

Healthwatch Oxfordshire Board of Directors

Date of Meeting: January 8 th 2015	Paper No: 2
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<p>Title of Presentation:</p> <p>Chief Executive's Report, November/December 2014</p>
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This paper is for	Discussion		Decision	x	Information	X
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<p>Purpose and Executive Summary (if paper longer than 3 pages):</p> <p>This paper summarises activity undertaken by the HWO Staff team in the period since the last Board meeting.</p>
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<p>Financial Implications of Paper:</p> <p>None</p>
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<p>Action Required:</p> <p>The Board is asked to note the contents of the paper, and in particular to note:</p> <ul style="list-style-type: none"> • The outcomes of the 360 degree survey • The outcomes of the restructure • The financial forecast to year end • The notes of the last project fund sub group • Progress on major items in the work programme
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<p>Author:</p> <p>Rachel Coney</p>

1. Introduction

The key areas of work for the team since the last Board meeting have been;

- i. Recruitment and training of volunteers
- ii. Board recruitment
- iii. Recruitment of freelance project management staff
- iv. Implementing the staff restructure
- v. Finalising deal on new premises and planning the move
- vi. Support to grant funded projects and events
- vii. 360 degree survey with our stakeholders
- viii. Publication of OXNA report
- ix. Preparation for January board sub group review of the Project Fund
- x. Logistics planning for the Discharge enter and view project
- xi. Detailed planning for the Dignity in Care project with Age UK
- xii. Concluding negotiation with OCC for transfer of PIN with associated increase in funding
- xiii. NHS Week with the local BBC
- xiv. Drafting the first HWO impact report and circulating to providers for them to update on action taken prior to publication via HOSC on January 20th
- xv. Financial forecasting to year end
- xvi. Transfer of financial admin service from ORCC to SPX

2. External meetings attended by the CEO in this period.

OCC	<ul style="list-style-type: none"> • Lisa Gregory re PIN • Health and Wellbeing Board • HOSC • Sally Latham re Dignity in care • JSNA and Health and Wellbeing Board steering groups • Ben Threadgold re Hearsay • Liaison meeting with John Jackson
City Council	<ul style="list-style-type: none"> • Mark Spriggs re office accommodation
OCCG	<ul style="list-style-type: none"> • NE and North GP locality Forums • Locality Forum development meeting • Prime Minister's Challenge Fund stakeholder meeting
Other	<ul style="list-style-type: none"> • Natasha Whitmill for David Cameron • Angie Paterson for John Howell • CCG locality Forum Chairs • Bishop Colin Fletcher • University Welfare Committee • Chair and Chief Exec of Southern Health FT • SPX set up meeting
HWE	<ul style="list-style-type: none"> • TV network meeting
OUHT OHFT	<ul style="list-style-type: none"> • Sara Randall re Discharge project • Maggie Webb and Tehmeena Ajmal re discharge project • CQC thematic review of crisis mental health services

Voluntary sector	<ul style="list-style-type: none"> • Martin Realy at Restore • Keep the Horton General Campaign Group • AGE UK AGM • Anna Thorne, Donnington Doorstep • Anne Nursey re Circles of Support and Community Information network • Supported Living Provider Network
Media	<ul style="list-style-type: none"> • Update meeting with Firebird • BBC Oxford re planning NHS week • Several BBC Oxford interviews during NHS week • Jack FM and Oxford Mail re A&E • OXNA report launch
NHS England	<ul style="list-style-type: none"> • Quality Surveillance Group

3. 360 degree survey feedback

- a) In December HWO carried out its first 360 degree stakeholder feedback survey, supplemented by an additional survey for groups who have applied for project fund grants. The surveys did not ask people to give their name or organisation so all results were automatically anonymised. The findings relating to the Project Fund will be shared with the sub group at its next meeting. Appendix Four of this report shows the full response to the main survey from all respondents.
- b) The survey was emailed to a list of named contacts in key partner organisations in the statutory and voluntary sectors, including those specifically named in the funding agreement with OCC.
- c) 24 completed surveys were returned, and this represents a response rate of 36% from the individual email addresses we mailed the survey too. The key findings from these were that:
 - i. All respondents answered the question “do you know what we exist to do” and 95.8% of them said yes.
 - ii. 21 respondents told us about the areas of our work that they have had direct experience of. 100% of them had direct experience of our core work to gather the views of the public. 66% had direct experience of our media work and the work we have undertaken to make recommendations to improve services, and just under 50% had direct experience of the work we undertake to look into areas of concern. Perhaps unsurprisingly only 14% of those who responded were aware that we work with HW England on national issues.

- iii. 21 respondents told us about how effectively they think we fulfil our core functions. The following percentages believe we are quite or very effective at:

Gathering the views of the public	60%
Awarding grants to groups to conduct research	79%
Commissioning projects to look into areas of concern	84%
Signposting people to services	33%
Reporting concerns in the press	53%
Making recommendations to improve services	55%
Working with CQC	35%
Working with HW England	29%

- iv. 43% of 21 respondents believe our work has, or will, impact on their decisions, and 33% don't know - which perhaps reflects the fact that our first impact report has not yet been completed or published.
- v. Free text comments suggest the organisation is now recognised as beginning to deliver and as showing potential, but that particular focus is required on consolidating the changes made in the last six months, raising our profile with the public and holding others to account for the change we have recommended they deliver. Action is in hand to address all of these.

4. Organisational development issues

4.1 Board recruitment has been completed

4.2 The staff restructure has been implemented. Carol Ball has been appointed Business Manager, Aimee Evans has been slotted into the Community Involvement Officer (Public) role, Ben Mabbett has agreed changes to his job description and Emma Nawrocki has been issued with a notice of redundancy and leaves the organisation on February 19th. The two vacant posts (Head of Projects and Community Involvement Officer (Organisations) have been advertised with a closing date of Feb 2nd. 4 applications for Head of Projects and 1 enquiry about the other post have already been received.

4.3 Freelance support has been contracted for the project fund and enter and view work, with Annie Davy, Fenella Trevillion and Mark Stone all joining the team on freelance contracts.

4.4 SPX have been contracted to deliver financial admin services, and this has now been handed over to them from ORCC.

4.5 SOLVE IT (our existing supplier via ORCC) have been contracted to move our IT into the new office and to provide an ongoing service.

5. Premises

5.1 A licence has now been signed for new office accommodation, and the move is planned for January 22nd.

6. Firebird PR monthly update

6.1 NHS Week was very successful with several radio and a TV interview

6.2 OXNA report received reasonable coverage, with Headway and patients the focus of interviews

6.3 CEO undertook a Radio Cherwell interview

6.4 BBC came out to Abingdon Market with us to interview the public about their care.

7. Financial forecasting to year end

Appendix 2 sets out a detailed financial forecast to year end. The Board is asked to note that we are working carefully to minimise the liability for 20% corporation tax on any unspent sum at year end. The Board should also note that there would be significant financial advantage to converting to a Charity in terms of rate relief, corporation tax, discounted goods and supplies and ability to fundraise. This issue should be revisited for discussion once the new Board is in place.

8. Progress reports on key pieces of work in last month

Appendix One sets out detailed progress reports on all major pieces of work being led by the team. Key issues for the Board to note/consider are the success of the team in progressing all major objectives agreed for the last 2 months and the decision of Patient Voice to withdraw from the Discharge Project steering group.

APPENDIX ONE- PROGRESS REPORTS ON KEY PIECES OF WORK

Voluntary Sector Forums	
Lead	Aimee
Status	Green
Progress	<ul style="list-style-type: none"> • Cassington Village Hall booked 21st Jan 10am until 12.30am for first Voluntary Sector workshop: Health and Social Care - Is it working for you? A workshop to talk about the particular needs of working age adults • Sarah Fisher will present about the JSNA • Representatives from OUHT, OCC and Oxford Health confirmed attendance • Personal e-mails targeted at Voluntary Sector Organisations • Advertised in OCVA newsletter and on HWO website • Currently 22 people booked onto workshop • Comments gathered and recorded from those unable to attend
Risks and mitigating actions	<ul style="list-style-type: none"> • The level of attendance may mean limited information can be gathered. To make sure we have a wealth of information we are already collecting information outside of the workshop to contribute. We would also hope to have active media around this in the week leading up to the workshop to attract additional views. • Voluntary sector representatives feel that this is another ‘talking shop’. We would hope that by having representatives from OCC and from other health service providers this will help to ensure that the voluntary sector feel listened to. We will also need to ensure that feedback is given to those who attended and those who could not, but have requested notes from the meeting.
Issues requiring Board input	<ul style="list-style-type: none"> • None
Care Homes Project	
Lead	Aimee
Status	Amber
Progress	<ul style="list-style-type: none"> • Met with Sue Knight and Mandy Vettrino from Oxford Beaumont (Boars Hill) and Southerndown (Chipping Norton) - both Barchester Homes. • Shared the Relatives and Residents ‘Involving Relatives and Friends - A Good Practice Guide for Homes of Older People’ with Freeland House • To date, spoken with 6 care homes, responses from 12 residents
Risks and mitigating actions	<p>Risks:</p> <ul style="list-style-type: none"> • Impact of project in its revised form is low <p>Mitigating Actions:</p> <ul style="list-style-type: none"> • Work closely with OACP before passing recommendations on to them to distribute to their members.
Issues requiring Board input	<ul style="list-style-type: none"> • None

Hearsay!	
Lead	Aimee
Status	Green
Progress	<ul style="list-style-type: none"> • Update sent to all attendees • Rachel and Aimee met with Ben Threadgold to discuss expectations for Hearsay in 2015! • Outline for Hearsay events next year has been drawn up and shared with John Jackson who has confirmed he will send feedback by Jan 15
Risks and mitigating actions	<p>Risks:</p> <ul style="list-style-type: none"> • That the balance is struck between OCC expectations and those of people using social care services. <p>Mitigating Actions:</p> <ul style="list-style-type: none"> • Early meetings with senior staff at the county council should ensure that the proposed programme of events meets OCC expectations. Feedback from the previous Hearsay! event is being used to help inform the new programme.
Issues requiring board input	None
Community Involvement (Public)	
Lead	Aimee
Status	Green
Progress	<ul style="list-style-type: none"> • Information stand in Abingdon Market • Information Stand at Oxfordshire Churches Together event, Kidlington Baptist Church • Outreach planned in the new year for Morrisons Banbury, Memory cafes in Witney, Wantage, Kidlington Witney Rotary, Archway Wednesday Welcome in Oxford
Risks and Mitigating actions	<p>Risks:</p> <ul style="list-style-type: none"> • That the South of the County has not had the same level of outreach activity as the north. <p>Mitigating Actions:</p> <ul style="list-style-type: none"> • This will need to be addressed in the workplan for the Community Involvement Officer (public)
Issues Requiring board input	None

Outcomes and Impact Report for JHOSC and HWBB

Lead	Carol
Status	Green
Progress	<p>Healthwatch Oxfordshire has to account twice a year, to the Joint Health Overview and Scrutiny Committee and the Health and Wellbeing Board, for the impact its work has had on providers and commissioners. A report has been produced detailing the key recommendations we have made during the year and the responses received from commissioners/providers of services.</p> <p>Our first impact report is due for publication with JHOSC papers on January 20th, and in order to ensure that it is fair, accurate and up to date we have sent a draft document to Oxfordshire Clinical Commissioning Group, Oxfordshire County Council, South Central Ambulance Service, Southern Health Foundation Trust, Oxford Health Foundation Trust and Oxford University Hospitals Trust and asked them to provide an update on actions taken by them by 12th January 2015. Their response will then be incorporated into the report ready for presentation to the above Boards.</p>
Risks and mitigating actions	<p>Risks</p> <ul style="list-style-type: none"> • Providers and Commissioners dispute the accuracy of the contents • The report reveals that little action has been taken as a result of our work. <p>Mitigating actions</p> <ul style="list-style-type: none"> • Send the relevant section to providers and commissioners to enable them to comment on accuracy and provide an update on their actions to date • Agree a comms plan with Firebird in advance of publication that enables us to hold others to account for delivery without damaging partnerships.
Issues requiring board input	None at this time. Relevant Board members to approve paper for HOSC and Health and Wellbeing Board in due course.

Volunteer Recruitment	
Lead	Carol
Status	Green
Progress	<ul style="list-style-type: none"> • We recruited 10 volunteers to date and have a further eight to be interviewed in January. • We have sent out a further three application forms and are waiting for them to be returned • Generic Healthwatch Oxfordshire training was delivered to all new volunteers on 18th November. The feedback from the day was mainly positive and the feedback will be utilised in improving the process. • We need to recruit a significant number of Healthwatch Champions and this is the subject of on-going discussion with CEO as the OCC funding agreement defines Champions as organisational representatives and development of a Champions network needs to be closely aligned to the development of our relationship with the voluntary sector.
Risks and mitigating actions	<p>Risks:</p> <ul style="list-style-type: none"> • No clear milestone plan for using volunteers, apart from Enter and View which will deliver on the Hospital Discharge Project and Dignity in Care • We press forward to recruit Champions from the voluntary and community sector who may see our increased demands on their time negatively. <p>Mitigating actions:</p> <ul style="list-style-type: none"> • Develop a volunteer strategy for Healthwatch Champions and Ambassadors. • Seek to consider asking people attending the Voluntary and Community Sector conferences to be Champions and feedback to them bi-annually the issues and concerns affecting their community via a Champions newsletter. This would dovetail with the voluntary sector conference and provide good use of scant resources.
Issues requiring board input	Interview potential volunteers - Dermot Roaf

Enter and View Volunteers

Lead	Carol
Status	Amber
Progress	<ul style="list-style-type: none"> • The first Enter and View Training was conducted on 11th December with Learning Links being the appointed trainer. 17 people attended the training and the breakdown was as follows: <ul style="list-style-type: none"> ○ 3 Directors ○ 4 members of staff ○ 2 project managers ○ 8 new volunteers. • The training was well received and the feedback was mainly positive. There are five volunteers signed up for the next training session which has been provisionally booked for Tuesday February 3rd. • We have a number of volunteer applicants of whom 7 have indicated that they would like to become Enter and View authorised representatives. • DBS checks were carried out for the volunteers on the day and this worked well as it used the volunteers time effectively without them having to use further time coming in to the office for their DBS check.
Risks and mitigating actions	<p>Risks:</p> <ul style="list-style-type: none"> • Not managing volunteer expectations • Poorly trained volunteers may cause damage to the Healthwatch Oxfordshire reputation • Volunteers not achieving the standard required of Healthwatch Oxfordshire • Not recruiting enough volunteers <p>Mitigating Actions:</p> <ul style="list-style-type: none"> • Clearly define how volunteers and Healthwatch Oxfordshire will work together • Develop a thorough induction/training programme • Develop a framework for utilising Enter and View • On-going recruitment throughout the year
Issues requiring board input	Interview of Enter and View applicants - Dermot Roaf

Enter and View Discharge Project	
Lead	Rachel
Status	Amber
Progress	<ul style="list-style-type: none"> • Enter & View training course delivered to 8 volunteers and project team on 11 Dec • Freelance Project Manager (Mark Stone) recruited • Draft questionnaires for patients developed and in review • 1st draft questionnaire for GPs developed & in internal review • 1st draft questionnaires for pharmacies & providers in progress, awaiting content from LPC and providers • Project management tool in place • Detailed project plan under development • Initial list of interested Care Providers contacted • Plan is to have 5 questionnaires ready for approval at Board meeting of 13th Jan (2 patient surveys, GP, pharmacy & care providers)
Risks and mitigating actions	<p>Risks:</p> <ul style="list-style-type: none"> • Timeline very tight • Project very complex and organisational maturity to deliver may not match ambition • Patient Voice resignation from steering group <p>Mitigating actions:</p> <ul style="list-style-type: none"> • Steering group to keep timeline under review. With priority being placed on quality of project not speed of delivery. • CEO to work closely with project manager and steering group to keep under review • Tight project management arrangements put in place • Rachel to meet with PV to agree next steps
Issues requiring board input	Note need for careful evaluation at the end of this project to ensure lessons learnt are integrated into subsequent HWO work programmes.
Enter and View Dignity in Care project	
lead	Rachel
Status	Green
Progress	<ul style="list-style-type: none"> • Project Manager Appointed • First Project Management Group has taken place • Draft Project Initiation Document completed, ready for agreement by project management group • Enter and View Training for Volunteers taken place
Risks and mitigating actions	<p>Risks:</p> <ul style="list-style-type: none"> • Lack of stakeholder engagement resulting in reduced representation of users voices • Don't learn from Discharge project about balancing effective user engagement with effective governance of complex projects • Lack of stakeholder engagement in the evaluation methodology and questionnaire development <p>Mitigating Actions:</p> <ul style="list-style-type: none"> • There will be early engagement with key stakeholders to ensure the voices of users are involved and that the evaluation methodology does meet their requirements • The project plan includes having a 'logistics' group and a reference

	group both of which will engage key stakeholders and involve them in the development stage and the delivery of the project and address the above risks.
Issues requiring board input	None at present
Developing tracking systems for issues raised by the public	
Lead	Ben
Status	Amber
Progress	BM attending CRM database System training session on January 20th. So there is no need to develop our own tracking system.
Risks and mitigating actions	The CRM Database could be delayed but BM has been assured that this will not happen.
Issues requiring board input	none

Updating the website

Lead Ben

Status Green

Progress

- 1,035 hits on the website since the last board meeting.
- 59.2% were new visitors and 40.8% are returning visitors.
- 7 contacts made using the website.

City ?	Acquisition		
	Sessions ? ↓	% New Sessions ?	New Users ?
	811 % of Total: 78.36% (1,035)	53.64% Site Avg: 59.13% (-9.29%)	435 % of Total: 71.08% (612)
1. Oxford	368 (45.38%)	40.22%	148 (34.02%)
2. London	126 (15.54%)	63.49%	80 (18.39%)
3. Witney	17 (2.10%)	64.71%	11 (2.53%)
4. Newport	17 (2.10%)	23.53%	4 (0.92%)
5. Bicester	14 (1.73%)	42.86%	6 (1.38%)
6. Banbury	13 (1.60%)	46.15%	6 (1.38%)
7. Northampton	11 (1.36%)	45.45%	5 (1.15%)
8. Chinnor	8 (0.99%)	75.00%	6 (1.38%)
9. Reading	8 (0.99%)	100.00%	8 (1.84%)
10. Abingdon	7 (0.86%)	85.71%	6 (1.38%)

Risks and mitigating actions
New content will continue being added. A risk is that content will be difficult to find because it is buried in too many pages. To avoid this old and expired content will be changed or deleted.

Issues requiring board input
none

Stimulating Social Media Activity

Lead Ben

Status Green

Progress

- 33 tweets
- 5 Retweets
- 4900 Retweet reach. (people who saw our Retweet)
- 11 mentions
- 7300 mention reach. (people who saw a tweet with us mentioned)

Risks and mitigating actions
Down slightly compared to other periods due to the Christmas break, new content will continue to be posted.

Issues requiring board input
None

Community events grants	
Lead	Annie and Aimee
Status	Green
Progress	<ul style="list-style-type: none"> • 8 Community Events grants awarded and 1 awaiting approval • 4 events attended, 4 still to take place • Good spread of events county wide • Comments collected at most recent event 'Wild Wood' and very useful contact made there with Community Life Champion at ASDA Wheatley. As a result of this two dates are booked for February at ASDA Wheatley to do outreach. Also put in contact with Community Life Champion at Didcot depot where there are 500 employees.
Risks and mitigating actions	<p>Risks:</p> <ul style="list-style-type: none"> • There may be some unspent funds at the end of the financial year - although it is clear most of this will be spent. <p>Mitigating Actions:</p> <ul style="list-style-type: none"> • Some work could be done to ensure another event is held and supported by the end of the financial year.
Issues requiring board input	None
Project Fund - Project grants	
Lead	Annie
Status	Green
Progress	<ul style="list-style-type: none"> • 5 new grant funded projects agreed at November Subgroup meeting and grant claims paperwork all completed (see notes of subgroup meeting attached as appendix 3). • This means the total budget allocated for this financial year and potential £3000 committed for OPA/Armed Forces research to take place in Summer 2015, funded from 2015/16 budget. • Oxfordshire Neurological Alliance Report was published in December 2014 with good media coverage and positive feedback from commissioners. • Support is being regularly given to Alice Hicks re Restore Project. Aim is for draft report to go to March meeting for approval. • We are still awaiting publication and outcomes of Quality of Life survey. • Review of project fund processes and outcomes underway to go to January Project Funding Subgroup. This includes survey of previous grant applicants and work with Carol on following up on actions and outcomes by statutory sector. Following any changes agreed to forms or process at the January subgroup meeting, the

	<p>scheme will be ‘re-launched’ in February for the financial year 2015/16 and revised forms uploaded.</p> <ul style="list-style-type: none"> • Planning underway to involve former grant recipients in Dignity in Care work. • Further engagement underway to attract new applications for consideration at the March Board meeting.
Risks and mitigating actions	<p>Risks:</p> <ul style="list-style-type: none"> • Restore report needs a lot of support. • City Council Quality of Life report • Tracking of projects and outcomes and reporting will get increasingly complex • Incoming Chair has clear thoughts about development of this aspect of our work, but won’t be able to attend January meeting <p>Mitigating Actions:</p> <ul style="list-style-type: none"> • AD to engage with CEO of Restore on this. • CEO will intervene to get City report finalized and published. • CRM data base, streamlined tracking for 6 monthly impact report and appointment of full time staff will help. • Ensure incoming Chair has sight of papers and opportunity to contribute to debate remotely
Issues requiring board input	Review of scheme as planned at January sub group

Appendix 2 – financial forecast to year end

Cash at bank 4 12 14	86376
Income due for last 1/4	79897
additional OCC income q4	4000
Total available funds to year end	170273
Forecast Expenditure to year end	
ORCC RECHARGES	
ORCC recharges Oct-Dec	7868
ORCC recharges January	2700
PAY BILL	
Wages bill Dec-March	67832
staff expenses and mileage estimate	1200
RECRUITMENT COSTS	
2 x new posts	1000
BOARD	
awayday	1000
AGM	500
PURE OFFICES COSTS jan-march	
1st 1/4 @ 20% discount	3516
deposit	1172
handsets x6 x 3 months	360
call charges @2p/minute	200
electricity	150
rates	312
printer contract (est @ 50% ORCC total exp)	1000
IT support (Solve IT quote)	2309
contents insurance estimate	200
PROFESSIONAL FEES	
Firebird Dec-March	6000
spx	2300
Wenn townsend	750
HR advice to Board	1620
PROJECT COSTS	
Annie Dec	1950
Annie Jan- March	7100
Fenella Jan-Mar	7100
Mark Jan-Mar	5400
Project grants not yet paid out	21386
learning links	2500
volunteer training costs	3200
Volunteer expenses	2000
other project expenses	3000
SUNDRY RUNNING COSTS	
monthly insurance premiums x 4	444
patient opinon 1/4lly charge	60
mobile contract	150
Directors expenses allowance	1000
meeting room hire @15/hr x 20	300
postage, stationery, other sundries	300
bulk mailings	500
DBS checks x 30	360
MOVING COSTS	
office supplies - new office	500
HWO branded items	1000
removal costs (man and van)	1000
phone no transfer	50
post forwarding one year	700
staff enhanced travel costs x 12 weeks	365
additional equipment and furniture	2000
freepost	200
Total	164554
forecast outturn/contingency	5719

Notes of project fund sub group meeting 6th Nov 2014, WOCC

1. Welcome & declaration of interest

There were no conflicts of interest to report to the meeting.

2. Matters arising

Interpretation services for deaf community

RC reported that she attended a Quality Surveillance Group meeting yesterday where the issue of interpretation services was coming up from several organisations. NHS England has undertaken to ensure that providers of all the services it commissions are made aware of how to book interpretation services and what is expected of them in terms of using this service. NHS England will also ensure CCGs do the same with providers with whom they contract.

Action: Record on impact spreadsheet (EN)

Action: Make sure number for interpretation services is available in HWO office if still outstanding. (EN)

3. PROJECT FUND APPLICATIONS

RC thanked AD for all her persistent outreach work which had resulted in a number of applications to the project fund.

3.1. ORCC

Decision: APPROVED

3.2. HOMESTART

Application came in as a result of EN attending funding fair on the 21st October in Blackbird Leys so they did not have much time to complete the form.

The subgroup felt that whilst this was an interesting proposal more detail was needed around **methodology/costs/timescales/resources/outcomes**.

Decision: APPROVED subject to AD satisfying herself with regards to the above, and circulating outcome to the Subgroup

3.3. OXFORDSHIRE PLAY ASSOCIATION

Decision: Approved in principle subject to further detail about methodology and the outcome of the OPA applications for other funding. Once agreed, funding to be drawn down from HWO in NEXT financial year and therefore can come out of next year's budget.

Subgroup also asked that Martin that he approaches Healthwatch Swindon about the Shrivenham event to see if they will contribute.

3.4. GUIDEPOSTS TRUSTS

Decision: APPROVED on the following conditions:

Obtain an assurance that

- When they refer to carers they mean, each time, the carers described in the 3 target groups.
- That identity and data of respondents will be protected.
- That they follow ethical guidelines and interviewers are appropriately trained working with the target groups.

Action:

Once necessary assurances obtained, HWO to help broker a meeting in order to launch the project.

3.5 DONNINGTON DOORSTEP

Decision: APPROVED subject to assurances that there will capacity to take the project through to publication stage. (Anna Thorne is leaving in March). RC foresees that the national press would want to report on this project.

Agreed that Rachel would be the main point of contact for this project.

Action: EN to schedule scoping/timescales meeting between Anna, Rachel and Annie to work out timescales and key contacts/communication strategies.

4. COMMUNITY EVENT FUND APPLICATIONS

4.1. SCIENCE OXFORD

Decision: APPROVED on the condition that clarity sought re what is expected of HWO on the day.

Action: HWO to suggest a meeting between ORCC and Science Oxford re how SO's event findings might fit in with ORCC's dementia friendly communities project. (action AD)

4.2. ACE CENTRE

Decision: APPROVED

4.3. ASIAN WOMEN'S GROUP

Decision: APPROVED on the condition that the AWG set out exactly what information stalls will be there and who will invited to the event. This was something HWO could help them with. AWG would need to obtain some degree of commitment from stall holders that they will attend and be able to give information and advice in response to the issues arising out of the report before funding was finally approved and released.

5. Progress on reports on not yet published

5.1. RESTORE

Rachel met with Martin Realy from Restore and has had assurances from him re timelines etc for the project Alice Hicks is doing. AD is meeting with Alice Hicks regularly

5.2. OxNA

Draft report will go to full board on Tuesday. Comments period needs to be tight if getting this out at same time as national report (mid December)

6. Reviewing the Grants Process for March 2015 and beyond.

As all the main grant funding has been allocated, need to make an announcement on the website that the Board will not be considering any new applications until March 2015. The revised application pack will be issued in mid January 2015.

Groups may still apply for £500 community event grants.

AD will undertake a brief review of the grants process to date - including feedback from beneficiaries as part of the 360 review. Also to include summary of press coverage, impacts and other benefits to HWO of the programme. The report will also suggest improvements to the process based on feedback. This will be considered by the Subgroup in January.

7. QUALITY OF LIFE SURVEY

Simon Gabriel, Community Partnerships Officer at Oxford City Council, joined and was welcomed to the meeting.

If the team could identify 2-3 key things that had arisen from the report, what would they be? SG responded:

- The importance of early intervention
- Poor educational attainment in these communities
- The need for creation more opportunities for employment and to take apprenticeships for these communities.
- Possible under-reporting of crime

The main things that residents were unhappy about in their community were lack of parking, dog excrement not being disposed of and drug taking on streets.

SG was asked, in terms of implementing project findings, what will happen next? He responded that:

- Findings from the project will be fed in to the community plans for the 7 priority neighbourhoods.
- The report would be sent to the police and the Oxfordshire Strategic Partnership Board.
- The City Council were looking at how teams responsible for priority areas can work better together.

Actions:

- **SG** to supply word copy for proofing and addition of HWO core information to **AD**
- Neighbourhood teams to obtain a breakdown of the age of people who took part in the survey from the students. - **SG**
(RC said that if people of working age had taken part in it the findings could be fed in to the County Council's Joint Strategic Needs Assessment).
- Table on page 27 to be made clearer - **SG**
- JNP to proof read report, AD to add a disclaimer - **JNP, AD**
- RC to formulate letters to be sent out to relevant providers of services stating that it is expected that the City Council team will develop an action plan as a result of the report. - **RC**
- EN to schedule meeting between RC, AD, SG and Angela Cristofoli re which providers etc report will be sent to and when and a joint approach to publication and publicity. - **EN**

RL asked how the City Council came up with their priority neighbourhoods and why the community in Carfax with its high level of hostels, for example, had not been taken in to account. SG responded that priority neighbourhoods had been set by cabinet.

Action:

Include some text in the introduction to the report explaining how priority neighbourhoods are defined. SG would also get back to RL personally with more information about this. - **SG**

8. NEXT MEETING:

8th January 10.30 - 1pm. (focus on grants process review, any new reports and community event applications)

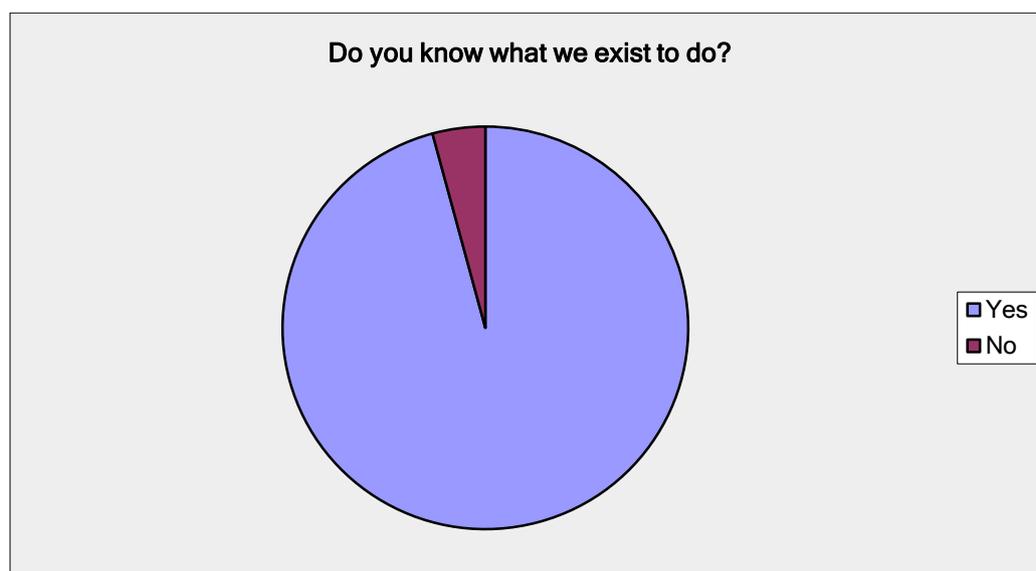
Meeting closed at 12.50pm

Q1

Had you heard of Healthwatch Oxfordshire before receiving this survey?		
Answer Options	Response Percent	Response Count
Yes	100.0%	24
No	0.0%	0
d/k	0.0%	0
<i>answered question</i>		24
<i>skipped question</i>		0

Q2

Do you know what we exist to do?		
Answer Options	Response Percent	Response Count
Yes	95.8%	23
No	4.2%	1
<i>answered question</i>		24
<i>skipped question</i>		0



Q3

Which of the following areas of our work do you have direct experience of?		
Answer Options	Response Percent	Response Count
Gathering the views of the public	100.0%	21
Awarding grants to community groups to conduct research	38.1%	8
Commissioning projects to look into areas of concern	47.6%	10
Signposting people to the correct service	61.9%	13
Reporting concerns and issues in the press	66.7%	14
Making recommendations to improve services	66.7%	14
Working in partnership with the Care Quality Commission	38.1%	8
Working with Healthwatch England on national issues	14.3%	3
Other (please state)		6
	<i>answered question</i>	21
	<i>skipped question</i>	3

Question 3 comments:

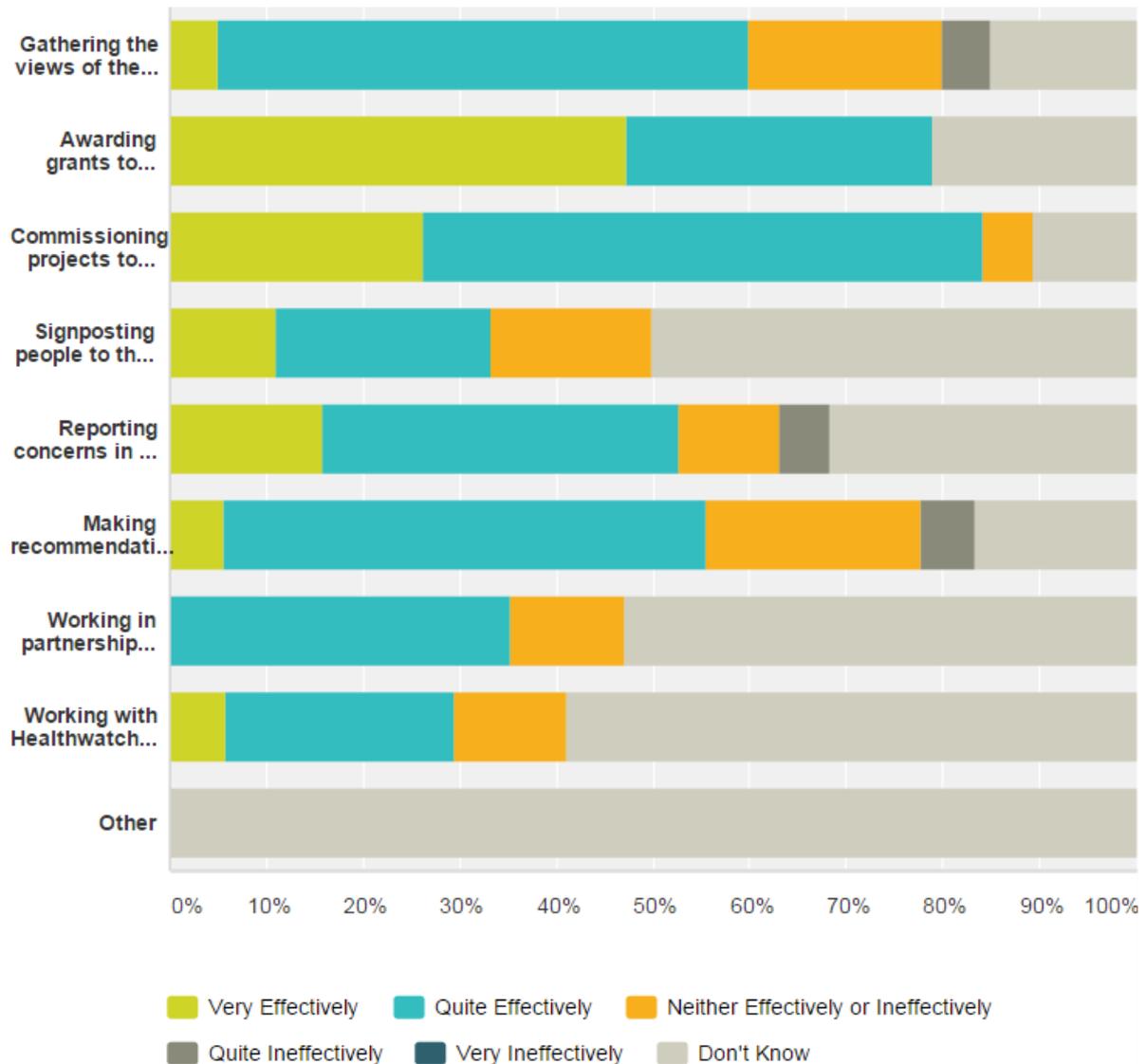
- I do this kind of thing for a living
- Development and delivery of services
- In Oxfordshire, working with the Locality Group volunteer Forums
- as a member of the HOSC
- Working with HOSC
- Serving as a lay member of NHS committees

Q4

How effectively do you think Healthwatch Oxfordshire does the following:													
Answer Options	Very Effectively		Quite Effectively		Neither Effectively or Ineffectively		Quite Ineffectively		Very Ineffectively		Do n't Know		Response Count
Gathering the views of the public	1	5 %	11	55 %	4	20 %	1	5 %	0	0 %	3	15 %	20
Awarding grants to community groups to conduct research	9	47 %	6	32 %	0	0 %	0	0 %	0	0 %	4	21 %	19
Commissioning projects to look into areas of concern	5	26 %	11	58 %	1	5 %	0	0 %	0	0 %	2	11 %	19
Signposting people to the correct service	2	11 %	4	22 %	3	17 %	0	0 %	0	0 %	9	50 %	18
Reporting concerns in the press	3	16 %	7	37 %	2	10 %	1	5 %	0	0 %	6	32 %	19
Making recommendations to improve services	1	6 %	9	50 %	4	22 %	1	6 %	0	0 %	3	17 %	18
Working in partnership with the Care Quality Commission	0	0 %	6	35 %	2	12 %	0	0 %	0	0 %	9	53 %	17
Working with Healthwatch England on national issues	1	6 %	4	24 %	2	12 %	0	0 %	0	0 %	10	59 %	17
Other	0	0 %	0	0 %	0	0 %	0	0 %	0	0 %	9	100 %	9
If other (please specify)							2						
answered question							21						
skipped question							3						

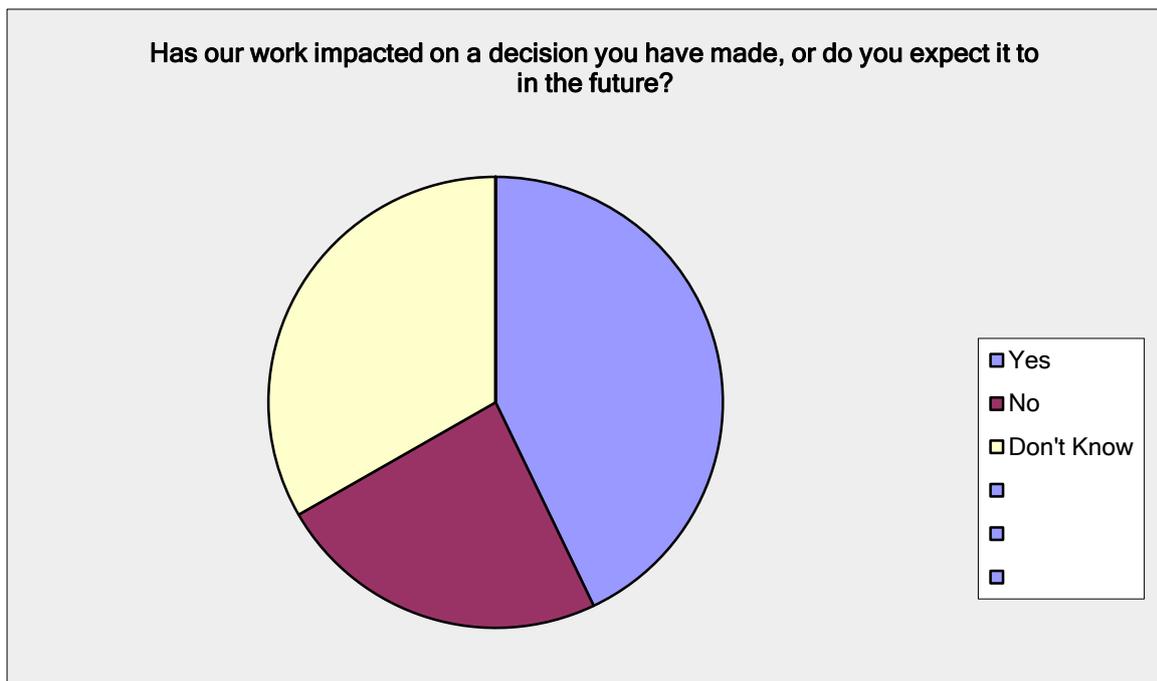
Question 4 comments:

- Reserve judgement
- I ticked quite effectively because the relationship between CQC and the PMS directorate is fairly new and improvements can always be made.



Q5

Has our work impacted on a decision you have made, or do you expect it to in the future?		
Answer Options	Response Percent	Response Count
Yes	42.9%	9
No	23.8%	5
Don't Know	33.3%	7
If Yes, please specify		8
answered question		21
skipped question		3



Question 5 comments:

- I think the support for our research made it possible for us to be seen as credible and enabled us to work with other organisations.
- It's really interesting to hear about all the work that's been done, particularly by the other community groups.
- If it wasn't for Healthwatch, I wouldn't have had the opportunity to carry out the research in the first place, particularly as a small, informal, voluntary group. The support from HWO resulted in the research idea getting off the ground and becoming a reality.
- It has not directly impacted on any decisions so far but it has been supportive in us being able to carry our consultation project forward. Without HWO support this project would not have taken place.
- It has been used alongside other information.
- Action planning in relation to a number of service user experience reports
- Especially the work on Asian women's health -- useful research.
- Want to apply for funding for a grant pass on info to Healthwatch

Q6

Is there anything else you would like to say about Healthwatch Oxfordshire and its activities?	
Answer Options	Response Count
	14
<i>answered question</i>	14
<i>skipped question</i>	10

Question 6 answers:

1. I think HealthWatch still has quite a low profile for the general public so I think there is much more to be done in raising its profile and for it to be seen to be a powerful force for change. The rapid change internally in terms of the Board of Directors does make it feel as though it is still finding its feet as an organisation.
2. We would like to see some 'bite' and some strong pressure applied to improve health for people with learning disabilities. At the moment it feels like "Groundhog Day" - talking about the same things to different bodies with limited progress, we hope that a new body like Healthwatch will alter this.
3. Your grid under q.12 above doesn't work in my browser - it's only letting me select 1 button! In any case I would say HWO is too young and has experienced too much turbulence recently for me to make these judgements
4. I think HWO is carrying out fantastic work as an independent, official local watch dog. I hope that HWO continues to fund projects in the future, whether large or small, but would also hope that there is equal focus on the follow up resulting action helping to drive forward recommendations and improvements, as there is focusing on and supporting the projects themselves.
5. I think Healthwatch now has some excellent staff and is moving in the right direction very quickly.
6. Very difficult to obtain a good cross-section view of the public on what are often quite difficult matters to comprehend, not obvious that commissioners do anything with the information. Pleased that you are now looking to more actively involve the voluntary sector, I am keen to be part of this and receive adequate information to allow me to so do.
7. It needs to make its presence felt in the northern party of the county..

8. Look forward to your next report .
9. I think that the organisation is working to form effective relationships with health and social care providers.
10. We don't yet know what capability Healthwatch Oxfordshire has as we have only just seen their initial work. We are hopeful that it will be able to establish itself and work effectively on behalf of the Public and VCS groups.
11. I think the past 6 months have been very positive and much progress has been made, but Healthwatch Oxfordshire needs to build on this without stretching itself too broadly and become better at raising concerns of local people.
12. Keep up the good work!
13. You are gaining momentum and getting better known. It is not easy to get the work of Healthwatch known and appreciated to the general public as it is in amongst a whole raft of changes to healthcare all coming on line at the same time.
14. The question 4 'other' category needs a box to explain what 'other' means to the participant.