

AGENDA: Healthwatch Kingston upon Thames Board Meeting

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To be held on Wednesday 23rd May 2018, 5pm - 7.30pm

In the Large Committee Room, Kingston Quaker Centre, Fairfield East, Kingston upon Thames, KT1 2PT

PART A (OPEN MEETING): Members of the public are welcome to attend this part of the meeting.

No	Item	Lead(s)	Paper(s)	Time
STANDING ITEMS				
1.	Welcome and apologies for absence	GS	-	17.00
2.	Declarations of interest	GS	-	
3.	Approval of PART A Minutes held 27.03.18	GS	✓	
4.	Outstanding actions report	GS	-	
FOR DISCUSSION AND/OR DECISION				
5.	Chair's report (15 min) <ul style="list-style-type: none"> • Change of Administration at RBK • Safeguarding 	GS	✓	17.10
6.	Chief Officer's report (15 min)	SB	✓	17.25
7.	Finance report (10 min)	NS	✓	17.40
8.	Project and Outreach Officer reports (10 min)	ABY/LA	✓	17.50
9.	GDPR (20 min)	JW/SB	-	18.00
10.	Revised Lone Working Policy for approval (5 min)	NS/SB	✓	18.20
11.	Volunteering with HWK (10 min)	NA	-	18.25
12.	HWK Strategy - plan for next meeting (5 min)	WO	-	18.35
FOR INFORMATION				
13.	Task Group reports (5 min) <ul style="list-style-type: none"> • Community Care Task Group • Mental Health Task Group • Hospital Services Task Group 	AM TW GG	✓ ✓ ✓	18.40
14.	AOB - Support for People with Personality Disorder (JW) (5 min)	GS JW	-	18.45
15.	Confirmation of dates for 2018-19 meetings: <ul style="list-style-type: none"> • Wednesday 25th July 2018 • Wednesday 19th September 2018 • Wednesday 28th November 2018 • Wednesday 30th January 2019 • Wednesday 20th March 2019 	GS	-	
16.	Close of PART A	GS	-	18.50

Board Members (PART A):

Grahame Snelling (GS)	HWK Chair/Trustee Board Member
Nigel Spalding (NS)	HWK Treasurer/Trustee Board Member
Liz Meerabeau (LM)	HWK Trustee Board Member
Nike Alesbury (NA)	HWK Trustee Board Member
William Ostrom (WO)	HWK Trustee Board Member
James Waugh (JW)	HWK Trustee Board Member

Attendees (PART A):

Graham Goldspring (GG)	HWK Active Affiliate, Chair of the Hospital Services Task Group
Ann Macfarlane (AM)	HWK Active Affiliate, Chair of the Community Care Task Group
Tony Williams (TW)	HWK Active Affiliate, Chair of the Mental Health Task Group
Stephen Bitti (SB)	HWK Chief Officer
Adelaide Boakye-Yiadom (ABY)	HWK Projects and Outreach Officer
Laila Awda (LA)	HWK Projects and Outreach Officer (Minutes)

**PART B
(CLOSED MEETING)**

The HWK Board has resolved to go into a private session because discussions might include prejudicial terms. Due to confidential nature of the business covered in this part of the meeting, only Board Members are able to be present for this part of meeting plus an agreed minute taker in attendance.

No	Item	Lead	Paper	Time
FOR DISCUSSION AND/OR DECISION				
1.	Approval of PART B Minutes held 27.03.18	GS	✓	18.50
2.	New opportunities (20 min)	SB	✓	18.55
3.	Local Transformation Board / Health and Care Plan update (10 min)	LM	-	19.15
4.	AOB	GS	-	19.25
5.	CLOSE	GS	-	19.30

Board Members (PART B):

Grahame Snelling (GS)	HWK Chair/Trustee Board Member
Nigel Spalding (NS)	HWK Treasurer/Trustee Board Member
Liz Meerabeau (LM)	HWK Trustee Board Member
Nike Alesbury (NA)	HWK Trustee Board Member
William Ostrom (WO)	HWK Trustee Board Member
James Waugh (JW)	HWK Trustee Board Member

Attendees (PART B):

Stephen Bitti (SB)	HWK Chief Officer (Minutes)
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23.05.18 Healthwatch Kingston Upon Thames Board Meeting Agenda and Papers
Healthwatch Kingston Upon Thames
Board Meeting, Tuesday 27th March 2018 5pm - 7.30pm
At Kingston Quaker Centre
DRAFT MINUTES FOR BOARD APPROVAL

PART A (OPEN MEETING)

Members of the public are welcome to attend this part of the meeting.

Present

Grahame Snelling, HWK Chair/Trustee Board Member	GS	Siân Walker, Independent Chair, Safeguarding Adults Board, Kingston upon Thames	SW
Liz Meerabeau, HWK Trustee Board Member	LM	William Ostrom, HWK Trustee Board Member	WO
James Waugh, HWK Trustee Board Member	JW	Nigel Spalding, Treasurer/HWK Trustee/Board Member	NS
Stephen Bitti, HWK Manager	SB	Laila Awda, HWK Projects and Outreach Officer (Minutes)	LA
Bernard Cudjoe, Member of Public			

No.	Item	Action
1.	Welcome and Apologies 1.1 Grahame Snelling (GS), HWK Chair/Trustee Board Member welcomed everyone. 1.2 Apologies were noted for Nike Alesbury (NA), HWK Trustee Board Member, Ann Macfarlane (AM), HWK Active Affiliate, Chair of the Community Care Task Group, Tony Williams (TW), HWK Active Affiliate, Chair of the Mental Health Task Group, Graham Goldspring (GG), HWK Active Affiliate, Chair of the Hospital Services Task Group, and Adelaide Boakye-Yiadom (ABY), HWK Projects and Outreach Officer.	
2.	Declarations of Interest 2.1 No declarations of interest were made.	
3.	Draft minutes of the meeting held on 24 January 2018 for Board approval 3.1 The minutes of the meeting held on 24.01.18 were approved as a correct record subject to the following changes:	
	3.1.1 James Waugh (JW), HWK Trustee Board Member requested a few minor amends and agreed to email Laila Awda (LA), HWK Projects and Outreach Officer to amend.	3.1.1 JW, LA
	3.1.2 It was noted that items 9.4 and 9.7 of the previous minutes should be listed as actions.	3.1.2 LA

	3.1.3 Item 7.1 of the previous minutes needs the apostrophe in 'chair's' removed.	3.1.3 LA
4.	Outstanding actions report 4.1 The Board talked through the Outstanding Actions Report.	
5.	Guest speaker: Siân Walker, Independent Chair, Safeguarding Adults Board, Kingston upon Thames 5.1 Siân Walker (SW), Independent Chair, Safeguarding Adults Board, Kingston upon Thames introduced herself and explained her statutory responsibilities in ensuring vulnerable adults in the borough are protected. 5.2 SW expressed an interest in setting up a 'community reference group' which would aim to widen understanding within the community of what to do if they see adult safeguarding issues. The group would involve people who have experienced safeguarding matters, stressing the importance of the group being about community engagement and evolving from the grassroots level. Examples of reference groups set up in Lambeth (contact there is Catherine Pearson, Chief Executive, Healthwatch Lambeth) and Devon (contact there is Colin Potter, Chief Executive, Healthwatch Devon) were given, which are run the in form of coffee mornings. A specific interest to engage with the Korean community was expressed. 5.3 A query was made around expenses for persons attending the group and potential costs to HWK. It was stated that refreshments and expenses should be covered for those who attend the group and that discussion over parts that are covered by the Safeguarding Board vs. by HWK can be discussed at a later date, with recognition that some elements of the work of the community reference group would be covered under HWK's contractual obligations with RBK. Concern was also expressed around the time constraints of the HWK staff team and that this should be taken into account. 5.4 It was explained that vulnerable adults were those with care and support needs who cannot protect themselves. There was a discussion around when an issue is or isn't a safeguarding matter. Examples were given to explain that if a person has the mental capacity to understand and weigh up options then there would not be cause for involvement under safeguarding rules, even if it would appear that they were not acting in their best interest.	
	5.5 SW advised that she will provide Stephen Bitti (SB), HWK Chief Officer, with some draft terms of reference for the reference group. SB proposed that this could then be presented to HWK's Joint Task Group Meeting Members to see if anyone in the group had any particular interests in any of the areas.	5.5 SB, SW
	5.6 The Board expressed a desire to pursue potential involvement in the creation of a community reference group and advised that adult safeguarding has been included as one of HWKs priorities for next year. SW and SB will arrange a meeting to further discuss this taking into account costs and resources that may be needed.	5.6 SB, SW
6.	Chair's Report 6.1 The Chair's report was provided and Grahame Snelling (GS), HWK Chair/Trustee Board Member made particular mention that HWK have been exercising their responsibilities lately.	

23.05.18 Healthwatch Kingston Upon Thames Board Meeting Agenda and Papers

	6.2 The trustees were reminded of their safeguarding responsibilities, as referenced in the report.	
	6.3 The status of DBS certificates for the trustees was discussed. The Chair stated that by the end of April all trustees need to either (1) provide confirmation of an existing DBS check to SB (by providing the number and date acquired) or (2) meet with SB to provide documents and complete a DBS application. SB will send out an email listing the documents required and set a date.	6.3 SB, GS, LM, WO, NA, NS, JW
	6.4 A question was raised about the accountability of the Health and Wellbeing Board (HWB) as it is not external to all of the parties it is scrutinising. A discussion on this matter took place. Board members will circulate their thoughts on this matter to JW, with a view to pass to SB to compile them into a letter to Public Health to ensure the mechanisms for accountability are clear.	6.4 JW, GS, LM, WO, NA, NS
7.	Management Report	
	7.1 The Board noted the contents of the Management Report.	
	7.2 The Board reviewed Appendix 7A (3.1 Demonstrating Outcomes DRAFT v5) and discussed whether it was ready to be presented to the new RBK contract holder. Nigel Spalding (NS), Treasurer/HWK Trustee/Board Member expressed a desire to reduce the number of outcomes that HWK collect data on. NS to take away document and circulate an amended version to the Board, following which it was agreed the document can be submitted to the contract holder at RBK.	7.2 NS
	7.3 The Board agreed that the HWK GDPR action/risk mitigation plan (to ensure HWK readiness for the 25 May 2018 GDPR implementation deadline) can be approved by email by JW before the next Board meeting. JW and SB to arrange a date for JW to go to HWK office to discuss this.	7.3 JW, SB
	7.4 The Board approved the development of a HWK Health and Social Care Research Activity Plan for 2018-19 that supports agreed HWK contract delivery and is mindful of the HWK Strategy (currently being developed by the HWK Board).	
	7.5 The Board agree that SB can invite Andrew Osborne to present an update on Kingston Coordinated Care and the Wellbeing Teams at the first HWK Joint Task Groups Meeting on 16 April 2018.	7.5 SB
	7.6 The Board approved the proposal that HWK assumes lead partner role in a funding bid to the commissioner for Children and Young People's engagement programme and the concept that HWK provide a key support role for the proposed 'Youth Health Task Force', pending review of the final Children and Young People's engagement programme proposal.	
	7.7 HWK's role as a Time to Change (TtC) 'organic' hub coordinator was discussed. It was explained that the role would involve facilitating engagement and creating TtC champions. It was stated that a lot of the work required would also be being done under HWKs contractual obligations already, so the TtC hub support could be a good opportunity. There was desire expressed to know more about the resources required so as to not overstretch HWK. The Board approved in principle HWKs role as the TtC 'organic' hub coordinator for Kingston.	
	7.8 It was agreed that SB will progress engagement with TtC and local Kingston partners, to outline what will be expected from HWK as a TtC coordinator and clarify what specific resources will be available from TtC to	7.8 SB

23.05.18 Healthwatch Kingston Upon Thames Board Meeting Agenda and Papers

	support HWK deliver this role, so that the Board may then review, and if agreeable, approve HWK's level of participation.	
	7.9 It was agreed that the 'Grassroots Engagement Programme' HWK Review Panel will sit twice during this second phase application period to allow events to run at dates prior to the review panel date currently set. LA to set a date for this.	7.9 LA
	7.10 The Board agreed that SB invites Chris Jones/Sian Brand to present an update on 'Connect Well Kingston' at the first HWK Joint Task Groups meeting on 16 April 2018.	7.10 SB
	7.11 Regarding the vacancies for HWK representatives on two Sustainability and Transformation Plan (STP) meetings it was decided that no one will be allocated at this stage due to resource limitations and that it will be addressed if HWK are contacted about the lack of representation.	
8.	Finance Report 8.1 The Board noted the statements of income and expenditure to the end of February 2018, which were provided prior to the meeting. 8.2 It was noted that the projected year-end underspend is likely to be around £34k to £36k, which is slightly higher than is required to implement the agreed Reserves Policy of £30.5k	
	8.3 It was agreed that Mary Ryan of Ark Accountancy is appointed as the independent examiner for the 2017/18 accounts at a cost of £600. It was noted that 6 organisations were emailed with an invitation to express interest in being appointed as HWK's independent examiner. 3 organisations did not respond and of the 3 that did respond, the prices quoted were (1) £850+VAT for examination only (2) £800+VAT for examination only and (3) £600 from Ark Accountancy for examination and filing the accounts plus ongoing telephone advice if needed.	8.3 NS
	8.4 NS was authorised to sign the "Fixed Price Agreement" which has already been received and a "formal letter of engagement setting out all the usual legalities". 8.5 The Board approved a 2% uplift in staff salaries from 1 April 2018. 8.6 A season ticket loan scheme available to all employees and template provided was approved. 8.7 The proposed expenditure budget for 2018/19 was approved. 8.8 There was a short discussion about setting up online banking for the HWK Metro Bank account. The costs to do so will include a fee of £5.50 per signatory per month. It was noted that 5 hours was spent at the Metro Bank trying to arrange this. It was agreed that attaining online banking will not be pursued further at this stage. It was also noted that cheques had recently been rejected by the bank, which was remedied but was time-consuming due to the fault of the bank.	
9.	Project and Outreach Officer reports 9.1 The two reports provided prior to the meeting were noted. SB added that an Enter and View visit to Tolworth Hospital took place on 20 th March which was not mentioned in the reports.	
10.	Risk management log 10.1 The Risk Management Log which was presented prior to the meeting was discussed.	
	10.2 It was noted that risk 1 (we create Health & Safety Risks) was the main source of issues. SB and JW will meet to discuss this further.	10.2 JW, SB

23.05.18 Healthwatch Kingston Upon Thames Board Meeting Agenda and Papers

	10.3 It was noted that Safeguarding Risks were being dealt with.	
	10.4 It was noted that having insufficient insurance coverage was one of the risks. There is an insurance document on HWKs 'One Drive'. NS to arrange insurance renewal.	10.4 NS
	10.5 Risk 5 'unable to operate following a business continuity event' will be discussed by JW and SB when they have a meeting regarding GDPR.	10.5 JW, SB
	10.6 SB to take an inventory of all office equipment alongside PAT testing to mitigate item 10 on Risk Management Log 'we are unable to operate due to loss of or malfunction of equipment'.	10.6 SB
	10.7 The remaining risks and leads were run through with an agreement that things were being done to mitigate the risks which placed HWK in a better position.	
	10.8 The Risk Log will be presented every other Board meeting - SB to diarise this to ensure on agenda.	10.8 SB
	10.9 There was a proposal to add a category to the Risk Log about lone working / challenging people on the premises. This will be discussed further in part B of the meeting.	
11.	Health and Safety Policy & Health and Safety Risk Assessment 11.1 SB presented the documents to the Board having highlighted the parts that have been changed. The Board agreed to the changes made and were happy for these documents to be used.	
12.	Approach to Volunteering and Authorised Representatives List 12.1 Apologies were noted for NS, who stated prior to the meeting that she was keen for discussion on volunteering to progress in her absence. 12.2 The Board noted the contents of the report provided prior to the meeting. Thanks were expressed to NA for the comprehensive paper which marked an excellent look at a proposed volunteer strategy for HWK.	
	12.3 Regarding the two Healthwatch volunteering web pages directed to in the report it was noted that Healthwatch Gloucestershire uses a different template to that of HWK.	
	12.4 The Board agreed that HWK redesigns the Volunteering pages using more images, agreed language and specific role opportunities. LA to speak with William Ostrom (WO), HWK Trustee Board Member about looking at the volunteering pages design further.	12.4 WO, LA
	12.5 There was a discussion around Active Affiliates (AAs) and the use of this terminology. It was proposed that existing AAs keep this title and that the terminology used for advertising is 'volunteers' in order to be more inclusive. It was recognised that there was merit in differentiating the terms but that it needs to be thought through further to ensure it works for existing AAs. It was agreed that new language can be used on advertising / promotional material but that the term AAs will not be suddenly removed. 12.6 The contents of the HWK Authorised Representative report were noted. 12.7 The list of meetings attended by HWK was discussed. It was felt that a new category of time-limited meetings might be added for meetings such as the Murray house partnership group and the Kingston hospital blue badge meeting.	
	12.8 The number of meetings that SB attends and whether all are worthwhile, in light of the fact that HWK is now working at capacity was raised. SB noted that it was vital to sit on many of these to progress the work of HWK. It was noted that not all will be attended depending on availability. This will be reviewed by SB and GS.	12.8 GS, SB

23.05.18 Healthwatch Kingston Upon Thames Board Meeting Agenda and Papers

13.	<p>Task Group Reports/Minutes 13.1 The Board noted the contents of the reports for the Community Care Task Group, Hospital Services Task Group and Mental Health Task Group, which were provided prior to the meeting.</p>	
14.	<p>AOB 14.1 The Board asked about what was happening regarding the closure of Murray house. SB advised that he was unable to attend the meeting held on the matter. SB will follow up on this and circulate any updates to the Board.</p>	14.1 SB
	<p>14.2 No other business was raised.</p>	
15.	<p>Date of next meeting 12.1 The next meeting is due to be held on Wednesday 23rd May 2018, 5-7.30pm, in the large meeting room at Kingston Quaker Centre.</p>	
16.	<p>Close of PART A</p>	

HEALTHWATCH KINGSTON UPON THAMES

CHAIR'S REPORT TO BOARD

23.5.18

Introduction

As this report is being written Kingston Council has just experienced a significant electoral change with the Liberal Democrats now running the administration. HWK will be eager to learn about their intentions insofar as they relate to the development of more joined up health and social care services as envisaged by the previous administration. Whilst it appeared that previously there was a broad political consensus about the direction of travel it will be interesting to see if there are any shifts in emphasis or priority. We have written to the Leader of the Council offering congratulations and an invitation to meet.

Meanwhile the business of Healthwatch continues and as ever I am grateful for the work of Stephen and the team as well as my fellow board members that enables us to continue to provide that essential consumer voice. This report highlights a few areas of our work that merit mention at this time.

Hospital Quality Accounts

Each year hospitals have to report their performance to NHS England and local Healthwatches are invited to contribute by commenting on the reports that are produced. Kingston and SWL St Georges both invited us to make comments on their draft submissions in April but the turnaround time for us to be able to comment meaningfully on pages of technical data proved a challenge. Therefore, we have asked for a better system next year and we plan to meet with representatives from Kingston in the first instance next month to discuss options. Our policy this year has been to focus on areas of practice – such as discharge – where we have previously had an interest or raised concerns brought to our attention by our affiliates, and to complete an in depth study of the relevant data in these areas. It is important for HWK to study these lengthy documents as they give valuable clues about what is going well and where needs improvement. In this way we can ask the right questions and hold the hospitals to account on behalf of local service users and their carers.

GDPR

Elsewhere on this agenda there will be a consideration of HWK's approach to achieving compliance with the requirements of the GDPR which comes into force on May 25th. Considerable energy as well as staff and board time, has been expended to making sure all our communication and recording systems are correctly aligned to meet our statutory obligations. Thanks to James Waugh from the board and Stephen for their hard work here.

Work with Children

I'm pleased to report on progress in discussions with the Children's Health Commissioner in Kingston about securing resources to develop a broad range of consultation and engagement schemes to involve children as consumers of healthcare. Whilst at the time of writing these negotiations have not yet been concluded there is some optimism that we will learn shortly about their positive outcome. If progressed this will be an important service development which will enable us to meet one of the key expectations of the bid we made to the Council in the autumn of 2016

Safeguarding

At our last meeting Sian Walker the Chair of the Adult Safeguarding Board (ASB) invited us to work with the ASB to develop a community reference group of service users and carers who had been users of or had experience of the Safeguarding service. This is a very important aspect of ensuring that organisational learning is enhanced in order to improve responses to safeguarding concerns that are

reported or observed. As stated before, when we undertake Enter and View visits, we are in one sense community eyes and ears so we are well placed to be involved in developing this initiative. We have also taken steps to improve our own knowledge through the provision of a training course for staff, board members and active affiliates last month.

Future challenges

As we start to think about our annual report and what we achieved in 2017/18, we have already identified our priorities for the year ahead and these have been reported elsewhere. More broadly however there are challenges ahead nationally and locally for the NHS and Social Care that we must be alert to, and for ourselves, and so it's helpful to start to list these as we scan the horizon in the year ahead. This list is not exhaustive but as a starter the following are suggested:

- Impact of change of local administration
- The integration agenda in Kingston and the role of the Health and Wellbeing Board
- NHS funding gaps – the local impact
- Brexit – the effect on key staffing levels in local health care services
- Making the quality account process meaningful in years to come
- Our own capacity to respond effectively to local concerns or campaigns – e.g. hospital car parking
- Sustaining the high scrutiny profile that we developed with the previous Council administration

Conclusion

We start this new financial year in good shape organisationally and in terms of our governance arrangements. The annual report will be the place to comment in more detail on the journey we have made since April 2017, but it has been one of both challenge and excitement as the indicators now suggest that we are delivering an efficient and valuable consumer champion service to Kingston residents.

Grahame Snelling
Chair Kingston Healthwatch – May 16th 2018

Healthwatch Kingston Board Meeting (Part A)	Date: Wednesday 23 May 2018
Report Title: Chief Officer's Report (28 March to 22 May 2018)	Author: Stephen Bitti, HWK Chief Officer (SB)
PART A Agenda Item: 6	Appendices: Yes (6A/6B/6C/6D/6E)

FOR DISCUSSION AND/OR DECISION

The purpose of this report is to update the HWK Board on recent HWK Team activities and progress in relation to projects and action plans. The Board is requested to:

1. Note the contents of the HWK Management Report (28 March to 23 May 2018) and the Appendices
2. Review **Appendix 6A** (Revised DRAFT HWK Privacy Statement) for comment/approval under 'GDPR' Item 9 of the Agenda
3. Review **Appendix 6B** (DRAFT HWK Retention and Record Keeping Policy and Procedure) for comment/approval under 'GDPR' Item 9 of the Agenda
4. Review **Appendix 6C** (DRAFT HWK Retention Schedule) for comment/approval under 'GDPR' Item 9 of the Agenda
5. Review **Appendix 6D** (DRAFT TTC MoU) for comment/approval

6.1 New HWK contract holder at RBK

Waiting to hear from RBK who will be nominated.

6.2 SWL HW Network Meeting

Next meeting to be hosted by HW Richmond in July.

6.3 HWK and General Data Protection Regulation (GDPR)

We have allocated time within the HWK Board Agenda (23.05.18) Item 9 for a discussion on GDPR governance and implementation but for record, here is a brief summary.

A substantial amount of time has been allocated to date to ensure HWK will be either compliant, or have a plan in place to become compliant with GDPR. I have been working with James Waugh, HWK Trustee to develop and implement a HWK GDPR Action Plan that leads us up to and beyond the deadline for compliance of Friday 25th May 2018. This includes:

HWK GDPR Action Plan

GDPR - What we have done tom date (as of 18.04.18)

- Staff have completed GDPR training to ensure awareness and operational compliance
- Reviewed Information Commissioner’s Office (ICO) GDPR guidance
- Sent a ‘Healthwatchers ☺ Opt in! or Miss out!’ email to our complete contact list and included additional personal email contacts (e.g. Board, staff and volunteers) via MailChimp, requesting consent for us to contact people beyond 25.05.18
- Created a revised DRAFT HWK Privacy Statement (PS), based upon HWE guidance and also extensive consultation with local HW colleagues (See Appendix 6A - this is for review and then an approved and ‘accurate’ version of the revised HWK Privacy Statement needs to be published on our website by 25.05.18)
- Created a DRAFT ‘HWK Retention and Record Keeping Policy and Procedure’ (See Appendix 6B) and a DRAFT ‘HWK Retention Schedule (See Appendix 6C)
- Shredded paper records which identified personal data that was no longer valid
- Clarified that HWK is Data Controller
- Clarified that our website host Heart Internet (GB) and MailChimp are Data Processors (there may well be others)
- As an interim measure - until a permanent solution is found to name a Data Protection Officer (DPO) - identified James Waugh, HWK Trustee, as the Board member with lead oversight for HWK GDPR compliance

GDPR - What we will do (by 25.05.18)

- Send a REMINDER 'Healthwatchers 😊 Opt in! or Miss out!' email to our complete contact list etc.
- Upload a revised HWK Privacy Statement to the HWK website

GDPR - What we plan to do (after 25.05.18)

- By 25.07.18 Create new and review existing HWK policies to ensure GDPR compliance
- By 25.07.18 Create an HWK Information Asset Register
- Continue to seek a solution for HWK to appoint a DPO

6.4 HWK Joint Task Groups Meetings 2018-19

The first Joint Task Group Meeting took place on Monday 16 April. Time was allowed within the agenda for individual Task Groups to identify and agree their Task Group specific research project for 2018-19. Meeting notes for each Task Group are provided at Item 13.

6.5 'Thrive Kingston' Mental Health Strategy Implementation Group

Kingston CCG and other key stakeholders have agreed to our proposal to merge the now former Mental Health Planning Board with the MHSIG (which is chaired by SB-HWK). The first combined MHSIG (plus MHPB) took place on Wednesday 2 May. Dates have now been identified for future meetings through to end of March 2019.

6.6 'Time to Change' - Kingston upon Thames 'organic' hub

An MoU between HWK (with RBK) and Time to Change (TTC) is provided for Board review and approval (See Appendix 6D). This is a TTC doc - standard - that all TTC Hosts need to sign up to - we were allowed to tweak it to fit our local structure.

We would be a local 'organic' TTC hub (so no funding but various training/facilitation/Comms and other media resources etc.) - All the work is to be done in partnership across a range of local organisations (RBK, Mind Kingston etc.) - and HWK would act as the Kingston TTC Hub coordinator and facilitator for local people with lived experience of mental health to become TTC Champions - a great way to simultaneously engage with local people and promote HWK. The aim here is to work it so that what we need to do as part of the work committed to locally to achieve the Thrive Kingston Strategy and parts of the HWK RBK contract etc. will at the same

23.05.18 Healthwatch Kingston Upon Thames Board Meeting Agenda and Papers
time fulfil the ask from TTC. I've already been working with colleagues to merge TTC into other work streams e.g. TTC support for CYP is quite extensive and will augment/support other opportunities in pipeline.

TTC made it clear at their induction event they are very light touch on their monitoring and that aspirations are just that and are there to drive commitment.

There is an emergent plan to run the required TTC Steering Group (back-to-back with the scheduled MHSIG as a way to create opportunity for people with lived experience (TTC Champions) to engage with other key stakeholders. HWK and other TTC partners are attending a series of TTC training events. Three of which have been hosted by HWK at KQC.

6.7 'Thrive London'

A lead for Thrive London attended the MHSIG on Wednesday 2 May. A meeting has now been set up between reps from HWK/RBK and TL to explore opportunities for support with local MHS delivery.

6.8 'Grassroots Engagement Programme' 2017-18 Review Panel timing

The Grassroots EP application period is now closed. The HWK Review Panel is due to meet on Monday 21 May. Remaining funding is limited due to the high volume of previous applications and the 'first come first served' guidance on funding distribution. Competition will therefore be tough as there have been a high number of applications submitted near to deadline.

6.9 Social Prescribing - 'Connect Well Kingston'

The HWK Community Care Task Group has identified they wish to be engaged in the Connect Well Kingston development work and then plan to evaluate its effectiveness when up and running.

6.10 Blue Badge Parking at Kingston Hospital

The Board have been forwarded recent communications from Kingston Hospital on this, linked to the review and Kingston Hospital's decision to pause charging for a period so further survey can take place. HW Richmond and SB from HW Kingston have been invited to a meeting (on Monday 21 May) with Sally Brittain, at Kingston Hospital so she can share findings from the review to date with local HW.

6.11 Youth Health Task Force

Development work with local stakeholders has progressed to support HWK to better engage with children and young people. An outline for the proposed Kingston and Richmond Youth Health Task Force is provided as an Appendix to inform Item 2 of Part6 B of this meeting for Board review and is linked to other opportunities to engage with CYP.

6.12 New opportunities

A number of opportunities have arisen for consideration by the HWK Board. Time has been allocated to discuss these during Part B of the meeting.

6.13 Health and safety update

We have recently reviewed health and safety at the HWK office. As part of this staff have reviewed and revised the 'HWK Lone Working Policy' which is presented for Board review and approval at Item 10 of this HWK Board meeting (23.05.18). Various options were considered but we have now agreed (with the Kingston Quaker Centre) to install a Wi-Fi video intercom on either side of the HWK office door. This will facilitate safe conversation between HWK staff (behind a locked office door) and visitors to the KQC.

Appendices to follow.

Healthwatch Kingston Board Meeting (Part A)	Date: Wednesday 23 May 2018
Report Title: Finance Report	Author: Nigel Spalding, Treasurer, NS
PART A Agenda Item: 7	Appendix: No

FOR DISCUSSION AND/OR DECISION

The Board is asked to:

1. *Note* the attached provisional **statement of income and expenditure** for 2017/18. These have been produced on an accruals basis and are subject to further possible adjustments and then review and confirmation by our independent examiner.
2. *Note* that the provisional figure for the balance held as at 31 March 2018 is £41,249.95, of which £4,246.40 is for expenditure on Grassroots Projects in 2018/19. This means that £37,003.55 is the amount carried for general use on HW Kingston.

23.05.18 Healthwatch Kingston Upon Thames Board Meeting Agenda and Papers

INCOME 2017/18		
	Budget	Income to 31 March 2018
RB Kingston	122,000.00	121,999.92
Grassroots Project	10,000.00	10,000.00
Waitrose donation		375.00
Re-imburement from Malden Fortnight		20.00
Re-imburement for Home Care events		540.07
Re-imburement for Healthy Teeth project		130.65
TOTAL	132,000.00	133,065.64

EXPENDITURE 2017/18		
RBK CONTRACT	Budget for year	Expenditure to 31 Mar 2018
START UP COSTS		
3 new PCs and software	2,076	2,075.92
Telephone and internet connections	786	786.00
IT Set-up and Helpdesk	1,200	1,450.94
Registration with the Information Commissioner	35	35.00
ADMINISTRATION COSTS		
Insurance	1,677	1,676.55
Photocopier maintenance contract	1,400	1,524.76
Independent Examination of Accounts	50	-
Rent of Community Venues	1,000	462.83
Companies House Annual Return	13	26.00
Legal and professional fees	1,000	696.00
Other Equipment	1,000	1,843.20
COMMUNICATION COSTS		
Printing	1,000	219.30
STAFF COSTS		
Salaries, including Employer's NI and pension	80,000	66,863.78
Additional staffing/staffing costs	3,000	3,003.12
Staff recruitment	1,200	1,096.00
DBS checks for employees	150	116.80
Staff training and attendance at conferences/workshops etc	1,500	582.00
Payroll service	720	440.64
EXPENSES		
Staff travel	500	167.35
Volunteer expenses	500	2.94

OVERHEADS			
Office Rental		6,600	6,600.00
Telephone/Internet		1,500	1,294.71
Stationery & Postage		1,500	482.45
Consumables and cleaning materials		500	618.54
Journals and Subscriptions		500	-
TOTAL RBK CONTRACT		109,407	92,064.83
GRASSROOTS PROJECT TOTAL		6,700	2,453.60
RE-IMBURSEMENTS			
Home Care Events (re-imbursed)		-	540.07
Healthy Teeth, Healthy Kids Project (re-imbursed)		-	81.65
GRAND TOTAL		116,107	95,140.15

Healthwatch Kingston Board Meeting (Part A)	Date: Wednesday 23 May 2018
Report Title: Projects and Outreach Officer	Author: Adelaide Boakye-Yiadom, Projects and Outreach Officer
PART A Agenda Item: 8	Appendix: No

FOR DISCUSSION AND/OR DECISION

The purpose of this report is to update the HWK Board on recent and planned Projects and Outreach.

1. Please may I request the support of 1 member of the board who would be able to work with me to review and sign off the final report for the Enter and View visit to Tolworth Hospital on behalf of the Board

9.1 Future Home Care Provision in Kingston

The 'Future Home Care in Kingston - Community Engagement Report' has been checked by Nigel Spalding and has been published on the HWK website. It has also been sent to the board, our partners (KCIL, KCN, RBK), the Community Care Task Group members, those who attended the workshop, and who completed the online survey and all those who expressed an interest and requested that the report once it was completed to be either emailed or posted to them.

9.2 Outreach and community engagement events

1. LA and I facilitated a HWK Information and Advice Session for the Rise Community Cafe members on 11/4/18 - Alison Chivers from the Job Centre and Nina Khan, a Disability Employment Adviser from the Job Centre came and provided group/1 to 1 support
2. LA and I attended a grassroots event by KCAH on 30/4/18. This was a Photography Exhibition held at the United Reform Church in Kingston - we received feedback on services from those experiencing homelessness, substance abuse problems and mental health matters.
3. LA and I facilitated a HWK Information and Advice Session for the Rise Community Café members on 16/5/18 - Matt Hatton from Kingston Churches Action on Homelessness (KCAH) came in to provide group/1 to 1 support
4. LA and I have planned the next workshop session for Rise the Rise Community Café on 13/6/18 - for this session we have arranged for advisors to come in from the Kick It stop smoking service & Cancer Screening Advice.

9.3 Enter and View Visit -Tolworth Hospital

23.05.18 Healthwatch Kingston Upon Thames Board Meeting Agenda and Papers

Tony, Stephen and myself and members of the MHTG carried out an Enter & View Visit to Tolworth Hospital on Tuesday 20th of March 2018

1. The 1st draft of the report has been completed and has been sent to all the affiliates who were involved in the visit to get any comments on what has been written up and also to check that myself and TW have made the right call with the recommendations. The deadline for people to get back to me with any feedback is Friday 25th May

Summary of findings

- Accessibility - People do not always get the help they need early enough when they develop problems - the system requires more responsive, coordinated and flexible mental health support
- Choice and consistency - Involving people and their families and giving them more choice about how their care is delivered is the key to helping them feel in control of their care
- Communication - sharing information and knowledge is paramount, health care providers need to provide support both clinically and in the community
- Needs led Care - to be effective, mental health services should be designed on a needs-led basis rather than a service led basis. This means adapting services to users' needs

Themes

- GP's are not all well informed on how to refer people into the local mental health system and this will be highlighted to the CCG - if the trust has observations on this issue we would like to hear them
- The new telephone system was almost universally disliked; the way callers are initially referred to St Georges Hospital before being transferred to Tolworth which means the process feels disjointed

2. After this the draft will be sent to SB for review (w/c 28/5/18)
3. Once approved by SB the report will be sent to Tolworth Hospital for their review and response to our recommendations (w/c 4/6/18)
4. The report will be sent to the lead board member assigned to be signed off (w/c 18/6/18)
5. A copy of the report will then be sent to HWE (w/c 25/6/18)
6. The report will be published on the HWK website (w/c 2/7/18)

Healthwatch Kingston Board Meeting (Part A)	Date: Wednesday 23 May 2018
Report Title: Projects and Outreach Officer	Author: Laila Awda (LA), Projects and Outreach Officer
PART A Agenda Item: 8	Appendix: No

FOR DISCUSSION AND/OR DECISION

The purpose of this report is to update the HWK Board on recent and planned Projects and Outreach.

1. 9.3 Brian Gaff of the talking newspaper commented that our MailChimp GDPR form was not accessible. We may need to look into how accessible our communications are going forwards.

9.1 Children's Oral Health

The 'Healthy Teeth, Healthy Kids' report has been checked by Liz Meerabeau and Emily Humphries, Public Health at RBK, and published on the HWK website. The JSNA which this engagement fed into will be published by Public Health RBK in May / June 2018.

9.2 Outreach and community engagement events

ABY and I attended a grassroots event by KCAH and received feedback on services from those experiencing homelessness, substance abuse problems and mental health matters.

There are two more events scheduled for June 2018.

ABY and I facilitated an information and advice session with RISE where Job Centre Plus attended

9.3 GDPR opting in

I have sent an email that Stephen, Adelaide, James and I drafted to ask our 635 subscribers on MailChimp to opt in to receive our email updates following the GDPR coming into force 25 May 2018. I also publicised this on social media. We have had some feedback from Brian Gaff of the talking newspaper that the MailChimp form was not accessible to him, being visually impaired and reliant on technology to read pages to him. This is something we may need to look into going forwards to ensure our communications are accessible. We currently have 80 who have responded as of 11am on 17 May 2018. A reminder will be sent prior to the deadline.

I also spoke with about twenty previous affiliates whose details we had on paper files to ask if they wanted their details kept / provided them with an update on our work. Some gave feedback on what working with HWK was like in the past - several saying it was too time consuming. Three have said they would be interested in re-engaging with us and I hope to see them at one of next JTGMs.

9.4 Discharge Project

Worked with the HS task group on developing the questionnaire for this and will progress the project over the next few months. Currently submitted the redrafted application form to Kingston Hospital for their feedback.

9.5 Website updates

1. Bios and images on site updated (except one which I will do shortly)
 2. I have added a new signposting page which will be updated as we encounter local organisations.
 3. I have also added a current projects section, which we can update further to give information about our main three projects this year.
 4. With the assistance of Nike and William I am working on the volunteering section of the website as well (the image below shows the page layout draft but I have not yet created all of content for all of the pages such as the role descriptions - I aim to have this ready for the next joint task group meeting on 18th June.
- I have created a shortened version of the application form and made it an online form. The new web page layouts are on the following pages.



Volunteer With Us

Interested in volunteering with us? Great! Filling out the application form below is your next step, it's easy and there's no obligation. Once we've received your form we'll get in touch with you to invite you in for an informal chat about volunteering.

We will store your information securely and won't share your details with anyone else.



Name

Address

Phone Number(s)

Email

Date Of Birth

Day ▼ Month ▼ Year ▼ 

How did you hear of Healthwatch Kingston?


Please use this space to tell us about any skills, experience or knowledge you have that may be relevant to being a volunteer

Please provide us with an idea of the dates and times you may be available to work with us

Submit

Upcoming events

Jun 18	Joint Task Group Meeting
Aug 20	Joint Task Group Meeting
Sep 14	'Neurodiversity Arts Festival'

 @HWKingston

Tel 020 3326 1255

info@healthwatchkingston.org.uk

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Our Current Projects



Hospital
Discharge




iCope
Review



Social
Prescribing

Upcoming events

Jun 18	Joint Task Group Meeting
Aug 20	Joint Task Group Meeting
Sep 14	'Neurodiversity Arts Festival'

 [@HWKingston](#)

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REVISED LONE WORKING POLICY AND PROCEDURES

Statement of Policy

The safety of staff is of paramount importance to the Healthwatch Kingston upon Thames Board. The Board will seek to take all appropriate and realistic action to protect the safety of staff when they are working on their own either in the office or away from the office.

Procedures

In the office:

- A sign will be maintained on the office door at all times that asks callers to please knock and then wait for attention. This is to discourage anyone walking into the office without being greeted at the door.
- Whenever there is only one person in the office, the office door will be kept locked and callers to the centre or the Healthwatch Kingston upon Thames offices will be communicated with through an intercom on either side of the locked office door
- Any member of staff working alone in the office who is feeling concerned by a visitor to the centre should feel free to telephone their line manager at any time
- In any situations of threat while in the office, the panic alarm (located on the nearby wall) should immediately be activated
- With the exception of board members and known employees of other organisations, anyone working alone in the office must not meet visitors in the office. Instead, they may meet them somewhere in the building that is visible to other users of the Centre. If this is difficult to arrange, then another time should be arranged for the meeting.

An Incident Book will be maintained in the office in which staff will record any circumstances raising concern. Any entries will be reported to a Board member asap for review and may be discussed with the management of the Kingston Quaker Centre so that any suitable preventative action can be identified and carried out.

Out of the office:

- Any member of staff leaving the office for a meeting should inform their line manager or a colleague where they are going, who they are meeting with, their contact details and at what time they expect to return (or if they do not intend to return because it is the end of the working day). If there is no member of staff available to inform, written details should be left visible on a suitable desk in the office
- Meetings with individuals be held in venues that are visible to the public.
- If it is necessary, for a meeting to take place in someone's home, the meeting must be attended by two members of staff.

(Proposed revision 18.05.18 for approval by the HWK Board at the Board meeting on Wed 23 May 2018)

Meeting note: Community Care Task Group (CCTG)
Date: 16.4.18 Time: 1.45pm to 2.45pm
Name of note taker: Laila (LA) laila@healthwatchkingston.org.uk
1. What was discussed? (Headline bullet points)
1.1 The outstanding actions log was run through by the CCTG.
1.2 AM advised she is working on getting the names from Evolve of people interested in taking part in the CCTG.
1.3 The responses given to questions posed over the Locality & Wellbeing Teams Report to HOP 28th March 2018 were mentioned - NS will send a transcript of response to questions that HWK asked about Locality & Wellbeing Teams Report to HOP 28th March 2018 to LA to circulate to task group
1.4 NS reported on some work on how GP appointments are made in surgeries across the borough by extracting information on their website. NS compiled this into a document which was sent to Hannah Keates (NHS Kingston CCG). A spreadsheet of information will be sent to all surgeries with the hope that they will see what other surgeries are doing and improve their websites and access to appointments. NS will continue to share information about this project with the TG
1.5 The task group spoke about the priorities for next year. Social Prescribing was highlighted as a research project that could be undertaken alongside Sian Brand (Kingston Voluntary Action) and Chris Jones (RBK Adult Social Care).
1.6 The task group suggested ways that HWK could be involved in evaluating Social Prescribing including: (i) the IT design stage (IT system will be launching at the end of May), (ii) the patient experience stage (keeping in mind that it is not until the end of the year people will actually start to be referred), and (iii) the impact stage (later down the line) i.e. has it reduced numbers of people going to hospital.
1.7 It was suggested that a cohort of people in the community could be asked about whether they are using social prescribing services as well as asking those who have been referred by connect well and Macmillan.
1.8 The methods for gathering feedback were discussed and it was suggested that people could be asked via surveys, phone questionnaires (possibly recruiting volunteers for this), focus groups and online surveys.
1.9 AM raised the matter of whether there is a successor in line to chair the CCTG meeting following Ann stepping down in September 2018. It was advised that at present there is not.
1.10 Other topics for the CCTG to discuss in later meetings was discussed.

- 1.11 The CCTG agreed that they should keep informed about on Kingston coordinated care (KCC), the locality and wellbeing teams and the development of Multi-Disciplinary Teams, noting that there should be updates on these in Autumn.
- 1.12 The group stated that they would also like to keep an eye on Home Care provision in RBK and question the sustainability of RBK now having one provider and spot purchasing of additional Home Care needed.

2. What are the actions, by who and by when? (Headline bullet points with a date for completion)

- 2.1 AM will get names from Evolve of people interested in taking part - hopefully by next meeting
- 2.2 NS to send transcript of response to questions that HWK asked about Locality & Wellbeing Teams Report to HOP 28th March 2018 to LA to circulate to task group before next meeting
- 2.3 LA to ask AO to invite KKC Advisory group members to our task group before next meeting
- 2.4 Follow up items to speak to Sian Bates and Chris Jones about: What data will you be collecting to demonstrate data and if it is working? How can we be involved and what are you looking for? - would be good to formulate 6 questions with help of other TGs to ask about social prescribing.
- 2.5 LA / team to contact those previously involved in Home Care report and see if they wish to be involved in task group/s before next meeting.

Signed as accurate by the Chair:

Date:

Task Group name: Mental Health Task Group

Date of meeting: 16/4/18

Name of note taker: Adelaide Boakye-Yiadom ([Projects and Outreach Worker HWK](#))
adelaide@healthwatchkingston.org.uk

3. What was discussed?

- 3.1 The MHTG did not look at the Outstanding Actions Report Action Report (OAR) from the last meeting held 8th March 2018
- 3.2 The group began the session discussing what their research project would be for 2018/2019
- 3.3 Firstly, the iCope service was discussed, the task group work has already started the background work on the retendering of the service which will be in March 2019
- 3.4 Information has been provided to the task group from the service and TW has done some number crunching
- 3.5 The task group will carry out 1-2-1 assessments with service users as well as develop an online survey to look at both qualitative and quantitative information
- 3.6 The areas of interest will include how it is decided what service people are offered and will also look at once referred who doesn't engage and why.
- 3.7 RR has produced a flyer to promote this work
- 3.8 It was agreed that Personality Disorder issue was a very important issues and that a lot of work was now underway after a bit of a lapse it was agreed that it should be kept on the agenda and that the task group would keep a close watch on the progress that was been made
- 3.9 After a vote the majority consensus was that research area for the MHTG would look at 'Referrals and Outcomes of Mental Health Issues', areas of particular interest were: -
 - GP's capability/knowledge to do the right thing when someone presents with a mental health issue
 - How well do GP's refer to the iCope service?
 - Getting feedback from people who have used the iCope service

- Speaking to GP's themselves - it was suggested a couple of the members of the MHTG could attend GP Chambers
- To do some 1to 1 interviews and send out questionnaires to gather information to understand the process of how people get into the situation of needing help in the first place - what are their life circumstances?

3.10 JB felt that we should stick to iCope Review for our research project as she felt it would very difficult to get all the information from the different sources for the above project.

4. What are the actions, by who and by when? (Headline bullet points with a date for completion)

- 4.1 TW to arrange a scoping workshop on the chosen research project before the next Joint Task group meeting
- 4.2 The group suggested that we invite someone from the Commissioning Group to the next meeting on the 18th of June to give an update on the commissioning arrangements in the borough. This was also discussed in the feedback session and it was agreed that this person would present to all the task groups in the joint session of the meeting. ABY to discuss with TW and SB who best to invite.

Signed as accurate by the Chair:

Date:

Meeting note: Hospital Services Task Group (HSTG)

Date: 16.4.18 **Time:** 1.45pm to 2.45pm

Note taker: Stephen Bitti (SB) stephen@healthwatchkingston.org.uk

1. What was discussed? (Headline bullet points)

- 1.1 HSTG reviewed the **Outstanding Actions Report (held 22.04.18)**.
- 1.2 OAR (22.04.18) Ref. 2.2 (a proposed Enter & View of the Royal Eye Unit at Kingston Hospital) was looked at as part of the discussion about what the HSTG research project would be for 2018-19. It was agreed that this would now be postponed and assessed by the group for relevance next year, due to capacity of HWK staff team to appropriately support more than one research project for the group across any one year.
- 1.3 OAR (22.04.18) Ref. 4.3 to 4.8 were relevant to the discussion about the HSTG research project.
- 1.4 OAR (22.04.18) Ref. 5.4 and 5.5 (Student Volunteering at HWK) was discussed and the HSTG is keen to engage with young people attending Kingston University. The HSTG discussed various events that could be useful to attend, and these included - Student Volunteering Week, Fresher's Week and Volunteering Week (in June). SB supported this, raised that work in this area had already begun which involved the HWK staff team and the Board (being led by NA). SB stressed that any approach to students on behalf of HWK needed to be coordinated and include involvement from Active Affiliates, staff team and Board. SB emphasised that this work must be driven by the emergent HWK volunteering strategy.

- 1.5 It was noted that working with the HSTG (or other TGs) would be one of a range of HWK volunteering opportunities for students.
- 1.6 The HSTG then discussed and agreed that 'Discharge from Kingston Hospital' should be their research project for 2018-19 and the research method would be dissemination of the HWK questionnaire, as this work was already in the pipeline.
- 1.7 GG thanked Nigel Spalding for his work finalising the questions for the 'Discharge from Hospital' questionnaire and it was then approved.
- 1.8 The HSTG discussed a range of questions about the to ask at the Sarah Gigg/Elizabeth Tsangaraki Wilding/GG/SB meeting at Kingston Hospital on 26.04.18 about how we might approach this with the help of Kingston Hospital, e.g. What channels would we be able to use to solicit views? What would be a meaningful number of responses? What would be an ideal timeline for the research? (6-months?)
- 1.9 A&E was considered as a possible other topic for the HSTG to discuss as part of their meetings this coming year, along with patient complaints.
- 1.10 PC and GG tabled a proposed draft HWK Members Feedback form that has been developed to engage local people with a series of prompts about their experiences of hospital services. SB welcomed the approach and NA suggested this could be sent out to our mailing list as part of HWK preparations for General Data Protection Regulation (GDPR) implementation by 25 May 2018. SB wanted to review this request when the initial GDPR email is finalised. SB didn't want to overload recipients with too much information and it was felt that the HWK Members Feedback form might be better sent out as a second confirmation email. The HSTG understood this concern and agreed.
- 1.11 GG said he would not be able to attend the next HSTG and requested that work be done in advance to allow the meeting to be productive.

2. What are the actions, by who and by when? (Headline bullet points with a date for completion)

- 2.1 SB to send out Student Volunteering Case Study papers to HSTG members before next HSTG meeting.
- 2.2 The HSTG, HWK staff team and NA to look out for local events that HWK might be able to 'piggy-back' into that might lend themselves to promote volunteering opportunities.
- 2.3 SB to meet with GG to plan structure for the next HSTG meeting on Monday 18 June 2018. The group discussed that the meeting could focus on feeding back the outcome of the meeting with Sarah Gigg to HSTG members and then create a draft project plan/timeline.

Signed as accurate by the Chair:

Date:

Healthwatch Kingston Board Meeting (Part A)	Date: Wednesday 23 May 2018
Report Title: Hospital Services Task Group Report (28 March 2018 to 23 May 2018)	Author: Graham Goldspring, Chair HSTG (GG)
PART A Agenda Item: 13	Appendix: No

FOR DISCUSSION AND/OR DECISION

The purpose of this report is to update the HWK Board on the project on Discharge from Kingston Hospital and regular updates on Complaints and Concerns.

At the first Joint Task Groups meeting on 16th April, the Hospital Services Task Group agreed to focus on continuing the project on Discharge as the major piece of work for the current work year. In the last report, I stated that a meeting would take place with Sarah Gigg at Kingston Hospital to discuss a collaborative approach. This meeting took place on 26th April with myself, Stephen Bitti, Sarah Gigg, Elizabeth Tsangaraki Wilding, Samantha Finn (Discharge nurse) and Nicola Kane, Deputy Director of Nursing (Clinical). It was observed that our questionnaire covered a wide range of situations for all patients. For many, some questions would not be relevant. It was proposed to amend the questionnaire with a specific target group in mind. Sarah Gigg left the Trust at the end of April.

The hospital has had feedback that communications is a major issue in discharge and we agreed to work towards this area in the project. The hospital is planning to run the Always survey, which is interactive and involves real time patient feedback. It is positive and stresses the things staff will always do to make best services. It was felt that short term survey could be the best option - to be run over 4 weeks. It could be repeated twice. It is best to avoid the In-patient survey period in September and October so the first survey could be done in July and the second in October/November. Consequently, the task Group met on the 10th May to review the questionnaire, making changes to be in tune with communications as a focus. This version will be sent back Elizabeth for the discharge to feedback their comments. At this point I would emphasise that Stephen did make it clear that our survey must be questions set by the task group so that the project is independent and impartial. It is proposed to have the questionnaire ready for distribution to patients in July and that the office team would arrange for channels of survey returns.

Recruitment - Ideas were raised to explore Healthwatch engaging student volunteers and perhaps an advertising drive to raise awareness of how work with Healthwatch can give a structure and purpose to people newly in retirement.