



Minutes of Q4 Board Meeting held on 11th May 2022

Context

Due to the high COVID-19 infection rates, and in line with our pandemic working, this meeting took place virtually over the TEAMS platform. Board members were asked to read all the papers and submit any questions on these in advance of the meeting.

As this is a public meeting, TEAMS is used as it does not need a license and can be accessed for free. The public were made aware of the meeting via our Events Page and social media posts. Invitations were also sent directly to stakeholders and commissioners.

Permission to record the meeting, for the purpose of notetaking was agreed verbally and the recording was started. After the production of these draft minutes the recording has been deleted.

Present

Board Directors: Steve Cooper (Chair), Jeremy Gardner (Vice Chair), Emma Leatherbarrow (Help & Care Member Director), Non-Executive Independent Directors: Helen Goodman, Nigel Foulkes and Martin Phillips, Renee Fickling. Mark Sharman (Help & Care Member Director).

Apologies: Non-Executive Independent Directors: Linda Cairney, Ali Khan.

Commissioner – Niki Lewis. Alison Challenger, WSCC Director of Public Health; Bob Lanzer – Health and Wellbeing Board Chair, Keith Hinckley, Executive Director of Adult Social Care.

In attendance: Katrina Broadhill. Commissioner – Seth Gottesman. Ann Brosnan (Minutes).

Public Observer: n/a

1. Welcome and declarations of interest

SC welcomed everyone to the meeting and introduced Ann Brosnan.

No declarations of interest.

2. Approval of Previous Minutes

Approved. With the SC asking for the HWE Slides to be resent to him.

Summary of previous actions:

- Action 35 New HWE introduction slides to be shared with the board – completed
- Action 36 Priority document to be shared with stakeholders and published – completed.

2.1 Matters Arising

None.

3. Impact and Performance

KB went through the report. Final Q4 report and all will be used to draft the Annual Report and an early draft will be shared with the board. Updates were given on:

- Changes to Sussex Integrated Care System: Have been involved in this process and will give a presentation later in the meeting.
- Accessing GP-led Services: Have been able to work at a regional level in a collaborative way with a number of people from the NHS and we had a good range of opinions. It is working in a lot of cases but it has become

increasingly difficult for some people and has had a lot of media and political focus, not always positive. Took a holistic approach and captured opinions of staff before going out to the public. Ran survey for all of Sussex and over 1,500 responses. Rich insights in this which we will use outside of the report (e.g. to West Sussex Primary Care Group). Focus was on the last six months. Report was held back because of the local elections. Chief Primary Care lead (Amy) has been asked to give examples of what has changed for local people. Have also done a desktop review on websites and worked with the system on a working group looking at websites in Practices. This led to us working with St Lawrence's on the development of their new website, to give feedback on content (language and tone). Sussex commissioners have now offered a funding opportunity, so some practices can update their websites. As part of this, we have asked CCG to include in specification for funding that practices must communicate with patients how they have changed/improved their access. Will continue to build on this and focus on use of language when accessing services e.g. vagueness around 'urgent/routine'. Feedback from neuro diverse people shows that people do not know where to get information and don't want to bother their GP.

- Lot of work done around young people and giving them a voice. Sit on the oversight board for the Sussex-wide Foundations for Our Future. Issues around confidentiality and young people don't feel safe to share information. Recent influenced action is that system is looking at a Sussex Confidentiality policy that is more user-friendly to young people and clinicians to share what they mean about confidentiality to build up trust.
- Supporting youth volunteering and a young person (who volunteered with us at Crawley Library event this month) has made a video which we will share on our social media. Caroline continues to work with engaging with young people especially around LGBTQ+ building on research carried out by other people.
- KPIs have been exceeded and figures much greater than expectations and we continue to build on insight and intelligence. Social media figures fluctuate depending on what we are posting and how people are engaging with the posts, but it is still a significantly high figure. Cara shares with the team each month what people have engaged

with/shared etc. and we explore why that is the case to help us continue to improve reach and engagement.

- Accessible Information Standard: This is a vital tool around health inequalities, and we regularly hear about challenges around communication. We are taking part in the Healthwatch England national campaign *Your care, your way*.
- Local People/Volunteers: More people are approaching us, and we are looking at young volunteers, as well as how we balance the demographics. Feedback has been very positive from the Volunteer Away Day last month.
- IHCAS Reporting: No one on our waiting list currently and have a steady flow of referrals. This may start to pick up again.
- We are speaking to the commissioners about establishing a network, as there is a gap in that complaints and the PALs managers do not have an opportunity to come together. We have flagged learning from the system around improving pathways and the complaints procedure. Worked with one Trust but it has not delivered on the actions which were agreed and this has led to complaints needing to be escalated. We need to get the system right for handling complaints to make best use of resources.

Board Questions:

- *JG: What does work in Social Media?*

Katrina: Sometimes it varies. Hashtags and tagging partners leads to a wider reach. Engagement in Your Care Your Way. Have found that Awareness Weeks don't have a lot of reach so learning from this. Happy to retweet and re-post. In June we are recruiting men for some engagement around Bowel Cancer screening and will link this to the Men's Health Week, as there is a low uptake for men (in rural areas) around this issue. Men historically engage less with women. Clever use of hashtags is fundamental to this. Lots of professionals engage via Twitter. Want to explore other platforms such as Instagram and Tik Tok to reach out to younger people and our volunteers are working with Cara and Caroline on this.

- *RF: Contract Annual Target – has a new target been agreed and how is it assessed.*

SD: There was a rolling 5% target, and they are being exceeded.

KB: Will add the 5% on to next figures but we are still significantly above that, but we do need to retain a balance in what we are doing. SC: KB can you let me know the contact at Chichester College?

ACTIONL KB Will put SC in Contact with Caroline, who is working with them around partnering with the college in the future.

4. Financial & Performance Sub Committee Report

SC: Our numbers still look OK and expenses are still lower than forecast, so there is a surplus here.

EL: Looking at the budget for the next fiscal year.

SC: Will be looking at holding hybrid meetings so there is a choice between face to face and joining online. Looking at options for rooms.

10% Social enterprise fund will be added back in.

SC, JG and NF are signatory nominees and waiting for further information from Finance/Bank. EL mentioned that a fourth signatory would be preferable, and SD has volunteered.

KB: Did talk about the name for this sub-committee.

EL: Don't want to duplicate the performance overview in the finance and performance sub-committee with the impact and performance discussions so decided to produce a report on the KPIs and numbers.

ACTION: Katrina asked to produce a 1 page update for KPIs only.

5. Independent Director and Staff Feedback

5.1 Health and Wellbeing Board (HWB)

KB was unable to attend the last meeting, feedback was that health inequalities were discussed, but there was no significant update from CVS colleagues who attended. They updated that more needs to be done in workshops.

5.2 Health and Social Care Scrutiny Committee (HASC)

KB updated that HASC has met. Main topic was Neonatal units and changing national specifications.

Learning taken from this meeting, is the need to reflect on all of Sussex and not just the area where they were planning to make changes. This would give an overview of the whole county.

Asked that the minutes reflected that it was agreed to co-design the financial assessment Adult Social care Customer Survey. This was agreed.

Business Group met and all HASC members have been invited to contribute and share our thoughts.

Scrutiny Committee having pre-meetings to explore things (next one is in June).

5.3 Safeguarding Adults Board (SAB)

MP reported that there are 700 concerns raised per month and 180 went to a full enquiry. There has been an increase in Safeguarding adult reviews, with theme around a lack of communication when multiple agencies are involved.

Learning taken: is that there is a lack of professional curiosity, which is a concern, but it is hard to influence.

On a positive note, there is an addition to the objectives for 'Promotion and Engagement' to get regular real feedback from users and also aim to stop issues before they begin by raising awareness of what Safeguarding is.

KB: MF and myself meeting the Safeguarding Team May 12th.

5.4 System Communication and Engagement

KB: Meeting yet to take place on 11th May.

5.6 Stroke Task & Finish Group

JG updated that a pre-consultation business case went to the Clinical Senate (a body of clinical and non-clinical which advises health bodies) and they came back with several suggestions about preventing stroke, more diagrams to make sure the clinical position is

clear, but suggestions around workforce. One of the developments is developing a single acute specialist stroke centre in West Sussex.

Felt issue of tackling health inequalities was not strong enough so this is being amended. Unsure if the document will be ready for the HASC in September. A delay would be challenging in terms of getting the new unit up and running in April 2023.

Learning taken from this meeting: is that things are moving forward in a methodical way.

5.7 Pharmaceutical Needs Assessment

NF updated that last meeting was 26th April. PNA document is in draft form and will only be circulated when approved. Looked at the telephone survey for patients across different areas and surveying care homes. 20% response rate so far, hoping it will increase.

ACTION: KB will send NF the non-published personalised care report as medication is an area of concern. Have raised negative feedback around stoma suppliers, to raise at 31st May meeting. [5.8 Cancer Board & Cancer and Planned Care Forum](#)

SD updated that the last meeting she attended, and the backlog/waiting list continues to receive media attention. Positive signs in terms of innovative thinking about how to tackle things. Lots of focus on specific blockages

Learning taken from this meeting: is the need to demonstrate how people can do self-care but know when to raise the issue.

A case study is planned to feed back into the system and also make the best of the capacity available.

KB: Have produced a reflective draft report on the forum work and explored progress on DNAs and there is a better understanding of the data an the system can report on that and explore on why people DNA to create a better understanding. We also need to explore the future of the forum.

KB: Asked Nigel to be part of Bowel Cancer engagement work. We are working with the system to fully understand the pathways and we will also involve the Public Health Lead and the Commissioner and will go

into unusual places to recruit men and look at attitudes and what needs to change around the screening approach to encourage more men to take up the screening opportunities.

5.8 Regional and National Update

EL: Legislation to change CCGs into Integrated Care Systems (ICSs) approved and will take place. Relationships with the CCG is good so we can work with them.

Sir Robert Francis, Chair of HWE stepping down and currently no replacement has been appointed.

KB: Introducing an insight report (which will be published) to work with Jane Lodge's team at the ICS level to ensure our insight influences what she is reporting on and the public is aware of the themes coming out and will include what HWE is monitoring so our system is aware of the national picture.

6. Integrated Care System

KB gave a presentation to the Board to detail the progress towards the new Integrated care system (copy attached).

MP: Very little mention of Social Care and how it will be integrated. Will they be needing Healthwatch more for additional insight, and will we be getting additional funding?

KB: We are having that conversation with them as we are already overstretched even with the assistance of the Board in a number of areas. We are not commissioned to work at a Sussex strategic level. We are running a regional event in June and will bring the ICS in on this. System Leaders and local Healthwatch need to explore our future relationships. The issue around Social Care is vital to get right, and we have raised the issue around withdrawal of Covid funding. We do not know how the risks will be evaluated and what will happen as a result of gaps.

SD: Need a seat on the ICS board.

KB: Three seats will be taken up by the sovereign local authority organisations. The new Director of Adult Services is well known to Help and Care and we hope to enjoy a good working relationship with him.

JG: Concerned about how West Sussex is defined as a 'place'. Public involvement governance is complex, and it is not good for areas and communities who see themselves as different from West Sussex.

KB: Volunteers away day and Tom Goodridge a West Sussex lead for public involvement. Recognised that Crawley has a lot of Health Inequalities, including an older hospital and Tom has drilled down into how he is living that strategy. He wants to build longer term relationships.

We are regularly asking the system to build on the learning it has already got. In a recent Foundations for Our Future meeting we have shared insight that the strategy will not be realised if schools are working at odds with the strategy and we are more confident that there will be a commitment for Sussex to work collaboratively with schools to develop guidance that can be used over the entire area for help with mental health.

ACTION: KB to share presentation with board.

7. Policies and procedures update

KB reported that there will be an audit and the website will be updated.

8. Escalation Log

We've re-designed the escalation and insight tracker so that it reflects our new approach and added two learning logs. We have done a reflection report on our Sector Connector Mental Health Event where we have included internal Healthwatch learning. This has been shared with the system.

Additionally, wider engagement to demonstrate we are building on learning ourselves e.g. Chichester College we have used what other people have said, tested what is relevant and built on that in our engagement with young people.

Lots of involvement in attitudes towards cancer and challenging the myths: often we don't provide local community support with the answers to questions being asked, so need to build that in to help change attitudes and provide more information.

9 AOB

It was agreed by the Board that Steve would continue as Chair and Jeremy as vice Chair, for another 12-month term.

Emma announced that she was standing down from Help and Care at the end of June and that the Board would be updated on interim measures until a replacement is appointed.

Sally asked if under the Governance rules and her change of role, she needed to be co-opted onto the Board and Board members voted unanimously to approve this.

Meeting closed at 11.20

10 Future Board meeting dates:

Action Plan

Board Meeting dates
Q1 – TBC
Q2 – Wed 9 November 2022

Item Number	Action required	By Whom	Notes/ Completed
37	Put SC in contact with Caroline regarding Chichester College	Katrina	Completed 17 May 2022
38	Produce 1 page document on KPIs	Katrina	Ongoing

39	Send NF the personalised care report for the next PNA meeting on 31st May.	Katrina	Completed 17 May 2022
40	ICS presentation to be shared with board.	Katrina	Completed 17 May 2022