards. AS told the board that HWWB should be delighted with the Prospect Park report. AF asked if there had been any response to the report, AS said he hadn't seen any, but that could be because of the way it have been launched, in relative isolation.</p> <p>Thinking Together – very busy          Thanks to all the volunteers - 49 service users attended – everyone seemed to get something from it. Thanks to Judy for putting together the brilliant report which captured what people were saying. This was circulated to all of the MHAG(Mental Health Action Group) .- AS has stood down as the Chair of the MHAG and Matthew Braovac has stepped up as independent Chair. The whole change in focus for Mental Health services has been partially driven by previous Thinking Together events and the feedback from them. This has resulted with a new structure of service user feedback in West Berkshire with the Mental Health Forum and Thinking Together feeding into MHAG, which then feeds into the West Berkshire Health and Wellbeing Board. The news about Mental Health becoming one of the two priorities of the Health and Well Being Board in 2018/19 is almost certainly connected to the increase in profile caused by both Thinking Together and campaigns such as Brighter Berkshire's year of Mental Health and the work of voluntary groups like Eight Bells/Open for Hope/Recovery in Mind. AS is also now Chairing the Mental Health Forum also.</p> <p>Our Rough Sleepers and Homeless Experience Report – came out last week. Thanks to everyone who got involved and took part, local organisations and board members. Hope is the recommendations will get looked at properly and followed up with action. AS – It came out at the right time with the severe Winter weather and other news issues keeping it front of mind. Shows Newbury is worse than other local areas for Rough Sleeper rate e and lacking in services provided elsewhere in Berkshire such as Health Outreach.          Newbury Soup kitchen will have SeAp advocacy working with them– she goes in and talks to the people. She has visited twice.          AS explained that HWWB have had staff challenges so thanks to everyone who has helped. We need to look at how we report, not to be too ambitious with deadlines with such a small team.</p> <p>HWWB contract due to expire in March 2018 been extended to September 2018, and thanks to people for filling in the survey that West Berkshire Council had circulated.</p> <p>MV asked that if another Enter and View is done at Prospect Park, will HWWB do it alone or do HWWB join with partners again.</p>	<p>AF/AS</p>

	<p>AF said the problems were with the launch in isolation, issue around logos and also copywrite issues. AF has emailed the chair. AF spoke to Wokingham Healthwatch and they felt the same way as HWWB.</p>	
6.	<p><b>Appointing a Vice Chair</b>  MV nominated MF seconded by AS and everyone else.  MF accepted is now Vice Chair.</p>	
7.	<p><b>Roles and Responsibilities – Healthwatch Board</b></p> <p>AS explained the key learning from the Rough Sleeper report is more time was needed and the Board should have had it earlier. Attending meetings is important but the Board need to look at who is the best person to attend and they need to be going continuously. Possibly two members in case someone is sick or has to attend another meeting.</p> <p>JM -suggested an action would be to produce a list of meetings that HWWB are involved in and attend and circulate to the board, so that they can choose which meetings fit their experience.</p> <p>AF asked even though it falls on Board members to attend the meeting, could the volunteers with some training attend these meetings as well. AS explained that HWWB would need to exercise caution with the type of meetings as there has been a bad experience with a previous volunteer with confidential information. AS explained that seAp have training for their volunteers which they have to abide by the confidentiality. Could it be part of the induction for HWWB. KS look at the gaps and see if they can be filled.</p>	AS/MP
8.	<p><b>Consent Form, Policy Updates</b></p> <p>AS showed the Board a copy of the current consent form for people making enquiries, giving feedback, as used in the Rough Sleepers report. AS asked the Board to have a look and check that they are happy. WBC are happy to accept it, RBH are happy to accept. NHS England won't accept it. AS has picked this up with seAp and PHSO and is waiting for an answer to whether this is an acceptable form. KS will take it to a NHS meeting tomorrow. CN has asked that HWWB keep it under review due to GDPR.</p> <p>CN told the board that HWWB need to show that they are working towards it GDPR compliance.</p> <p>JM asked how often do HWWB use this form AS answered a fair amount, NHS ask for consent to discuss, it's difficult to do something with the feedback if there isn't consent. MF commented that It's a very generic form doesn't state what they are consenting to. AKC answered it is about getting the feedback from the public and they give us consent to approach the organisation that it's about. HW England don't have a standard consent form. AS said that HWWB use the consent form about 90% of the time, if they want HWWB to do something they have to fill in a form. AS asked if there is a consent form for volunteers AS answered yes there is. CN asked that HWWB do the policies one at a time so the board isn't flooded with requests. KS asked are we pre-empting this, shouldn't we wait for others Healthwatch's. AS explained it's about updating them, there are about 15 policies. JM asked whether the board members could partner with different members, like a working group for each policy.</p>	

<p><b>9.</b></p>	<p><b>Contact &amp; Issues Report</b></p> <ul style="list-style-type: none"> <li>- <b>Prospect Park</b></li> <li>- <b>Newbury College Student placements</b></li> </ul> <p>AS explained that Prospect Park had been covered already. AF feels that HWWB need a response from the hospital. MV said she would do a follow up visit to check. MF explained that there was some of the responses in the report from the hospital.</p> <p>Action – add another stage to the enter and view report. KS asked what are the legal guidelines. Enter and View guidelines are quite vague. JM couldn't see why HWWB can't add an extra process to look at the issues. AS to ask HW England whether we can add an extra step to enter and view, a follow up review in three months.</p> <p>AKC spoke to the board about the student placements. Solasha had done a (report) on SADS (Sudden Adult Death Syndrome) Heather had looked at Diabetes support group, she had made a business card for the them to carry in their pockets. The presentations went well. Gave great feedback about HWWB. Newbury college have agreed to extend the placements. AS explained there could be opportunities for them to volunteer as HW Youth. AKS explained a student from St Barts keen to volunteer and Young Carers group are keen to work with HWWB. Thanks to Alice for her update.</p>	<p><b>AS/ALL</b> <b>AS</b></p>
<p><b>11.</b></p>	<p><b>Thinking Together Event</b></p> <p>Thinking Together – Originally held in Newbury. It was a standalone event to help the WBC to explain what they would be doing in in changing how Community Mental Health was structured with BHFT.</p> <p>Health and Well Being board has changed their strategy on mental health. MHAG charged with getting things done over a shorter time period and reporting directly to the H&amp;WBB. Mental Health Forum – formal meeting now reports into MHAG. Thinking Together sits in between. Issues with Crisis reaction has kept coming up in the Thinking Together events and from other groups also. BHFT (Berkshire Healthcare Foundation Trust) had conducted an Internal Crisis review – but it didn't seem to be an inclusive outward facing review. Last Thinking Together event and MHAG suggested the theme should therefore cover – Co-produced Review of crisis and what it means as part of the priorities MHAG is working towards. Brings together the professionals with the service users and service user support group – looks at the service and also preventative measures. A Range of things for people can turn into crisis.</p> <p>Last Thinking Together event – 7 tables looked at the previous events. Updates will be given and what has changed. Clear responses back to service users, what's been made and/or why it hasn't been made. Prioritising the issues.</p> <p>KS – crisis for people is personal for the professionals it's about money and funding. JM- wider impact of crisis particularly on families, came across quite strongly at the meeting. MV – are the same people coming to the same event? AF- yes many of the same people do come - 12 people have registered so far. HWWB do advertise on both Social media, in the paper and GP surgeries. Crisis team will be attending the Thinking Together event. Ambulance service and the Police. JM – add them to their rolling screens (surgeries) - it's difficult. KS – observations / concern, Thinking Together could very easily become a support group for mental health patients – could it be run by a group eventually and then Healthwatch would be invited to it rather than as currently</p>	

	<p>with managing it. AF – there was no support though for the Thinking Together events at the moment HWWB is doing it all.</p> <p>Eight Bells is a very good example. Gain the support they need to deliver. Facilitate a steering group or forum and HWWB would help. AF – bid for a community engagement program. Bracknell has something in place for Learning disability group and Mental health group.</p> <p>SM – Chair of trustee for Eight Bells – model of what can be achieved. Very much user led. The board are there as a statutory requirement. Ray and his group do a great job of running it day to day. No funding. They try and fundraise to raise money. You need the engagement of the members and service users.</p> <p>AS – The Good Exchange – possible funding</p> <p>KS – ask Eight Bells and Open Hope what HWWB can do.</p> <p>Public discussion</p> <p>Thinking Together – have we moved from mental health, could it cover other areas to.</p> <p>HWWB link into the groups</p> <p>HWWB should be handing it over, it shouldn't be down to HWWB – currently we are facilitating it running it and managing it.</p> <p><b>Action – REVIEW Thinking Together, leadership who leads it and who runs it.</b></p>	<p><b>ALL</b></p> <p><b>AF/AS/ALL</b></p>
<p><b>12.</b></p>	<p><b>Homelessness</b></p> <p>The Rough Sleeper and Homeless Report was written by all the team but led by SM who is a new member of staff. He compiled the research already done and included new information that had come to light while the report was being written. HWWB spoke to 14 of the rough sleepers. The reasons HWWB did it was due to the rising incidents of rough sleepers in, Newbury, Thatcham tents could be seen everywhere. Lack of access to GP's, dentists had been highlighted. HWWB used a survey and it was clear from the research and feedback there were short comings in what services should be doing. Rough sleepers are a hard group to engage with. The report was written in a neutral manner. Loose ends, West Berkshire Homeless shelter – support network is out there, but voluntary groups can only do so much. The findings showed that they were a large number concerned about the hostel at Two Saints 93% would prefer to sleep rough then go into the hostel . West Berkshire is an outlier, very wealthy and prosperous. Over 50% higher than the national average for Rough Sleeping even based on the West Berkshire Council numbers which HWWB believe are severely understated. WBC said 20 rough sleepers, the report found there were a larger group. More than 40 could be named.</p> <p>Where do we go – executive summary report – extensive recommendations. NHS doesn't currently categorise rough sleepers as vulnerable.</p> <p>Thanks to SM for the report and the whole team at HWWB.</p> <p>AF said that the push back on publishing the report shows how important it is.</p>	
<p><b>14.</b></p>	<p><b>Research and Community Engagement Programme (CEP) Update</b></p> <p>CEP Update – waiting on a report from the family centre.</p>	<p><b>AKC</b></p>
<p><b>15.</b></p>	<p><b>Community Engagement / Volunteer Update including Social Media report</b></p> <p>HWWB are now engaging with Berkshire Vision.</p> <p>Inclusive service – Berkshire Foundation Trust – met the lead for the deaf community engaging with them. Travellers community, Refugee community, Black and Ethnic</p>	

	<p>minority group. Engaging with Reading Maternity Voices they cover West Berkshire wide. Young Carers support the parents. Child Mental health week – dementia alliance, survey has finished and thanks for completing it. Engaging with the homeless (Eight Bells, Loose Ends, Newbury Soup Kitchen). Walk and Talk in West Berkshire. End of life management. Training – safe guarding, mental health training, first aid training for volunteers, enter and view, GDPR training.</p>	
16.	<p><b>Strategic Transformation Plan (STP) Accountable Care System (ACS)</b></p> <p>STP – agreed with Reading and Wokingham will share and officer paid for by the CCG. Start to April 1st. ACS check they are legal?  Action – Next meeting – ACS report to be circulated to the board members.  Action - The board to have a separate meeting/discussion around ACS. Some HW have held ACS events.  JM- Kingsland document about ACS</p>	
17.	<p><b>West Berkshire Health &amp; Wellbeing Board update</b></p> <p>Special Health and Well Being Board with Richard Benyon MP present was a public meeting, but they didn't take questions.</p> <p>Action: For the next meeting could HWWB submit questions? advertise on social media for last day for questions.</p>	MP/NP
18.	<p><b>Reports Policy</b>  Covered previously</p>	
19.	<p><b>Healthwatch after 2018 – Sustainability</b>  Covered previously</p>	
19.	<p><b>HWWB Board Meeting Locations &amp; Structure</b></p> <p>The next meeting to be held in Lambourn. Advertise the public to contact HWWB for support with travel if needed.  Action – to add a section to the agenda to talk about something specific to the residents of the area (cross border issues) particularly in Lambourn – 20 minutes discussion.</p>	AF/AS
20.	<p><b>Questions from the public/audience</b></p> <p>'Over the past year or so Healthwatch West Berkshire has run several well attended Thinking Together events, with another planned for later this month. What concrete and quantifiable outcomes have resulted from these events?'</p> <p>The member of public who had asked the question had left the meeting by this point. The board agreed that the question had previously been answered in Thinking Together.</p>	
	<p><b>AOB</b></p> <p>KS has found an LGBT volunteer who is interested. KS – to give them AF information.</p>	
21.	<p><b>Thanks to everyone for coming. Meeting closed at 4.03pm</b></p>	