

Healthwatch Board Meeting

26th March 2018, 6-7pm

Present:

Daniel Singleton (DS), Interim Chair
Robert Caldeira (RC), Board member
Naomi Cranmer (NC), Board member
Barbara Sawyer (BS), Board member
Val Shaw (VS), Board member

Also present:

Elspeth Paisley (EP), Manager Healthwatch Barking & Dagenham
Manisha Modhvardia (MM), Healthwatch Barking & Dagenham staff member

Apologies:

Richard Vann (RV), Healthwatch Barking & Dagenham staff member
Zahra Ibrahim (ZI), Board member

Agenda:

<p>1) Welcome & introductions</p> <ul style="list-style-type: none">• Daniel introduced Elspeth as Manager;• Apologies from Richard who will be absent for a period of time following a car accident.• Apologies from Zahra• Minutes from last meeting agreed	
<p>2) Workplan 18/19</p> <p>EP gave a brief on suggestions for the work plan 2018/19:</p> <p>Raise the profile of Healthwatch</p> <ul style="list-style-type: none">• The team will undertake weekly engagement events, either our own or attend other events.• The aim is to cover every ward across B&D. Venues will be informed by the annual survey.• The council would like Healthwatch to particularly focus on three different areas in the borough, Marks Gate, Scrattons and Riverside. <p>Promotional Film</p> <p>The aim of the film will be to help raise awareness of Healthwatch. There will be two films, which will be 1 minute clips. Designed to be shared on social media and the website. We also want to showcase it on the one borough website.</p> <p>Media presence</p> <p>We want to feature what we do and the outcomes using the local press.</p> <p>Mental Health</p> <ul style="list-style-type: none">• This is a priority for Healthwatch England. Mental health is a big area and the board were asked to explore this area so the work can be focused on some aspect or one age group. HW England were keen on the social prescribing, social isolation aspect of	

<p>mental health.</p> <ul style="list-style-type: none"> • The local JSNA looked at maternal health and carers of older people. • There is also mental health amongst the youth. • NC suggested using the HUB <p>The Board felt this area would be of significance and should be taken forward. It was agreed that the team would feedback once the area is decided.</p> <p>GP Appointments and access</p> <ul style="list-style-type: none"> • Through engagement with the public it came to light that there are issues with GP appointments and access. • The idea is to work with GPs and patients, exploring the reasons behind the issue highlighted and aim to improve services. • The issues will also be raised commissioners and providers and the Health and Wellbeing Board. <p>The Board were keen to look into inappropriate use of GP appointments too.</p> <p>The Board agreed with the areas of the work plan. It was agreed that the work-plan will be distributed to Healthwatch members and stakeholders to comment on. The use of social media would help with this.</p>	<p>MM to email the final work plan to the Board.</p>
<p>3) Annual Survey</p> <p>MM gave a summary of the findings from the annual survey. Board members will receive the annual survey in due course</p> <ul style="list-style-type: none"> • 274 responses were received from the public • 14 responses were received from providers • 78% of the public hadn't heard of HW previously • Of people who had heard of us, some were still unsure of what we did, so need to make sure our message is really clear <p>Q re social media:</p> <ul style="list-style-type: none"> • 76% use Facebook • 39% Instagram • 26% Twitter <p>Q: Where should HW be in B&D</p> <ul style="list-style-type: none"> • Local NHS services - NC suggested presence at blood test clinics • Libraries • Leisure centres - NC recommended attending gyms to get feedback from men • Shopping centres • Coffee shops • Borough events • Parent groups • Youth clubs <p>Q: How did ppl hear of HW</p> <ul style="list-style-type: none"> • Largest proportion was word of mouth • Employer • Social media 	<p>MM to email the final report to the board.</p>

<ul style="list-style-type: none"> • Event/info stand <p>Q: Did people know we provided signposting service</p> <ul style="list-style-type: none"> • Most people didn't <p>Q: Had they used HW services?</p> <ul style="list-style-type: none"> • 83% hadn't - but we need to change the Q next year <p>Q: What did people want us to look at this coming year</p> <p>Majority said GP appointments s, Discussion among board:</p> <ul style="list-style-type: none"> • Consider some of the bigger advertising eg: bus back or how could we do it? • Make sure distinction is made between CQC and HW work - how do we make ourselves distinct. • Can we get the GP to advertise? • Polling stations at local elections? 	
<p>4) Volunteers</p> <p>VS felt it may be easier to recruit volunteers if there were specific job roles.</p> <p>VS used to go to hospital wards once a month to raise profile and speak to patients and visitors as part of the stroke project. Walking the patch - show the good stuff too</p> <p>Approach BHR - we have some volunteers who would like to walk the patch, see the good and bad. Could be the out of hospital care eg: discharge pathways. Work in partnership with the hospital</p> <p>Feedback on the consultations - give specific feedback to board members within a week so they know how we use their input and get then adjust if necessary</p>	<p>MM to share the job role posters with the Board and get feedback</p>
<p>5) Urgent care</p> <p>Commissioned by CCG for a small pot of money to find out what people think about accessing emergency and urgent care. Focussed on 3 different group of people: parents of under 5s, young people between 14-25 and the elderly.</p>	
<p>6) Board feedback - see under volunteers</p>	
<p>7) AOB</p>	
<p>8) Date of next meeting</p> <p>The Board agreed that Monday evenings was the best time to hold meetings.</p>	<p>EP to send date of next board meeting</p>