**Healthwatch Sutton Board of Directors Meeting**

6.30pm, Monday 10 March 2025
Granfers Community Centre, 73-79 Oakhill Road, Sutton, SM1 3AA

**MINUTES**

**Present:** **Apologies:**

Janet Wingrove (Jwi) – Chair Samantha London (SL)

David Elliman (DE) – Vice-chair Radhika Bhandari (RB)

Gaynor Bray (GB)

Steve Niewiarowski (SN) **Staff:**

Simon Oliver (SO) Pete Flavell (PF)

Mahendra Patel (MP) Alyssa Chase-Vilchez (ACV)

Shiraz Sethna (SS)

Noor Sumun (NS)

Judy Walsh (JWa)

**1 Welcome, apologies and notification of Any Other Business**

**1.1** JWi opened the meeting.

**2. Minutes of previous meeting held on 13th January 2025**

**2.1** JWi advised that point 3.3 referred to DF instead of DE.

**Action: SL to amend 3.3 of minutes to say DE.**

**2.2** Point 5.2: DE suggested scattering the review dates of policies. This was agreed.

 **Action: SL to amend minutes to reflect agreement.**

**3. Matters arising**

**3.1** Action Log

* It was agreed that the action log should reflect whether actions have been completed or not.

**Action: SL to amend the action log.**

* The following Actions have been completed:
	+ 2.1: Amend November 2024 minutes
	+ 3.1: Amend Actions 1and 2 in November 2024 minutes
	+ 3.1: Organisation of the Away Day
	+ 3.4: Include a forward plan at the end of each set of minutes, with dates included.
	+ 4.1: Updates related to Conflicts of Interest.
	+ Actions 6.2
	+ Action 7.1: Put Mem&Arts on the Website.
	+ Action 10.1: Pharmacist talk for Info&Support booked
	+ Action 10.3: Cancel February Info&Support meeting.
	+ Action 13.1: Change meeting links to Teams.
	+ Action 14.3: Put future dates on back of all Agendas.
* The following Actions are on the Agenda for this Board Meeting:
	+ Actions 3.1that relate to the Representation table (circulate the table to Board, assess all personal representation and resent the revised list to the Board).
	+ Action 8.2: The potential proposal for project with SPCN.
	+ Action 9.1: Chasing the response to Earwax survey.
* The following Actions are ongoing:
	+ Action 3.1: the transactions for Q1 in Excel Format have been forwarded to MP. An updated version is required.

**Action: PF to diarise as an action for mid-April.**

* Action 3.3: the chart showing when trustees have joined has been circulated to the Board but the link is not accessible. PF confirmed that the Board are unable to have access to the shared drive.

**Action: SL to send the chart as an attachment to the Board.**

* Action 5.2: SL has created a Policy Review document and Meeting Planner.

**Action: SL to update on Policy Reviews at next Board Meeting.**

* Action 11.1: Review of Comms Plan.

**Action: SL to update on Comms Plan at next meeting.**

**3.2** Trustee Update

* Appointment of David Shaboe as a Trustee is in progress – awaiting a second reference.

**3.3** Re-election of Trustees

* There was a discussion regarding which Trustees step down at the next AGM and what is meant by a ‘term.’ It was agreed to include this as an item at the next Board Meeting to establish understanding.

**Action: SL to include as an item on next Agenda.**

**4. Alyssa’s Updates**

**4.1** ACV introduced herself as SW London Executive Officer and explained her role.

ACV reported that HWSutton’s frailty project will be used for a report on community services commissioned by SWL Community Care Board.

**4.2** ACV gave a presentation on the report on Accessible Information Standards (AIS).

* The Aim of the project was to look at the delivery of AIS in GP practices. Funding was received from a competitive grant process.
* 144 patients/carers and 82 GP practice staff completed the survey.
* 3% of people with communication needs were not aware of AIS.
* GP staff reported issues with the system that flags patient’s needs as it flags all needs.
* BSL interpretation wasn't’ working well – a 2 week wait for a BSL interpreter, unreliability and last-minute cancellations. Concerns around privacy as only a small number of BSL Interpreters in SWL.
* GP staff reported they need support from ICB to get materials in accessible formats, such as easy read.
* Recommendations are:
	+ increased training for GP staff,
	+ maintain patient's independence as much as possible
	+ GP practices to avoid jargon and offer easy-read materials.
	+ ICB to support GP staff in accessing standarised communication material
* ACV reported that a new BSL interpretation service has been commissioned for SWL practices. AIS communication needs now have a red flag that appears in the corner of clinical recorders.
* Work going forward is to establish a community of practice to focus on the practice delivery of recommendations. ACV reported she is leading a communication campaign for deaf and hard of hearing who use BSL about the service provider change.

**5. Community Action Sutton – Hosting and Support**

**5.1** PF outlined that in the 10 years since HWSutton has been a sub-contracted part of Community Action Sutton (CAS), HWSutton has grown from a staff of 3 to 6 and is bringing in twice the amount of revenue.

The current situation of being sub-contracted but maintaining an independent Board of Trustees is unusual.

**5.2** PF reported that financially we are impacted by decisions made by CAS.

**5.3** PF speculated that picking individual elements of CAS costs is unlikely to be successful as CAS provides good value for money for many that could be raised to compensate for any savings. Options are:

* to stay with the current arrangement
* to think about it individually and come back to the next board to further cost analyses our situation.

**5.4** JWi advised more clarity over Simon’s and the Board’s responsibilities.

**5.5** GB asked if there was a representational advantage to being linked to CAS. PF replied that there are non-financial advantages to remaining part of CAS, such as access to training and a voluntary sector database.

**5.5** It was agreed that the Board should at least assure themselves that they understand the current arrangements and that they consider them satisfactory in terms of finances, governance, and overall benefits vs costs, and therefore that trustees should bring views and questions to the next Board meeting.

**Actions:**

* **SL to include as an action for next meeting.**
* **All to bring questions and thoughts to next meeting.**

**6. Ear Wax Removal – Report update**

**6.1** There was a discussion concerning the Board’s satisfaction with the response from South West London ICB (Director of Strategic Transformation) and if not, whether this should be taken further. After hearing different perspectives it was agreed that having started this piece of work we should attempt to bring it to a more satisfactory conclusion, particularly as the main things we are asking for would not appear to involve significant costs e.g. it should be easy for the PCNs to deliver them.

**6.2** One of our recommendations was ensuring that patients know that earwax removal is available free on the NHS. This was addressed in the response we received.

**6.3** PF reported that Sutton PCNs felt there could be a referral system to surgeries that do offer the service. But currently, from our survey, that does not seem to be available.

**6.4** It was agreed to respond to the letter from SWL ICB. As part of this the results of an audit carried out by calling the practices and asking if they provide ear wax removal would be included. In addition, HWSutton would ask if inter-referral between practices is possible.

**Actions:**

* **PF to create audit questions.**
* **SL and AM to action audit.**

**7. SWL Healthwatch Representation at SWL ICB Contract**

**7.1** SWL ICB are experiencing extreme financial pressures and this contract, that expires on 4 July 2025 is under review with regards to any extension. The result of this review is very likely to have an impact on staffing for this service.

**8. Project Updates –**

**8.1 Primary School Mental Health Project**

**8.1.1** JWi asked for thoughts on next steps for the Primary School Mental Health project. A key criterion is whether further work is likely to have an impact.

**8.1.2** PF said there are concerns that SWL ICB does not have the money to continue to fund Merton’s Social Prescribing for CYP scheme. However, there may be funding from other sources available.

**8.1.3** PF said that the previous specification for Social Prescribing was too specific and suggested running the event with a more general focus on how to support children and young people’s mental health.

**8.1.4** Despite funding being generally scarce, it was felt that children’s mental health is so important, and likely to be a priority for such funding as there is, that we should continue with the plan to hold a stakeholder event.

**Action: PF to discuss running a Stakeholder event with SL.**

**8.2 Update on Maternity**

**8.2.1** PF reported that individuals with bad experiences of maternity at St Helier were not willing to be recorded/videoed but were willing to contribute to a focus group/group discussion.

**8.2.2** DE reported that he had attended St Georges, Epsom and St Helier’s Board Meeting.

**Action: DE to send relevant information from the Board Meeting to SL.**

**8.2.3** PF reported that SL has collected demographic data from interviewees.  **Actions:**

* **SL to clarify that diversity questions include lifestyle/finance question.**
* **SL to conduct a Focus group and possibly more interviews and/or a survey to a larger group (questions to be determined by Focus group and interviews).**
* **SL to ensure that there is a question regarding receiving information before labour/birth.**
* **The planner presented indicates that it is currently anticipated that data collection could continue until July, enabling data analysis to take place in August and report writing in September.**

**8.3 Safeguarding project**

**Action : AM to give an update at next Board Meeting.**

**8.4 Frailty Project**

**Action : AM to give an update at next Board Meeting.**

**8.5 PRG/PPG**

**Action : AM to give an update at next Board Meeting.**

**8.6 Cardiovascular disease (SWL ICB)**

**8.6.1** PF reported that HWSutton had been allocated £2500 for this project.

**8.6.2** Nadine Wyatt from SWL ICB will go back to the Primary Care Networks to get a clearer idea on what kind of information they would need in order to support people in reducing Cardiovascular disease.

**Action: PF to report back at next Board Meeting.**

**8.6.3** MP clarified that the money is a pre-payment and should be carried forward to next year.

**8.7 Pharmacy**

**8.7.1**  PF reported that he has started developing the project, hoping to get a snapshot of people’s experience of the services locally.

**8.7.2** It was agreed that this should be looked at after the Pharmacist talk in April’s Info&Support Session. This will help us decide whether we want to progress with this project and if so what the best focus for it might be.

**Action: To review after April’s Information and Support Session.**

**9. Suggestions for the Away Day**

**9.1** PF reported that HW England have a Quality Framework which HW Sutton has twice used for self-assessment.

**Action: PF to share the latest Self Assessment with the Board.**

**9.2** There was a discussion regarding whether the Quality Framework Self-Assessment looked at the impact of the Board.

**9.3** SN suggested looking at guidance from the Charity Commission about what an effective Board looks like and how to monitor performance.

**9.4** Jwi asked who might be interested in working with her to continue planning the away day. SO and DE both expressed an interest. And then the action is just for me to follow up.

**Action: JWi to follow up with those interested in planning the Away Day.**

**10. Scrutiny – response from Fern Barber**

**10.1** PF clarifies the Fern Barber has replied that questions can be asked but the procedure must be followed.

**11. Comms Update**

**Action: to be moved to next Board Meeting.**

**12. Comms, Outreach events and general updates**

**Action: to be moved to next Board Meeting**

**13. Representation Table**

**13.1** PF reported that roles had been allocated. Copies of the current Representation Table were handed out.

**13.2** PF said that Board Members feedback on meetings attended at the Information and Support sessions, which are being reinstated as of April 2025.

**Action: PF to contact meeting organisers to inform them of new Reps**

**14. AOB**

No other business

**ACTION LOG**

|  |  |  |
| --- | --- | --- |
| Ref | Action | **Who** |
| **2.1** | **Amend point 3.3 minutes to say DE.** | **SL** |
| **2.2** | **Amend minutes to reflect agreement to scatter Policy Reviews.**  | **SL** |
| **3.1** | **Action: Amend the action log to reflect if actions have been completed** | **SL** |
| **3.1** | **Diarise request for updated version of transactions as an action for mid-April.** | **PF** |
| **3.1** | **Send the chart showing start dates of terms as an attachment to the Board** | **SL** |
| **3.1** | **Update on Policy Reviews at next Board Meeting.** | **SL** |
| **3.1** | **Update on Comms Plan at next meeting.** | **SL** |
| **3.3** | **Include re-election of Trustees as an item on next Agenda.** | **SL** |
| **5.5** | **Include thoughts on CAS -hosting and Support as an action for next meeting.**  | **SL** |
| **5.5** | **All to bring questions and thoughts on CAS – hosting and support to next meeting.** | **All** |
| **6.4** | **Create audit questions.** | **PF** |
| **6.4** | **Action audit.**  | **SL and AM** |
| **7.1** | **Chase for a Contract Extension Letter from ICB.**  | **PF** |
| **8.1.4** | **PF to discuss running a Stakeholder event with SL.** | **PF and SL** |
| **8.2.2** | **DE to send relevant information from the Board Meeting to SL.** | **DE** |
| **8.2.3** | **Clarify that diversity questions include lifestyle/finance question.**  | **SL** |
| **8.2.3** | **Conduct a Focus group and possibly more interviews and/or a survey to a larger group (questions to be determined by Focus group and interviews).** | **SL** |
| **8.2.3** | **Ensure there is a questions regarding receiving information before labour/birth.** | **SL** |
| **8.2.3** | **The planner presented indicates that it is currently anticipated that data collection could continue until July, enabling data analysis to take place in August and report writing in September.** | **SL** |
| **8.3** | **Update on Safeguarding Project at next Board Meeting.**  | **AM** |
| **8.4** | **Update on Frailty Project at next Board Meeting.**  | **AM** |
| **8.5** | **Update on PRG/PPG at next Board Meeting.**  | **AM** |
| **8.6.2** | **Report back re Cardiovascular project** | **PF** |
| **8.7.2** | **Review Pharmacist project after April’s Information and Support Session.**  | **SL** |
| **9.1** | **Share the latest Self-Assessment with the Board.**  | **PF** |
| **9.4** | **Follow up with those interested in planning the Away Day.** | **JWi** |
| **11** | **Comms Update to be moved to item for next Board Meeting.**  | **SL** |
| **12** | **Comms, Outreach Events and general updates to be moved to item for next Board Meeting.**  | **SL** |
| **13.2** | **Contact Meeting organisers to inform them of new Reps** | **PF** |

**FORWARD PLAN**

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| --- | --- |
| **Meeting** | **Agenda item/speaker** |
| **2025** |  |
| Jan boardMonday 13th January  | * Andrew attends
* Conflicts of Interest
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| Mar boardMonday 10th March | * Alyssa attends
* Q3 Finance
 |
| Apr InfoMonday 14th April | * Reena Barai - Pharmacist
 |
| Away DayFriday 11th April12.30-4pm | * Carshalton Beeches Baptist Church 12.30 - 4pm
 |
| May boardMonday 12th May | * Andrew attends
* Review risk register
* Q4 Finance – Annual 23/24 Finance
 |
| June InfoMonday 9th June | * Social Prescribing – to be confirmed
 |
| July boardMonday 14th July | * Alyssa attends
* Q1 Finance
 |
| August InfoMonday 11th August | * INTS – to be confirmed
 |
| September boardMonday 8th September | * Andrew attends
 |
| October InfoMonday 13th October |  |
| November boardMonday 10th November | * Alyssa attends
* Q2 Finance
 |
| December InfoMonday 8th December | * Dentistry – to be confirmed
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