

# Enc 1

## Healthwatch Sandwell Advisory Board

### Minutes of meeting on 4 July 2023, 2023, 9.30 – 11.30 am

*HW Advisory Public Board meetings include an opportunity for members of the public to feedback issues about local Health and Social Care issues at the beginning of the meeting.*

	Item	Action
1	<p><b>Welcome and Apologies</b>                      Apologies received from DB                      PG introduced Tonia Flagganan – new Hab member.                      Tonia gave an overview of her work as CEO at St Albans Community Centre.                      Staff and board members gave an overview of their roles and experiences with HWS.</p>	
2	<p><b>Declaration of Interests</b>                      No declarations of interest recorded.</p>	
3	<p><b>Health and Social Care Issues from the public.</b>                      No members of public present</p>	
4	<p><b>Minutes and Action log from Public Board Meeting held on 18 April 2023.</b>                      Minutes agreed.</p>	
5	<p><b>Work programme 2022/23</b></p>	
	<p><b>Business Plan</b>                      AF said that the plan was broad in target setting and KPI due to the unknown issues/projects that may come to fruition during the life of the business plan. Members accepted this and agreed to sign off the business plan 2023/24</p>	
	<p><b>Priority Projects</b>                      SS presented the paper that was circulated prior to the meeting. SS gave an update on the previous priority projects and how the recommendation from the reports were taken forward. There was a discussion on how HW could hold stakeholders to account re actions as it was important that the voice of Sandwell people was not lost.                      AF Said that PG could request that HWS reports have an agenda slot on HWBB, Scrutiny Board and Sandwell pace health and care partnership board. AF said that patient experiences were being heard at SWBHT PEG – case study from reports could be isolated at presented at PEG in the future. AF said that there was also a new group being established within Adult Social Care in regard to co-production. AF said that local residents would be encouraged to be part of discussion on various issues in the future so this would be another route in to getting a system of better engagement with residents and Adult Social Care.                       SS gave an update to the board re the diabetes project.</p>	<p>AF and PG to discuss how best to ensure that future reports are recognised at HWBB, Scrutiny board and Health and Care Partnership Board in the future</p> <p>SS to send overview of the diabetes project to TF S</p>
	<p>Community Outreach</p>	

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	<p>ME said that there we new groups added to the engagement programme:</p> <ul style="list-style-type: none"> <li>• Bangladeshi women’s groups who were interested in the diabetes project. In the future this will be a one stop drop in session on a monthly basis</li> <li>• West Bromwich Bus Station drop in</li> <li>• Bearwood Community</li> </ul> <p>ME said ME had attended an event at Brunswick Park in Wednesbury which had been successful. ME said had attended a Cancer Wellbeing event at Bescot stadium. This was well attended but there were some issues with the layout for the event.</p> <p>ME gave the board an update into the GP showcase events. ME sad that once the surgery had agreed the feedback document, ME would share with board members</p>	<p>ME to share GP show case feedback document with board when it becomes available</p>
	<p><b>Enter and View</b></p> <p>AA explained to the board that the programme would be supporting the diabetes project. AA said that it had been difficult to get inroads to various health clinics, but SWBHT had been really helpful with this. AA said that there was a full programme and there had already been some visits concluded. These had been supported by volunteers – ST – board member had also been involved and VM – board member was supporting a future visit. AA explained to TF to be an Authorised Rep there would need to be training and a DBS in place.</p> <p>AA said that Harvest view was also in the programme, but this visit would not happen until later in the year.</p> <p>PJ asked if there were separate reports for each visit. AA said that there was and they would be circulated to board once agreed by the provider.</p>	<p>AA to send TF information about Enter and View and the statutory responsibilities HW has</p>
	<p><b>Volunteer Programme</b></p> <p>AA said that there had been events arranged for volunteers to celebrate volunteer’s week. However there was no uptake from HWS volunteers due to other commitments. AA said that volunteers had received a thankyou gift and a card.</p> <p>AA said that HWS had 7 generic volunteers and 1 youth volunteer. All very active. AA said that a long-standing volunteer was having some time out due to caring responsibilities.</p> <p>AA said that there were 5 pending volunteers that had come through SCVO Lets go Website.</p> <p>AA said that in the future it may be possible to revisit reinstating Youth Watch. PJ and TF said that they would be able to support recruitment through there networks.</p>	<p>AA to send PJ and TF promotional information re youth volunteering</p>
	<p><b>Signposting, information, and social media</b></p> <p>LH gave an overview of LH role.</p> <p>LH said that there had been a 74.4% interest in social media during the past year – this was a massive increase.</p> <p>LA said that LH would be supporting the diabetes project and also producing regular e bulletins and seasonal newsletters.</p>	
	<p><b>Project Officer – ICP patient voice</b></p> <p>PH gave a review of the Guided by You event.\PH thanked the HWS team for their support.</p>	

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	PH explained that there was further commissioned work for the next 12 months where the health and care partnership would be feedback to local residents the actions that would be taken I regard to concerns raised.	
<b>6</b>	<b>Meeting feedback reports by HAB members/ staff/ LHM</b>	
	<ul style="list-style-type: none"> <li>• <b>Health and Care Partnership Board (PG)</b> PG said that the last two meetings had been cancelled so there was nothing to update members about.</li> <li>• <b>Health and Well Being Board (PG)</b> PG said that there had been 1 meeting since the local elections. There had been information items only on the agenda. Minutes and associated documents and presentations can be forum on the council web site. PG encouraged members to take a look.</li> </ul>	
<b>7</b>	<b>Intelligence/Feedback update – public issues</b> AF gave a quick summary: <ul style="list-style-type: none"> <li>• GP access</li> <li>• Additional cost to resident’s phone bills while attempting to make a GP appointment</li> <li>• Lack of beds to support people with poor mental health who required admission</li> <li>• The impact of the cost-of-living crisis</li> </ul>	
<b>8</b>	<b>Decisions to be made by Advisory Board</b>	
	<b>Escalations to HWE/CQC etc</b> No escalation made	
<b>8b</b>	<b>Publish a report/ agree a recommendation made in a report</b>	
	No reports pending	
<b>8c</b>	<b>Request information from commissioners/ providers</b> No requests made	
<b>8d</b>	<b>Which premises to Enter and View and when</b> E&V programme already agreed	
<b>8e</b>	<b>Decision about subcontracting/ commissioned work</b> Continuation of ICP Patient Voice Board in agreement that the programme should continue	
<b>8f</b>	<b>Report a matter concerning your activities to another person- e.g., CCG, Voluntary Sector, another Healthwatch, Advocacy services.</b> Nothing to report	
<b>8g</b>	Which health and social care services HW is looking at for priority project. Priority projects already agreed	
<b>8h</b>	<b>Refer a matter to Overview and Scrutiny committee</b> No referrals made and no referrals pending presently	
<b>8i</b>	<b>Breach/s of the decision-making process</b> No breaches	
<b>9</b>	<b>Any other business</b> AF said that HWS tender should be in April 2024. AF has been asked to provide information to new commissioner re our work programme for the 23/24.	
<b>10</b>	<b>Date and time of next meeting</b>	
	<b>Closed private session</b>	

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- PG Chair
- AF Manager
- AA Engagement and Volunteer Lead
- ME Community Outreach Lead
- SS Projects and Partnership Lead
- LH Signposting and Information Officer
- PH Project Officer - ICP Patient Voice

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