

Independent Strategic Advisory Body Meeting
Monday 9th January 2017, 3-5pm
The Emmaus Room, Beverley Minster, Beverley

Agenda

Advisory Body Members: Carol Dyas (CD), Julia Pollock (JP), Sally Burns (SB), Ian Dewar (ID), Matthew Fawcett (MF), Linsay Cunningham (LC) and Jenny Jenkinson (JJ).

1.	Welcome and introductions	MF	15.00
2.	Election of Chair (for this meeting)		15.00
3.	Apologies for absence	Chair	15.05
4.	Minutes of last meeting (05/10/2016) - pp.2-6 Matters Arising/Action Log - p.7	Chair	15.05
5.	Public Questions (submitted in advance)	Chair	15.15
6.	Reports from partners: STP update (verbal)	LC	15.20
7.	Update on workplan and current delivery: i. To receive an update on current delivery (report to follow) ii. To receive an update on 360° review (p.9 - report to follow) iii. To approve workplan for final quarter of 2016/17 (pp.10-12) iv. To discuss priorities for 2017/18 workplan (pp.13-14)	MF	15.30
8.	Governance issues: i. Governance review paper - for discussion and to consider the recommended changes to HWERY governance framework (pp. 15-16 plus attached paper)	LC	16.15
9.	Any Other Business (previously notified)	Chair	16.45
10.	Date and Times of future meetings Wednesday <ul style="list-style-type: none"> • March 8th • June 14th • October 11^t 	Chair	

Agenda Item 4

Minutes of last meeting

Independent Strategic Advisory Body Meeting

Wednesday 5th October 2016 3.00pm-5.00pm

Brough Business Centre, Brough, HU15 1EN

Minutes

Advisory Body Members: Sally Burns (SB), Julia Pollock (JP), Lindsay Cunningham (LC), and Jenny Jenkinson (JJ).

In attendance: Michelle Harvey (minutes)

No.	Agenda Item/Subject	Action by
1.	<i>Welcome and Introductions</i> No members of the public were present.	
2.	<i>Election of a Chair</i> Julia Pollock was elected as Chair for this meeting.	
3.	<i>Apologies for absence</i> Apologies were received from Carol Dyas.	
4.	<i>Minutes of the last meeting</i> The minutes of the last meeting were agreed as a true record. <i>i. Matters Arising/Action Log</i> A copy of the response from NLaG was circulated to those members present. LC reported that now Matt Kay is carrying out a dual role between HWERY and HWNL we are being kept 'in the loop' and there is increased triangulation of work between the two groups. The Chair queried how happy HWERY was with the response received from NLaG. LC reported that although NLaG were more willing to engage, their response was more of an account of how they could improve as opposed to what improvements had actually been made or actually put in place. However a positive step forward was the fact that NLaG were now more willing to engage. A request was put forward from the Chair to be updated on progress at the next meeting. Action Point: LC to update ISAB on progress with NLAG at next	LC

	<p>meeting. LC reported that there was another East Riding Safeguarding Adults Board meeting coming up and that similar issues surrounding feedback mechanisms raised by HWERY had been raised by other groups, although no progress had yet been made LC would continue to work on.</p>	
5.	<p>Public Questions (submitted in advance)</p> <p>There were no questions submitted from the public.</p>	
6.	<p>Report from Partners</p> <p>i) HWE update SB had attended the last HWE meeting where there had been representatives from Healthwatch East Riding of Yorkshire, Cumbria, Rochdale and Blackburn. SB reported that the future of funding was discussed and information shared around the allocation of funding. In relation to STPs, the Healthwatch England Chair re-iterated the role of Healthwatch to be independent. Groups were cautioned and reminded to have a clear purpose when becoming involved in the STP process as this is not the core role of Healthwatch. Areas of best practice were highlighted, with one area of discussion being the securing of additional funding; however it was noted that if this was an avenue to be explored the project to be funded must have clear and concise outcomes to justify the benefits of such funding.</p> <p>SB also reported that she had discovered Healthwatch Cumbria to be of similar size to that of HWERY in terms of geographical area, sparsity and population etc. and that due to the significant number of similarities, this may be a Healthwatch group that there could be benefits in making links with.</p> <p>SB stated she considered the meeting well worth attending and that this should be noted for attendance at future meetings; however JP noted that HWE did not often give sufficient notice of meetings, which could make it difficult for members to attend.</p> <p>Action: LC to contact HWE requesting for more notice to be given for forthcoming meetings.</p> <p>ii) STP update LC reported that 5 out of the 6 local Healthwatch in the HCV STP area had attended a meeting to coordinate strategy regarding engagement with the STP. LC also brought the NHS England Engaging Local People document to the attention of the board, the document and can be found at:</p> <p>https://www.england.nhs.uk/wp-content/uploads/2016/09/engag-local-people-stps.pdf</p>	LC

	<p>LC stated that of all the groups, the mental health stream had been the most successful in terms of engaging with local Healthwatch, however in future HWERY should focus on engagement rather than having a focus on attending meetings as this had proved not to be the most productive use of time. HWERY has existing relationships with all three providers and therefore was continuing to lead on the STP for the whole footprint.</p>	
7.	<p><i>Update on Strategic Plan and current delivery:</i></p> <p><i>i) To receive an update on current delivery</i></p> <p>LC had provided a new format performance report which was welcomed by the Advisory Body. Engagement was reported as high over the summer months in-particular, however it was noted that this was much easier over the summer and suggestions were raised as to how to try and maintain this momentum over the winter. LC informed the meeting that HWERY were to have a presence at the eight CCG public drop-ins and investigations had been made into having a presence in some supermarkets/similar venues, however this could only be to promote and publicise the work of Healthwatch as many organisations/businesses had a strict policy on not allowing the collection of data from members of the public.</p> <p>The Advisory Body discussed the challenges of finding suitable venues within HWERY region as most large shopping centres and venues were actually based outside of our region, with residents choosing to travel outside of the area to these larger centres. A number of suggestions for activities and venues were put forward by The ISAB on how to engage with the public over the winter months and maintain as higher level of engagement as practically possible. LC suggested that the purchase of a designated Healthwatch Gazebo might be a worthwhile investment for the future.</p> <p>LC reported that the Social Care and Homecare reports are complete and ready for publishing and that follow-up visits were soon to be arranged for those Enter & View visits that had been carried out earlier in the year at residential care settings. The MIU report was also complete and ready for approval. No major recommendations had been made following the MIU report but it was hoped that information gathered would feed into the wider consultation process over closures etc.</p> <p>JP expressed her disappointment at the lack of response over the Mental Health Report. LC clarified the process followed in publishing a report should no response be received. A suggestion was put forward that if no response is received, then this should be stated on the report.</p> <p>Action Point: LC to follow up a response from the Mental Health Report.</p>	LC

	<p>Another key point highlighted was that the information booth at Brough was finally off the ground and trained volunteers were now regularly in attendance to support the use of the booth by members of the public. A press release had been made but HWERY are not aware if this had been picked up on by the wider press.</p> <p>LC informed the meeting that a recent work placement student had carried out work surrounding the subject of self-harm in children and young people. No report had been produced, however there had been some useful engagement and case studies carried out by the student.</p> <p>SB queried how the targets were presented as part of the new format performance report, as the difference between annual and quarterly could be perceived as slightly confusing. This was the only query relating to the report as otherwise it was perceived by The Advisory Body as very user friendly.</p> <p>Action: LC to make clear which is target is the annual target on future performance reports.</p> <p><i>ii. To approve revised annual workplan for 2016/17</i> The revised annual workplan for 2016/17 was received by the board. It was noted that there had been some slippage; however it was good for these to be noted. Those noted had been largely unavoidable and the HWERY team were working reactively to address certain areas as they came up.</p> <p>LC stated that the carer's project had been brought forward to try and avoid duplication of work carried out by the Carers Advisory Group, but this had not worked quite as well as expected. HWERY did not want to carry out further community engagement if CAG had already fulfilled this role, therefore duplicating similar work. JJ suggested a focus on young carers as being a possible option which would avoid duplication, but still add value to the project.</p> <p>The revised annual workplan was approved.</p>	LC
8.	<p>Governance Issues</p> <p><i>i) To sign information sharing agreement with HWE</i> It was agreed that LC would sign the agreement on behalf of ISAB.</p> <p><i>ii) To approve the revised Hard to Reach Strategy</i> The Advisory Body were made aware that the main change to the document was the omission of the list of groups previously included on page 15. The decision not to include the list was made due to the fact that changes occur too frequently for the list to remain accurate. JJ brought the 'Men in Sheds' project to the attention of the Board which raised discussion around working age men being a potential group to</p>	

	<p>work with. LC explained there are plans in place for this to be explored in the post-Christmas period and ideas of how to engage with this group are being explored.</p> <p>The revised Strategy was approved.</p> <p>iii) To approve revised Research Ethics review process JP highlighted the importance of the Research Ethics Review Process. LC highlighted the fact that it was not the intention for this process to limit the ability to carry out specific projects, but to raise important questions and understand the impact that each project had on its subject. JP suggested that the right to withdraw should be included, which was agreed. SB requested that the document be shared with HWE as an example of best practice. LC would out forward a suggestion for it to go into the HWE Toolkit.</p> <p>Action: LC to add a right to withdraw statement into the Research Ethics review process and share with HWE for inclusion in the HWE toolkit.</p> <p>JP requested that when documents are sent out to members for consideration that a deadline for action/reaction is added to assist members in responding in a timely manner. JJ suggested that the date should be added to the subject header to assist in this process. It was also added ISAB members would be happy to receive reminders if documents have not been responded to within the appropriate time-frame.</p> <p>Action Point: A deadline date is included in subject header for time-sensitive correspondence with ISAB members and reminders sent as necessary.</p>	<p>LC</p> <p>HWERY Team</p>
9.	<p>AOB</p> <p>No other business was identified.</p>	
10	<p>Date & time of future meetings</p> <p>Wednesday 11th January 2017, 2.00 - 4.00pm. Meeting to be held in Beverley (venue to be confirmed).</p> <p>LC would be interested in sourcing data that demonstrates whether web-casting public meetings has a positive effect upon improving public engagement, as opposed to physically moving the venues of meetings to increase accessibility to the wider public. A list of provisional dates for future meetings is to be compiled and shared with members.</p> <p>Action: LC to provide a list of provisional dates for future meetings to ISAB members prior to next meeting.</p>	<p>LC</p>

Agenda Item 4(i)

Action Log

Actions from ISAB Meeting 05/10/2016

Action	Person Responsible	Status/Update
Outstanding actions from meeting held 27/07/2016		
Safeguarding Board to have further discussion about feedback mechanisms for Healthwatch and other referring agencies (and individuals).	LC	Ongoing (LC to provide verbal update at ISAB)
Keep safeguarding board informed of future meetings to attend as required.	MH	Ongoing
Actions from meeting held 05/10/2016		
Update ISAB on progress with NLaG at next meeting (relates to previous action from meeting held on 27/04/2016).	LC	Ongoing (LC to provide verbal update at ISAB)
Contact HWE requesting for more notice to be given for forthcoming meetings.	LC	Complete
Follow up a response from East Riding CCG to the Mental Health Report.	LC	Complete (formal letter sent to CCG and lack of response recorded in report to OSC)
To make clear which is target is the annual target on future performance reports	LC	Complete
Add a right to withdraw statement into the Research Ethics review process and share with HWE for inclusion in the HWE toolkit.	LC	Complete (revised form previously circulated to ISAB and now in use)
A deadline date is included in subject header for time-sensitive correspondence with ISAB members and reminders sent as necessary.	MH	Complete (process now in use)
To provide a list of provisional dates for future meetings to ISAB members prior to next meeting.	MH/MF	Complete (included in these papers on p.1)

Agenda Item 7(i)
Update on current delivery

Report to follow

Agenda Item 7(ii)

Update on 360° Review

Background

On the 14/10/2016 Healthwatch East Riding of Yorkshire sent out a 360 survey to our stakeholders inviting them to express their views on the achievements and challenges of Healthwatch East Riding of Yorkshire.

18 stakeholders from across health and social care responded to the survey. Healthwatch England independently analysed the results of this survey in late November 2016. These initial findings were presented at a stakeholder workshop held on Friday 9th December 2016. The purpose of the workshop was to agree findings and actions based on these survey responses.

Healthwatch England is currently producing a report summarising the strengths and areas for improvement that were identified via the 360 process. The report will be circulated to the ISAB directly when it is received from HW England (which may or may not be before this meeting).

Recommendation: to discuss and agree an action plan for future development on the basis of the findings of the 360 review (if available in time for the meeting - if not the item will be deferred to March 2017).

Reason: to continue the development and improvement of Healthwatch East Riding of Yorkshire.

Report author:
Matthew Fawcett (Acting Delivery Manager, HWERY)

Agenda Item 7(iii)

Annual workplan for 2016/17

Background

At its meeting in April, the Advisory Body approved the 2016/17 workplan for Healthwatch East Riding, which is set out below. As requested by the ISAB, the names of the officers responsible for delivery of each workstream are noted on the plan. Slippages/amendments are highlighted in yellow.

Recommendation: to approve amendments to the annual workplan for 2016/17.

Reason: to effectively guide the delivery of Healthwatch East Riding against identified priorities.

Report author:

Matthew Fawcett (Acting Delivery Manager, HWERY)

Annual Workplan 2016/2017

	April	May	June	July	August	Sep	Oct	Nov	Dec	Jan	Feb	March
Research Themes (Priority areas for issue-based research) - lead officer: MK												
Mental Health	Report		Directory									
Domiciliary Care	Analysis	Report										
Residential Care				Analysis		Report						
Hospital Discharge	(project has expanded therefore taking longer; undertaking joint working with Hull/NLs)					Planning and initial engagement			Engagement	Analysis	Report	
Targeted Engagement (Hard to Reach) - lead officer: MF (SM will lead on carers and working-age men)												
Young People and mental health	Planning and initial engagement				Analysis				Report			
Moving into adulthood (LD/SEND)		Survey and engagement		(insufficient data from engagement to publish a report - will continue with engagement)								
Children & Young People	(slipped to later in year due to other ongoing work)					What Matters V2 Initial Engagement			Analysis	Report		
Carers	(moved earlier to work alongside JSNA/Council)			Planning & Initial Engagement			Analysis	Report	(CAG leading the project now)			
Working Age Adults (esp. men)									Planning & Initial Engagement			
Follow Up work/Impact assessment - lead officer: MK												
	Outcomes Tool	Dementia	Annual Report	Outpatients	Eating Disorders		Young People (Lifestyle)			Residential Care		

	April	May	June	July	August	Sep	Oct	Nov	Dec	Jan	Feb	March
Strategic Priorities (enabling public engagement with wider system change) - lead officer: LC												
Sustainability and Transformation Plan	Support engagement re: STP				Follow-up engagement on STP				Update as STP themes emerge			
Care Quality Commission	Supporting ongoing inspections (through intelligence sharing and supporting engagement)											
	Humber		HEY									
HW England												
ENABLERS												
Enter and View - lead officer: MH												
	Res Care	MIU		Re-visits (res care)		Hospital discharge				Residential Care		
E&V Apprentices	production/delivery of training			Pilot of Youth E&V Project		Evaluation						
Information & Signposting - lead officer: GP												
Mental Health Directory	Collate	Check	Publish									
Generic Directory								Collate	Check	Publish		
Health Literacy	Continue to train information champions						"Get Online"	1:1 training				
Engagement - lead officer: SM												
Main theme/area of focus		STP		Outpatients (FU)		Hospital Discharge						
	Dementia (FU)				STP							

Agenda Item 7(iv)

Discussion on priorities for 2017/18

Background

Over the next three month period, Healthwatch East Riding needs to set its priorities for work for the coming year (2017/18). It is the responsibility of the Independent Strategic Advisory Body (ISAB) to formally agree the workplan for the coming year.

It is important that the workplan reflects the priorities of the people living in the East Riding and it must also take into account ongoing work of other actors in the health and care sector locally (as well as that of neighbouring Healthwatch).

Over the last six months we have been engaging with the public on a number of issues, including their health and wellbeing priorities. The results from our engagement exercise are still being analysed, however, preliminary findings will be presented at the meeting.

We have also recently engaged with stakeholders to ask them what is coming up on the horizon so that we can be aware of synergies and possible areas of overlap. Again, we still have some more consultation with stakeholders to do, but the preliminary results are copied overleaf.

The workplan for 2017/18 must also take into account the level of resource needed to conduct follow-up work and maintain oversight over previous pieces of engagement and research.

Recommendation: that the Advisory Body discuss potential priorities for 2017/18 that can be worked up into a delivery plan and circulated in mid-February.

Reason: to provide a steer to the Healthwatch team to enable them to draft a delivery plan for 2017/18 that reflects the views of the ISAB.

Report author:

Matthew Fawcett (Acting Delivery Manager, HWERY)

What's on the horizon...?

Stakeholder Forum, 9th December 2016

Mental Health Awareness & Provision

Sustainability and Transformation Plan

ERYC

Review of advice / advocacy / VCS infrastructure.

Re-contracting same for 2018 →

City Health Care Partnership

Mobilisation of Community Services in East Riding & Associated Comms & Engagement Plan



Opportunity for HW to explore ways to mitigate providers need/duty to consult and engage and voluntary capacity to respond. (+ 'tick-box' scepticism)

Creating Dementia Friendly Communities



To raise awareness of Dementia and support those living positively with Dementia (particularly in the rural community).

Engage with HW possibly with a Dementia related survey



Dementia Friendly East Riding (DFER)

Focus on patient/carer involvement in services & development

healthwatch
East Riding
of Yorkshire

Agenda Item 8(i)

Governance review paper

Background

In August 2015, Healthwatch East Riding adopted a new Governance Structure to reflect the changing needs of the organisation and to ensure effective oversight and governance was in place. The newly formed Independent Strategic Advisory Body (ISAB) met for the first time in October 2015.

At this meeting, the ISAB formally approved the Governance Framework for HWERY and also agreed to review the effectiveness of this new framework after its first full year of operation.

This paper is provided to stimulate discussion on the effectiveness of the ISAB over the past 12 months and makes a number of recommendations in order to enable the Advisory Body to function more effectively in the future.

Analysis

The following summary is provided in order to stimulate discussion on the overall effectiveness of the HWERY ISAB to date.

Positives

- Good division of strategic and operational responsibility
- Good range of experience/expertise amongst members
- Ownership of priorities and workplan
- Effective meetings

Challenges

- Recruitment and retention of ISAB members
- Continuity
- Maintaining momentum between meetings
- Communication (esp. around sign-off of publications)

Areas for Development

- Diversify representation, particularly in relation to age and other "protected characteristics"
- Exploit opportunities for joint working with neighbouring HW
- Visibility of ISAB with external stakeholders

In response to the above analysis and on the basis of discussions held by the ISAB at its development session in October 2016, a number of recommendations have been made below.

The first of these recommends the appointment of a Chair to serve (initially) for a period of one year. When the Advisory Body was established in October 2015, there was no appetite amongst the membership to take on the role of Chair at that time, additionally it was agreed that whilst the new model was being established and embedded that it would be prudent to hold off appointing a permanent Chair. Since then, the ISAB has operated on the basis of a rotating chair (where a chairperson is selected at the start of each meeting to chair that particular meeting). The meetings themselves have operated effectively on this basis, however, it has meant it is not possible to brief the chair in advance of the meeting or for the ISAB (via a Chair) to take the lead on setting the agenda for meetings. Additionally, it has made it more difficult for the HWERY team to seek guidance or strategic direction from the ISAB between meetings, particularly if individual ISAB members have conflicting views. It is therefore recommended that the ISAB elect a Chair from amongst the existing lay members to serve for a period of one calendar year, where the situation will once again be reviewed.

The second recommendation is made in response to discussions held at previous ISAB meetings in relation to implementing the HWERY Hard to Reach Strategy (which was formally signed off at the ISAB meeting in October 2016).

Recommendations:

1. The Advisory Body elect a Chair (from amongst the existing lay members) to serve for a period of one calendar year.
2. The Advisory Body agree the changes to the make-up of the governing body to include two additional lay member positions: one for a member under the age of 30 and one liaise with equalities groups and networks to represent groups with protected characteristics under the Equalities Act.
3. The Advisory Body agree the other (minor) changes to the Governance Framework as set out in the document.

Reason: to ensure Healthwatch East Riding is effectively governed.

Report authors:

Linsay Cunningham (Delivery Manager, HWERY)

See additional document:

Governance Framework_Jan2017_track changes version