

Board Meeting

Date of Meeting: Monday 19th March, 2018

Healthwatch Birmingham Board Meeting

Time: 4.30 pm - 7.00 pm

Venue: Healthwatch Birmingham Board Room
Cobalt Square, 83 Hagley Road, Birmingham, B16 8QG

Attendees

Andy Cave	Carol Burt	Catherine Weir
Danielle Oum - Chair	Jane Upton	Jenny Jones
Les Lawrence	Peter Rookes	Di Hickey (Minutes)
There was 1 member of the public in attendance to observe		

Apologies

Brian Carr	Jasbir Rai	Jackie Spencer
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Public Session

1	Welcome, Introductions & Apologies, Any Other Business	For Noting
	DO welcomed everyone to the meeting. DO informed the Board of Mike Hughes' resignation and publically thanked Mike for his contribution to Healthwatch Birmingham and wished him the very best for the future.	
	Declarations of Interest	For noting
	None in addition to the Conflict of Interest Register.	
2	Minutes of previous meeting (4th December, 2017)	
	Minutes of the previous meeting were agreed.	
3	Actions Arising - All Actions Progress - All	For Action
	Action 2 - Volunteering AC reported that Hanna Nadershahi, Volunteer & Community Officer would provide an update to the meeting around protected characteristics and diversity monitoring. All routes have been developed to record diversity and this will be compiled for the annual report and will report back in a future meeting. Staff have now been trained to collect information around diversity and a volunteer training pack is currently being developed. An external organisation is writing a full Community Engagement pack for volunteers and training around specifics of diversity.	

4	CEO's Report - AC	For Noting
	<p>AC updated on the following:</p> <p><u>Figures - page 2</u></p> <p>Now approaching end of year and have increased over 40% based on last year (target of 10%).</p> <p><u>Volunteering</u></p> <p>Volunteer recruitment was successful through Birmingham and Newman Universities. A volunteer induction training session took place in Selly Oak and 9 volunteers were trained and all are really keen to get started. Role specific training on community engagement skills will be delivered early next financial year.</p> <p><u>CQC</u></p> <p>The CQC have carried out a review of the Birmingham system specifically looking at integration of services for >65s. A draft report has been received for comment around accuracy. AC to share the final report to the Board for information.</p> <p><u>Healthwatch England Update</u></p> <ul style="list-style-type: none"> • Visit from Imelda Redmund was successful in November 2017. • AC attended the East Midlands LHW regional meeting and talked through model and systems and around continually aiming for impact. • As a result of our work in the East Midlands we were visited by Healthwatch Lincolnshire who wanted to implement learning from that day. • The national award categories have now been published for the Healthwatch Conference in October and HWB will enter where we can. We have never entered before so hopefully will have some success. <p><u>New Commissioner</u></p> <p>We now have a new Commissioner, Pip Mayo, who is Head of Commissioning for Strategy and Integration at Birmingham City Council and contract manager Sarah Feeley. AC has met with them twice and has gone through all of the contract obligations and general details. We will continue to raise their awareness of the quality and impact of the work we do.</p> <p><u>Investigations</u></p> <p>The Direct Payment study is really timely because Birmingham City Council are currently doing a lot of work around it. They are going to end the year by looking at direct payments and personal budgets.</p> <p>The Zinnia Centre study also seems timely as the centre is constantly raised when going around third sector organisations. We are currently working with the CQC on a report and the lead inspector is going to take the data to a meeting with the director of Zinnia Centre. It has been positive working more closely with the CQC, although it has been progressing slower than we would like due to managing other peoples capacity.</p>	

AC confirmed that Investigation reports will not be published at the moment as currently entering into Purdah.

PR asked if any feedback had been received from users on the use of the direct payment cards. JU confirmed that where we had heard feedback regarding payment cards this is included in the report.

DO stated that it would be helpful to get verbal feedback on becoming a leading local Healthwatch. AC to update through the CEO report and ensure this work is highlighted to the commissioner.

DO referred to quality feedback data and stated that whilst it is good to see an increase in volume, how do you assess what is the ideal volume for the size of the city? In terms of different sources of data do we see certain types of data that is good?

AC reported that last year's data (16-17) was mainly from the Feedback Centre, this year (17-18) there has been far more through the telephone information and signposting line and community engagement. This has been important as when carrying out a one to one conversations we are able to ask probing questions to hear where inequity lies and we can hear full the journey of accessing social care, feedback is just feedback.

We need to evidence though that we are hearing from the right people and not just a blanket approach. This is evidenced through our community engagement and developments in our diversity monitoring mechanisms.

JU reported that we have now started sending quarterly reports to the CQC and asked to get back to them by mid-March to find out if helpful and this is also evidence of the quality of our data. We need to get information from people and experiences that are valuable and that CQC need to hear about.

DO reiterated that there is nothing in the report that explicitly states what the right numbers are. We understand why but wouldn't know that by looking at the paper.

CW stated that there is a good argument for depth and impact and hearing the whole story and also argument for range and coverage. What percentage of the population of Birmingham know what Healthwatch Birmingham is, would show broad and depth.

JU stated that we should bear in mind what amount of data is enough and work backwards from there. DO felt that a logic modelling exercise could be used to demonstrate this.

5	<p>Update from Hanna Nadershahi - Volunteer and Community Officer</p> <ul style="list-style-type: none"> ○ Community & Engagement Plan 18-19 ○ Investors in Volunteers 	For Noting
	<p>DO welcomed Hanna to the meeting.</p> <p>HN presented a mapping document showing what Community Engagement progress has been made and work still to be carried out. This is designed to show us where the gaps are for targeted engagement work.</p> <p>The mapping document shows organisations that we have met and gathered feedback from. Next year we will concentrate on Yardley and Perry Barr and do more events there.</p> <p>HN confirmed that she had joined Healthwatch Birmingham in September and over the last few months had learnt how compassionate volunteers are and need thorough training. A full calendar of training is currently being developed alongside more community engagement events.</p> <p>We want to be more prepared for next year with a plan that can be reviewed.</p> <p>The Community Engagement working group had looked at all health profiles from Birmingham City Council and compiled a table to look at anything that stood out eg. infant mortality rates are in Birmingham. Using this data we are able to understand the population groups of the city and where to access. We looked at target groups, protected characteristics and seldom heard and will talk to them across different districts. There are also a lot of international and local awareness days which have been added general engagement and plan.</p> <p>As a result, will get a Community Engagement Action Plan for next year with a Community Offer and look at working with them.</p> <p>AC stated that more feedback is being collected as a result of the links developed within communities. The Community Offer will be looked at next year and four organisations have now connected with us. This will be progressed in Quarter 1 next year.</p> <p>PR queried what is being heard from the homeless as there are a lot of organisations in the Ladywood area. Rough sleepers numbers are increasing and there a number of organisations providing food and blankets.</p> <p>HN reported that rough sleepers are the hardest group to gather feedback from and will access and listen through organisations that work with them. We will aim to do this through the Community Offer as it will take a lot of building relationships and trust from them as it is not a priority for them to tell us.</p> <p>PR stated that the public see rough sleepers as being a priority and would be surprised if we are not addressing them in some way.</p> <p>AC stated that this is a challenging group and additional skills would be needed and thought SifaFireside would be given to the best placed organisation in the city to enable us to hear from them. We will put efforts into working with them and want to add social value back if not hearing from them.</p>	

HN reported that we will be visiting the SifaFireside drop in where over 150 people attend and will then speak to the client forum and go back next year. Also going to meeting with Changing Futures.

JU confirmed that she had also talked to Shelter to find out how direct payments work with them.

PR stated that a lot of information is being gathered from individual people. He queried what we are doing with that information and how do we feedback that we have done something and also asked what the current process was for dealing in an aggregate way.

AC confirmed that a case study template has been developed where we look at different feedback heard, it explain how we listen and what we heard. We do go back to organisations to tell them what has happened.

Quite a few individuals come through the Information and Signposting line from Community Engagement - GR then signposts to other organisations. We attempt where possible to feedback to people if we need to escalate and where their feedback is selected to go to investigation.

HN reported that at a Refugee and Migrant centre event we collected feedback and spoke to 9 people with interpreters. Five or six of those people wanted to make a complaint, needed information and signposting and two were escalated. We emailed the organisation to say these are the kind of general things heard from you and told them what we were doing with the information. Hopefully develop into case study to say this is how we listen to refugees etc.

CW stated that leaving something sustainable is a really good way of working.

AC reported that we had positive messages back from organisations.

CB stated that we are doing constructive engagement and pleased to see that we are developing the training packages for volunteers and developing their skills.

HN stated that a short volunteer feedback survey had been carried out which had asked for training needs eg training around safeguarding, equality and diversity, anything that would enable volunteers to be more equipped for Community Engagement. The training will be practical using role play and case studies, active listening and interview skills. We will go through different practices and want to make sure that all volunteers are trained and are developing their skills to help them feel confident to gather quality feedback.

AC stated that the training is designed around the role description and skills analysis. The person who is designing the training will do bitesize modules that will be available to people throughout the year. The HWB induction is done separately.

AC stated that we are going through Investors in Volunteers which will assure us that we are doing everything we can to support our volunteers. Part of this is how volunteers can feed into board, there could be a volunteer representative that comes to the public section of the meeting. HN stated that the volunteers are really amazing, passionate and diverse

	<p>and they want to know what's happening in the organisation and want to be more involved in decision making and would welcome the possibility to have a volunteer representative.</p> <p>Will possibly look at an event next year which involves, staff, board and volunteers.</p> <p>DO stated that she is very assured by the processes outlined from understanding where community engagement needs to take place and ensuring we have the right people with the right skills through volunteering. The fact we are developing ways to use this as an opportunity to build assets and capacity within partner organisations and the community is really positive.</p> <p>DO requested that we outline the process and present back to board regarding the opportunity for a volunteer representative on the Board.</p> <p>HN suggested that they would have to nominate themselves, produce a biog about and how get feedback from other volunteers, what they have done in terms of HWB give reasons why they are best suited to this role. Volunteers would then vote for their representative.</p> <p>AC to work on and inform next board meeting.</p>	
6	Any Other Business	
	For noting - CB will be attending an NHS England PPI event in London.	