

# **Combining Opinions to Generate Solutions (COGS) Board Meeting**

Community Interest Company no. 8484607

(COGS carries out the statutory duties of **Healthwatch Enfield (EHW)** and all items on this agenda relate to **Healthwatch Enfield**)

## **Agenda**

Meeting no. 33: Wednesday, 12<sup>th</sup> February 2020 13:45pm, to be held in public

Location: Community House, 311 Fore Street, Edmonton N9 0PZ

## **MINUTES**

1. Minutes of November's Board meeting
2. Action points from previous meetings

## **PUBLIC QUESTIONS**

3. Any questions from the public about items on the agenda for this meeting

## **ITEMS FOR DECISION**

4. Audited accounts
5. Review of risk register

## **ITEMS FOR DISCUSSION**

6. Future agenda items
7. Young people's project

## **UPDATES AND OTHER ITEMS FOR INFORMATION**

8. Chief Executive's report
9. Resources and risk

10. Stakeholder relationships

11. External factors

12. Statutory duties update

- 12.1. Helping you find the answers
- 12.2. Your views on health and care
- 12.3. Listening to local people's views
- 12.4. Making a difference together

13. Volunteering update

14. AOB

**Close**

Meeting no.32: Thursday 7<sup>th</sup> November 2019 at 1pm (held in Room 15, Community House, 311, Fore Street, London, N9 0PZ)

Healthwatch Enfield (EHW) is run by Combining Opinions to Generate Solutions (COGS)

Present:

Parin Bahl, Chair (PB)

Noelle Skivington (NS)

Deborah Fowler (DF)

Valerie Dinsmore (VD)

**In attendance:**

Michelle Malwah, Information & Signposting Officer, Volunteer Co-ordinator (MM)

Nigel Rawcliffe, Member of the public

## **MINUTES AND UPDATES**

### **Welcome and apologies**

The Chair welcomed all present. Apologies were received from Audrey Lucas (AD) and Fazilla Amide (FA). The Chair noted that the Board had agreed to a request for unpaid leave from the Chief Executive so that she could work at the North Middlesex University Hospital Trust for a 6-month period in order to develop her experience and skills. The Board wished her all the best. Fazila Amide has been appointed by the Board to be the Acting Chief Executive Officer but was unable to attend the meeting today due to previous commitments.

### **1. Minutes of the previous meeting**

Agreed as an accurate record.

### **2. Action points from previous meeting**

The Board reviewed action points and agreed:

- Item 1- VD and FA have dates scheduled to ensure we remain compliant with GDPR.
- Item 3- CF has been assigned to oversee the policy review. It was agreed that the list of policies would be circulated to the Board. **Action-** MM to circulate list to the Board. Chair to discuss review process with Fazilla.
- Item 5- **Action-** Budget has been added to the forward agenda: - agreed to change date to 31<sup>st</sup> May 2020.

### 3. Questions from the public

Mr Rawcliffe noted that he was happy with the papers and made some helpful suggestions regarding improving clarity. For example, where there are charts can we keep the colours the same throughout the item? And can the Gantt chart be made bigger or simply just detail key information and dates.

### ITEMS FOR DECISION

#### 4. Audited Accounts

To be reviewed at the next meeting.

#### 5. Review of risk register

The Board welcomed and reviewed the paper.

The Board did not agree to increase the risk scores for loss of staff capacity (1.1.1) and loss of experienced staff (1.1.2). The Board are confident that they have a good team that can deliver our priorities. If specific additional work is needed the Board are happy to provide support.

Proposed review of job descriptions: **the Board agreed to the review the job descriptions** by Fazilla supported by Noelle.

### ITEMS FOR DISCUSSION

#### 6. Future agenda items

The Chair to discuss future agenda items with Fazilla. The Board agreed to add:

February meeting:

- an update on the policy review process
- Healthwatch Enfield budget.

May meeting:

- Healthwatch Enfield budget.

#### 7. Young Healthwatch

The Board endorsed the approach for this project and welcomed the work completed to date. The Board would like to see some work specifically around CAMHS. There was a discussion as to whether the risks identified in the report and a general agreement that they shouldn't be presented in this detail in a Board paper and if significant should be added to the risk register.

## **UPDATES AND OTHER ITEMS FOR INFORMATION**

### **8. Chief Executive's report**

The Board welcomed the report, but noted some errors.

The Board would have also liked to have seen further detail on the work in regards to maintaining the Chase Farm Hospital Urgent Care Centre closing time as this had been an intensive piece of work where Healthwatch had been successful in promoting the views of local residents.

Primary Care: - the Chair informed the Board that any follow up from this work will feed into planning for the annual conference. The Chair and FA will arrange to meet with the GP networks and Kevin Sheridan in the near future.

The Board asked for clarification as to whether we did/didn't escalate any safeguarding incidents to the CQC. The Board would also like any such escalations reported to them.

The Board were disappointed that timescales had slipped for the priority areas of work planned for the year, particularly in regards to the IWE quality assurance framework. The team have been promised the information requested by the 14<sup>th</sup> November. If this information isn't received, the Chair will discuss next steps with Fazilla.

Though the Board were aware of the resource constraints caused by additional commissioned work and understood the importance of this, the Board felt the reports needed to be clearer as to why/what has been delayed with respect to agreed priorities.

### **9. Resources and risk**

Interviews for the community engagement role will be taking place soon.

The Treasurer reported that finances were on track particularly due to the commissioned work completed.

There was a discussion about accommodation for the team and the need to keep this under review.

### **10. Stakeholder relationships**

The Board welcomed and reviewed the paper.

### **11. External factors**

The Board welcomed and reviewed the paper.

### **12. Statutory duties update**

#### **12.1 - Helping you find the answers**

The Board welcomed and reviewed the paper. A request was made to see if the "Helping you find information via social media" section could be reported over 5 quarters so to include the last quarter from the previous year.

## **12.2 - Your views on health and care**

The Board welcomed and reviewed the paper.

The Board requested that the Enter and View section include the number of surveys completed and the number of visits attended.

The Board noted there were only 35 items of feedback from our online feedback centre over the quarter, but are aware that CF is working on making recommendations on whether we should continue using it. In relation to this, there was a discussion about the difficulty of promoting the feedback centre widget during a period when changes are being implemented to establish primary care networks.

## **12.3 - Listening to local people's views**

The Board welcomed and reviewed the paper.

## **12.4 - Making a difference together**

The Board welcomed and reviewed the paper.

## **13. Volunteering update**

The Board welcomed and reviewed the paper. The good progress on recruitment of volunteers was recognised by the Board.

## **14. AOB**

Future Board meeting dates. **Action- Michelle to send calendar dates to the Board and change the meeting times.**

## Agenda item 2 - November 2019 Action points

No.	Meeting date	Agenda item no.	Action	Who	By when	Status	Note
1	24/10/2018	5	To visit the office ensure we remain compliant with GDPR and that all necessary actions have been completed	FA, VD	29/02/20	In progress	
2	24/10/2018	10.2	To consider how information provided to the Board can be communicated to volunteers	MM	29/02/20	In progress	
3	01/03/2019	2	To review all organisational policies	FA	31/03/20	In progress	
3a	06/11/2019	2	MM to circulate a list of all the policies for the organisation	FA	31/01/20	List forwarded to Parin and Noelle for review	
4	01/08/2019	4	To consider the financial position at the Board meeting in May 2020	Board, FA/PM	31/05/20	Ongoing	
5	01/08/2019	6	To further consider/highlight reporting during supervision meetings	FA, PB		Ongoing	
6	06/11/2019		To remove the Gantt charts from the Chief Executive's report and provide a narrative instead	FA	31/01/20	Completed	
7	06/11/2019	5	To review job descriptions	FA/NS		ongoing	

PM - Patricia Mecinska, Chief Executive currently on leave  
 PB - Parin Bahl, Chair  
 VD - Valerie Dinsmore, Treasurer  
 NS - Noelle Skivington, Vice - chair  
 AL - Audrey Lucas, Board member

DF - Deborah Fowler, Board member  
 FA - Fazilla Amide, Acting Chief Executive  
 EF - Emma Friddin, Healthwatch Enfield staff member  
 MM - Michelle Malwah, Healthwatch Enfield staff member

Report of the Directors and  
Financial Statements for the Year Ended 31 March 2019  
for  
Combining Opinions To Generate Solutions  
CIC



Combining Opinions To Generate Solutions  
CIC

Contents of the Financial Statements  
for the Year Ended 31 March 2019

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Combining Opinions To Generate Solutions  
CIC

Company Information  
for the Year Ended 31 March 2019

**DIRECTORS:**

P Bahl (Chair)  
N M Skivington  
D Fowler  
A Lucas  
V J Dinsmore  
M A Varian

**REGISTERED OFFICE:**

Room 11  
Community House  
Fore Street  
Edmonton  
London  
N9 0PZ

**REGISTERED NUMBER:**

08484607 (England and Wales)

**SENIOR STATUTORY AUDITOR:** S. Francis-Joseph FCCA

**AUDITORS:**

Anthony Joseph & Co. Limited  
Business & Technology Centre  
Bessemer Drive  
Stevenage  
Hertfordshire  
SG1 2DX

Combining Opinions To Generate Solutions  
CIC

Chairman's Report  
for the Year Ended 31 March 2019

Combining Opinions to Generate Solutions is a Community Interest Company whose aim is to embed people's voice in service design, planning and delivery to improve their experiences. Our main role currently is to provide the local Healthwatch service to the London Borough of Enfield. Combining Opinions to Generate Solutions is commissioned by Enfield Council to provide the service, as set out in the Health and Social Care Act 2012. This funding constitutes the bulk of our income.

Healthwatch Enfield formally launched in October 2013 and we have now competed more than five full years of operations. We have received positive feedback from statutory sector organisations, from voluntary and community sector partners and members of the public. Through our work, we have achieved positive improvements to a range of services for local people.

Our separate annual report for Healthwatch Enfield sets out our work and achievements in more detail.

In addition to our Healthwatch Enfield contract, during 2018-19 we secured £36,490 in additional contract income. This was for other work consistent with our aims, as set out above.

The Board of Directors are grateful to our excellent staff and our dedicated team of volunteers.

Parin Bahl  
Date: 12 December 2019

Combining Opinions To Generate Solutions  
CIC

Report of the Directors  
for the Year Ended 31 March 2019

The directors present their report with the financial statements of the company for the year ended 31 March 2019.

**DIRECTORS**

The directors shown below have held office during the whole of the period from 1 April 2018 to the date of this report.

P Bahl (Chair)  
N M Skivington  
D Fowler  
A Lucas  
V J Dinsmore  
M A Varian

**STATEMENT OF DIRECTORS' RESPONSIBILITIES**

The directors are responsible for preparing the Annual Report and the financial statements in accordance with applicable law and regulations.

Company law requires the directors to prepare financial statements for each financial year. Under that law the directors have elected to prepare the financial statements in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law). Under company law the directors must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the company and of the surplus or deficit of the company for that period. In preparing these financial statements, the directors are required to:

- select suitable accounting policies and then apply them consistently;
- make judgements and accounting estimates that are reasonable and prudent;

The directors are responsible for keeping adequate accounting records that are sufficient to show and explain the company's transactions and disclose with reasonable accuracy at any time the financial position of the company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

**STATEMENT AS TO DISCLOSURE OF INFORMATION TO AUDITORS**

So far as the directors are aware, there is no relevant audit information (as defined by Section 418 of the Companies Act 2006) of which the company's auditors are unaware, and each director has taken all the steps that he or she ought to have taken as a director in order to make himself or herself aware of any relevant audit information and to establish that the company's auditors are aware of that information.

**AUDITORS**

The auditors, Anthony Joseph & Co. Limited, will be deemed to be reappointed in accordance with the provision of Companies Act 2006.

This report has been prepared in accordance with the provisions of Part 15 of the Companies Act 2006 relating to small companies.

**ON BEHALF OF THE BOARD:**

P Bahl (Chair) - Director

12 December 2019

Report of the Independent Auditors to the Members of  
Combining Opinions To Generate Solutions  
CIC

**Opinion**

We have audited the financial statements of Combining Opinions To Generate Solutions CIC (the 'company') for the year ended 31 March 2019 which comprise the Income Statement, Balance Sheet and Notes to the Financial Statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the company's affairs as at 31 March 2019 and of its surplus for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

**Basis for opinion**

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditors' responsibilities for the audit of the financial statements section of our report. We are independent of the company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

**Conclusions relating to going concern**

We have nothing to report in respect of the following matters in relation to which the ISAs (UK) require us to report to you where:

- the directors' use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- the directors have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the company's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

**Other information**

The directors are responsible for the other information. The other information comprises the information in the Annual Report, but does not include the financial statements and our Report of the Auditors thereon.

Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

**Opinion on other matters prescribed by the Companies Act 2006**

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the Report of the Directors for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Report of the Directors has been prepared in accordance with applicable legal requirements.

Report of the Independent Auditors to the Members of  
Combining Opinions To Generate Solutions  
CIC

**Matters on which we are required to report by exception**

In the light of the knowledge and understanding of the company and its environment obtained in the course of the audit, we have not identified material misstatements in the Report of the Directors.

We have nothing to report in respect of the following matters where the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of directors' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the directors were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies' exemption from the requirement to prepare a Strategic Report or in preparing the Report of the Directors.

**Responsibilities of directors**

As explained more fully in the Statement of Directors' Responsibilities set out on page three, the directors are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the directors determine necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the directors are responsible for assessing the company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the company or to cease operations, or have no realistic alternative but to do so.

**Auditors' responsibilities for the audit of the financial statements**

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue a Report of the Auditors that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at [www.frc.org.uk/auditorsresponsibilities](http://www.frc.org.uk/auditorsresponsibilities). This description forms part of our Report of the Auditors.

**Use of our report**

This report is made solely to the company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the company's members those matters we are required to state to them in a Report of the Auditors and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the company and the company's members as a body, for our audit work, for this report, or for the opinions we have formed.

S. Francis-Joseph FCCA (Senior Statutory Auditor)  
for and on behalf of Anthony Joseph & Co. Limited  
Business & Technology Centre  
Bessemer Drive  
Stevenage  
Hertfordshire  
SG1 2DX

12 December 2019

Combining Opinions To Generate Solutions  
CIC

Income Statement  
for the Year Ended 31 March 2019

	Notes	31.3.19 £	31.3.18 £
<b>TURNOVER</b>		251,378	266,456
Administrative expenses		<u>222,282</u>	<u>240,872</u>
<b>OPERATING SURPLUS</b>	4	29,096	25,584
Interest receivable and similar income		<u>249</u>	<u>142</u>
<b>SURPLUS BEFORE TAXATION</b>		29,345	25,726
Tax on surplus		<u>-</u>	<u>-</u>
<b>SURPLUS FOR THE FINANCIAL YEAR</b>		<u><u>29,345</u></u>	<u><u>25,726</u></u>

The notes form part of these financial statements

Combining Opinions To Generate Solutions  
CIC (Registered number: 08484607)

Balance Sheet  
31 March 2019

	Notes	31.3.19	£	31.3.18	£
<b>FIXED ASSETS</b>					
Tangible assets	5		1,882		5,932
<b>CURRENT ASSETS</b>					
Debtors	6	31,970		81,697	
Cash at bank and in hand		179,697		98,754	
		<u>211,667</u>		<u>180,451</u>	
<b>CREDITORS</b>					
Amounts falling due within one year	7	1,915		4,094	
<b>NET CURRENT ASSETS</b>			<u>209,752</u>		<u>176,357</u>
<b>TOTAL ASSETS LESS CURRENT LIABILITIES</b>			<u>211,634</u>		<u>182,289</u>
<b>RESERVES</b>					
Income and expenditure account			<u>211,634</u>		<u>182,289</u>
			<u>211,634</u>		<u>182,289</u>

The financial statements have been prepared in accordance with the provisions of Part 15 of the Companies Act 2006 relating to small companies.

The financial statements were approved by the Board of Directors on 12 December 2019 and were signed on its behalf by:

P Bahl (Chair) - Director

The notes form part of these financial statements



Combining Opinions To Generate Solutions  
CIC

Notes to the Financial Statements  
for the Year Ended 31 March 2019

1. **STATUTORY INFORMATION**

Combining Opinions To Generate Solutions CIC is a private company, limited by guarantee, registered in England and Wales. The company's registered number and registered office address can be found on the Company Information page.

2. **ACCOUNTING POLICIES**

**Basis of preparing the financial statements**

These financial statements have been prepared in accordance with Financial Reporting Standard 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland" including the provisions of Section 1A "Small Entities" and the Companies Act 2006. The financial statements have been prepared under the historical cost convention.

**Turnover**

Turnover is measured at the fair value of the consideration received or receivable, excluding discounts, rebates, value added tax and other sales taxes.

**Tangible fixed assets**

Depreciation is provided at the following annual rates in order to write off each asset over its estimated useful life.

Plant & Equipment - 33% on cost

**Taxation**

Taxation for the year comprises current and deferred tax. Tax is recognised in the Income Statement, except to the extent that it relates to items recognised in other comprehensive income or directly in equity.

Current or deferred taxation assets and liabilities are not discounted.

Current tax is recognised at the amount of tax payable using the tax rates and laws that have been enacted or substantively enacted by the balance sheet date.

**Deferred tax**

Deferred tax is recognised in respect of all timing differences that have originated but not reversed at the balance sheet date.

Timing differences arise from the inclusion of income and expenses in tax assessments in periods different from those in which they are recognised in financial statements. Deferred tax is measured using tax rates and laws that have been enacted or substantively enacted by the year end and that are expected to apply to the reversal of the timing difference.

Unrelieved tax losses and other deferred tax assets are recognised only to the extent that it is probable that they will be recovered against the reversal of deferred tax liabilities or other future taxable profits.

**Pension costs and other post-retirement benefits**

The company operates a defined contribution pension scheme. Contributions payable to the company's pension scheme are charged to profit or loss in the period to which they relate.

3. **EMPLOYEES AND DIRECTORS**

The average number of employees during the year was 11 (2018 - 11).

Combining Opinions To Generate Solutions  
CIC

Notes to the Financial Statements - continued  
for the Year Ended 31 March 2019

4. **OPERATING SURPLUS**

The operating surplus is stated after charging:

	31.3.19	31.3.18
	£	£
Depreciation - owned assets	4,050	4,065
	<u>          </u>	<u>          </u>

5. **TANGIBLE FIXED ASSETS**

		Plant and machinery etc £
<b>COST</b>		
At 1 April 2018 and 31 March 2019		20,678
<b>DEPRECIATION</b>		
At 1 April 2018		14,746
Charge for year		4,050
At 31 March 2019		<u>18,796</u>
<b>NET BOOK VALUE</b>		
At 31 March 2019		<u>1,882</u>
At 31 March 2018		<u>5,932</u>

6. **DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR**

	31.3.19	31.3.18
	£	£
Other debtors	31,970	81,697
	<u>          </u>	<u>          </u>

7. **CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR**

	31.3.19	31.3.18
	£	£
Trade creditors	-	2,179
Other creditors	1,915	1,915
	<u>          </u>	<u>          </u>
	<u>1,915</u>	<u>4,094</u>

Combining Opinions To Generate Solutions  
CIC

Detailed Income and Expenditure Account  
for the Year Ended 31 March 2019

	31.3.19	£	31.3.18	£
	£	£	£	£
<b>Turnover</b>				
Contracts	-		22,702	
Fees Received	251,313		243,667	
Other income	65		87	
	251,378	251,378	266,456	266,456
 <b>Other income</b>				
Deposit account interest		249		142
		251,627		266,598
 <b>Expenditure</b>				
Rents	6,382		6,405	
Insurance	1,122		980	
Contract management fees	10,298		10,933	
Directors' salaries	15,000		14,950	
Salaries	136,075		146,768	
Social security	10,826		12,139	
Pensions	5,737		3,919	
Telephone and Computer Costs	9,463		12,359	
Post and stationery	1,811		1,050	
Printing and Publicity	1,762		3,831	
Travel & Subsistence	1,709		1,763	
Subscriptions	722		329	
Equipment expensed	-		96	
Events costs	5,478		4,042	
Engagement Activities	5,560		10,306	
Sundry expenses	69		75	
Recruitment costs	884		472	
Training costs	-		2,343	
Meeting costs	325		-	
Payroll Administration	324		324	
Volunteer expenses	2,862		1,327	
Professional fees	-		381	
Auditors' remuneration	1,680		1,680	
Depreciation of tangible fixed assets				
Computer equipment	4,050		4,065	
	222,139	222,139	240,537	240,537
		29,488		26,061
 <b>Finance costs</b>				
Bank charges		143		335
 <b>NET SURPLUS</b>		29,345		25,726

This page does not form part of the statutory financial statements

<b>Board Report Title</b>	Risk register review
<b>Date and Agenda Item</b>	12 <sup>th</sup> February 2020, Agenda Item 5
<b>Author</b>	Fazilla Amide
<b>Purpose</b> (for information, decision or consultation)	For discussion
<b>Key Recommendations</b> (where applicable)	N/A
<b>Attachments</b>	None

Risk Register is Healthwatch Enfield’s principle document facilitating the identification, recording and assessment of risks detailing all significant risks that threaten Healthwatch Enfield.

**KEY**

L - Likelihood =the chance that the risk may occur, with 1= remote and 5= highly probable  
 I - Impact = the impact or effect that will result if the risk occurs, with 1= insignificant and 5= extreme / catastrophic

Score: Likelihood X Impact

All risks scores within this register have been RAG-rated, as per the following:

Red - major or extreme/catastrophic risks

Amber - moderate or major risks

Blue or green - minor or insignificant risks

Impact	Extreme / catastrophic	5	5	10	15	20	25
	Major	4	4	8	12	16	20
	Moderate	3	3	6	9	12	15
	Minor	2	2	4	6	8	10
	Insignificant	1	1	2	3	4	5
			1	2	3	4	5
			Remote	Unlikely	Possible	Probable	Highly probable
Likelihood							

This report reviews all activities completed within quarter three of the year 2019/2020 against key areas of risk.

As agreed in October 2018, all risks rated as ‘red’ are discussed at each Board meeting to consider re-grading whilst also giving the Board assurance that appropriate activities are undertaken to mitigate the risks.

Key Risk	L	I	Score	Mitigating actions completed within the period	Control measures agreed by the Board
Employment issues					
1.1.1 Loss of staff capacity (illness etc.)	3	4	12	<ul style="list-style-type: none"> <li>Number of activities decreased</li> <li>Prioritisation of tasks and activities has been put in place, is reviewed on a weekly basis and reported to the Board on bi-weekly basis</li> </ul>	<ul style="list-style-type: none"> <li>Staff job descriptions are flexible enough to allow for cover. Healthwatch Enfield fosters a culture in which staff are flexible and willing to pick up additional tasks</li> <li>Numerous staff members have been trained to deliver core functions of Healthwatch Enfield</li> <li>Healthwatch Enfield offers flexible working arrangements to preserve staff wellbeing and to minimise the risk of long-term absence</li> </ul>
1.1.2 Loss of experienced staff	3	4	12	<ul style="list-style-type: none"> <li>None completed; review of the current employment offer to be completed in Q1 of 2019/2020</li> </ul>	<ul style="list-style-type: none"> <li>Healthwatch Enfield Board reviewed and agreed a pay increase for 19/20 and 20/21</li> </ul>
2. Financial risks					
2.1 Dependency on income source	3	4	12	<ul style="list-style-type: none"> <li>A commissioned piece of work secured and delivered</li> </ul>	<ul style="list-style-type: none"> <li>Sources of income are monitored and considered by the Board</li> <li>Healthwatch Enfield is considering diversifying its income streams through tendering and developing products</li> <li>Business Development Strategy is being developed</li> </ul>

Following staffing changes, the Board are asked to maintain the current status:

In order to mitigate the above, Job Descriptions are being reviewed and a succession planning strategy will be developed by 30<sup>th</sup> June 2020.

<b>Board Report Title</b>	<b>Future agenda items</b>
<b>Governance framework component</b>	N/A
<b>Date and Agenda Item</b>	12 <sup>th</sup> February 2020, Agenda Item 6
<b>Author</b>	Fazilla Amide
<b>Purpose</b> (for information, decision or consultation)	For discussion
<b>Key Recommendations</b> (where applicable)	N/A
<b>Attachments</b>	N/A

As discussed with the Board, the following outlines the proposed agenda items for the next Public Board Meetings for the coming financial year 2020/2021.

Any additions to the agenda can be discussed and agreed with the Board at each public meeting.

<b>Agenda items for discussion and information</b>	<b>Agenda items for decision</b>
<p>May</p> <ul style="list-style-type: none"> <li>▪ Risk register review</li> <li>▪ Young Healthwatch</li> <li>▪ Chief Executive’s report</li> <li>▪ Resources and risk</li> <li>▪ Stakeholder relationships</li> <li>▪ External factors</li> <li>▪ Listening to local people’s views</li> <li>▪ Quality of health and care in Enfield</li> <li>▪ Helping you find the answers</li> <li>▪ Making a difference together</li> <li>▪ Volunteering update</li> </ul>	<ul style="list-style-type: none"> <li>▪ Healthwatch Enfield budget</li> <li>▪ Project plans for major pieces of work</li> <li>▪ Appointment of an auditor</li> <li>▪ Future agenda items</li> </ul>
<p>August</p> <ul style="list-style-type: none"> <li>▪ Young Healthwatch</li> <li>▪ Chief Executive’s report</li> <li>▪ Resources and risk</li> <li>▪ Stakeholder relationships</li> <li>▪ External factors</li> <li>▪ Listening to local people’s views</li> <li>▪ Quality of health and care in Enfield</li> <li>▪ Helping you find the answers</li> <li>▪ Making a difference together</li> <li>▪ Volunteering update</li> </ul>	<ul style="list-style-type: none"> <li>▪ Review of risk register</li> <li>▪ Future agenda items</li> </ul>

<p>November</p> <ul style="list-style-type: none"> <li>▪ Risk register review</li> <li>▪ Young Healthwatch</li> <li>▪ Chief Executive’s report</li> <li>▪ Resources and risk</li> <li>▪ Stakeholder relationships</li> <li>▪ External factors</li> <li>▪ Listening to local people’s views</li> <li>▪ Quality of health and care in Enfield</li> <li>▪ Helping you find the answers</li> <li>▪ Making a difference together</li> <li>▪ Volunteering update</li> </ul>	<ul style="list-style-type: none"> <li>▪ Audited Accounts</li> <li>▪ Future agenda items</li> </ul>
<p>February</p> <ul style="list-style-type: none"> <li>▪ Risk register review</li> <li>▪ Young Healthwatch</li> <li>▪ Chief Executive’s report</li> <li>▪ Resources and risk</li> <li>▪ Stakeholder relationships</li> <li>▪ External factors</li> <li>▪ Listening to local people’s views</li> <li>▪ Quality of health and care in Enfield</li> <li>▪ Helping you find the answers</li> <li>▪ Making a difference together</li> <li>▪ Volunteering update</li> </ul>	<ul style="list-style-type: none"> <li>▪ Strategic priorities for the coming year</li> <li>▪ Future agenda items</li> </ul>

<b>Board Report Title</b>	Young Healthwatch
<b>Governance framework component</b>	Volunteering
<b>Date and agenda item</b>	12 <sup>th</sup> February 2020, Agenda Item 7
<b>Author</b>	Claire Fisher
<b>Purpose</b> (for information, decision or consultation)	Update
<b>Key Recommendations</b> (where applicable)	For noting
<b>Attachments</b>	None

A small team of six volunteers aged 16 to 25 has now been established making up a core “Young Healthwatch” team. They will conduct outreach activities that support our organisation to ascertain young peoples’ views.

The team currently includes individuals with personal experience in the following areas:

- LGBTQ+
- CAHMS
- Long term chronic condition
- Autism
- Muslim community

A survey has been developed to ascertain which priorities young people would like Young Healthwatch Enfield to focus on in 2020.

The current volunteer team will use their existing contacts and communication channels through social and community groups, schools and colleges to promote the survey.

Our target is to obtain 100 completed surveys by the end of February 2020. Analysis and reporting is expected to take place in March the results of which will form the basis of recommendations to further develop the work of the Young Healthwatch team from April 2020.

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<b>Board Report Title</b>	Acting Chief Executive's report
<b>Date and Agenda Item</b>	12 <sup>th</sup> February 2020, Agenda Item 8
<b>Author</b>	Fazilla Amide
<b>Purpose</b> (for information, decision or consultation)	For information
<b>Key Recommendations</b> (where applicable)	N/A
<b>Attachments</b>	None

Note that due to the General Election Purdah rules, our activity, as well as that of our key stakeholders, was restricted.

## Reports

In quarter three of 2019/2020, we published one Enter and View Report regarding a Care and Nursing Home: Azalea Court.

## Healthwatch Enfield strategy implementation progress

Healthwatch Enfield's team members continue to work to deliver Key Performance Indicators (KPIs) of the overall Healthwatch Enfield's strategy alongside undertaking activities associated with priority areas of work. Performance against each area is outlined below:

### (1) Involve

Key Performance Indicator	Status
3 community hub pop-ups attended	Exceeded with 5 pop-ups attended
12 hospital pop-ups attended	Not achieved as 11 pop-ups were attended
1 Civic Centre pop-up attended	Achieved
Westminster Volunteering Fair	Achieved
2 Ward Forums	Achieved
6 new volunteers recruited	Not achieved with 2 volunteers recruited

### (2) Inform

None of the Key Performance Indicators were scheduled for completion in quarter three of the current year.

### (3) Improve

None of the Key Performance Indicators were scheduled for completion in quarter three of the current year however progress has been made against priority areas of work that seek to improve local health and care services

## Priority areas of work

As suggested by local people and agreed by the Board, Healthwatch Enfield's key areas of work include:

Priorities	Follow-up work
Working with young people	Access to appointments within Primary Care
Increasing the utilisation of the feedback centre	Supporting the development of a Quality Assurance framework for Adult Social Care

It was agreed during the last public Board meeting to remove the Gantt charts for the projects as these were difficult to read. Rather, the Board requested to identify in writing whether the activity was going to plan or if any delays, what these were together with the reasons.

In quarter three, resources were committed to carrying out work against:

(1) Working with young people

Within the reporting period resources were committed to:

- establishing a cohesive 'Young Healthwatch' team
- who meet regularly
- who are in regular virtual communication and focused on
- developing a survey to ascertain young people's priorities for the coming year

Progress against the project plan is on target and the team are due to report back young people's priorities by the end of Q4

(2) Working with organisations and people with Disabilities following initial work around the NHS Long Term Plan engagement activity

Within the reporting period resources were committed to:

- Working with EDA, One2One, Our Voice, LD Sub Group, the LD Partnership Board and the CCG
- Collecting data regarding the Continuing Care process

Progress against the project plan is on target and the team are due to report back our findings in time to submit to the Health Scrutiny Panel for March 2020

Due to the changes in staff, the priorities have been reviewed and the Board are asked to consider and agree revised priorities and timescales for delivery:

(3) Reviewing the utilisation of the feedback centre

We have been liaising with the Service Provider to understand what work needs to be undertaken to enhance it's front and back end system. We are awaiting an update from them with potential time scales. In the meantime, we will keep the budget under review.

The project was therefore, put on hold until such time we have clearer time lines and the Board are asked to re-consider this as one of our key priorities.

(4) Supporting the development of a Quality Assurance framework for Adult Social Care

A pilot service was not identified by the provider by the deadline of November, 14<sup>th</sup> 2019. Discussions were had with the Local Authority and it was agreed to wait until Q4 to finalise any pending actions.

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#### (5) Access to appointments within Primary Care

Due to changes in staff and the intensive work being undertaken by GPs around Primary Care Networks, the Board were asked to consider and agreed a revised focus and timescale for delivery against this priority area. Namely:

- Holding the Annual Conference on 4th March around Primary Care Networks and Social Prescribing to support engagement of GP Practices and patient access.

Work was undertaken in Q3 to co-produce the dates, theme and topics with members of the Health and Wellbeing Board, the CCG, representatives of the GP Sub Group and the Public and Patient Engagement Committee. Work was also undertaken to source a suitable venue large enough to hold our event.

This current priority is on target.

#### **Escalations to Healthwatch England**

In quarter three, no issues were escalated to Healthwatch England.

#### **Escalations to CQC**

In quarter three, safeguarding incidents were identified and were escalated to the Care Quality Commission.



<b>Board Report Title</b>	<b>Finance and staffing report</b>
<b>Governance framework component</b>	Resources and risk
<b>Date and Agenda Item</b>	12 <sup>th</sup> February 2020, Agenda item 9
<b>Author</b>	Fazilla Amide in consultation with Valerie Dinsmore
<b>Purpose</b> (for information, decision or consultation)	Information
<b>Key Recommendations</b> (where applicable)	N/A
<b>Attachments</b>	N/A

### Staffing

There were a number of changes in Quarter 3:

- The Chief Executive commenced 6 months of unpaid leave
- The Community Engagement Manager is acting up as the Chief Executive for this period. In addition,
- Our Community Engagement Officer resigned
- We successfully recruited to this role and the candidate started in Q4
- We also recruited an additional Engagement Officer role on a 6 month fixed term contract: they commenced on the 25<sup>th</sup> November 2019

### Finance

Healthwatch Enfield’s income and expenditure for the period 1<sup>st</sup> April 2019 - 31<sup>st</sup> December 2019 is in line with the anticipated spending trends for the majority of the expenditure lines; any significant variations have been addressed in the notes (Figure 1).

Our cash flow forecast (Figure 2) anticipates a year end position of a surplus of £1,232 against the budgeted deficit of £18,009.77 once we are in receipt of the quarter 3 grant income payment of £45k from Enfield Council.

This surplus is mainly due to additional income earned, savings made on audit, governance, payroll and volunteer costs as noted in the notes below.

Figure 1. YTD budget vs actual figures (below)

	<u>Apr - Dec 19</u>	<u>Budget to date</u>	<u>£ Over Budget</u>	<u>% of Budget</u>	<u>Notes</u>
<b>Income</b>					
Contracts	11,580.00	8,400.00	3,180.00	137.86%	
Underspend carried forward	3,000.00				
Grants	<u>90,000.00</u>	<u>135,000.00</u>	<u>-45,000.00</u>	<u>66.67%</u>	invoice for 45,000 sent, awaiting payment
<b>Total Income</b>	<b>104,580.00</b>	<b>143,400.00</b>	<b>-38,820.00</b>	<b>72.93%</b>	
<b>Expense</b>					
Accommodation	3,420.56	3,559.35	-138.79	96.1%	
<b>Co-Design Workshops</b>					
Catering	0.00	0.00	0.00	0.0%	
Resources	0.00	0.00	0.00	0.0%	
Venue Hire	0.00	0.00	0.00	0.0%	
Co-Design Workshops - Other	<u>1,000.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.0%</u>	
<b>Total Co-Design Workshops</b>	<b>1,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.0%</b>	
<b>Communications &amp; Marketing</b>					
Advertising	120.00	1,125.00	-1,005.00	10.67%	delay on developing promotional materials - to be dispensed by year end
Leaflets & Posters	<u>329.75</u>	<u>1,125.00</u>	<u>-795.25</u>	<u>29.31%</u>	delay on developing promotional materials following engagement with local people
<b>Total Communications &amp; Marketing</b>	<b>449.75</b>	<b>2,250.00</b>	<b>-1,800.25</b>	<b>19.99%</b>	
<b>Community Engagement &amp; Outreach</b>					
Booking Fees	490.00	500.00	-10.00	98.0%	
BSL Interpreters	0.00	0.00	0.00	0.0%	
Resources	<u>841.53</u>	<u>1,500.00</u>	<u>-658.47</u>	<u>56.1%</u>	delay on developing promotional materials - to be dispensed by year end

<b>Total Community Engagement &amp; Outreach</b>	1,331.53	2,000.00	-668.47	66.58%	
<b>Governance Costs</b>	6,468.95	7,703.10	-1,234.15	83.98%	underspend due to tax code changes
<b>IT</b>					
software	594.30	656.82	-62.52	90.48%	
Support	852.00	956.25	-104.25	89.1%	awaiting December invoice
<b>Total IT</b>	1,446.30	1,613.07	-166.77	89.66%	
<b>Office Costs</b>					
Internet & Hosting	5,373.59	5,507.93	-134.34	97.56%	
Photocopying	81.64	90.00	-8.36	90.71%	
Stationery	375.18	374.94	0.24	100.06%	
Telephone-Mobile	542.66	743.67	-201.01	72.97%	underspend due to no longer being charged for office calls
<b>Total Office Costs</b>	6,373.07	6,716.54	-343.47	94.89%	
<b>Professional Fees</b>					
Accounting	1,192.80	1,416.67	-223.87	84.2%	underspend due to keeping rates the same
Insurance	832.35	1,062.50	-230.15	78.34%	savings made due to negotiating better insurance deal
Legal	0.00	0.00	0.00	0.0%	
Payroll	315.24	708.33	-393.09	44.51%	underspend due to keeping rates the same
Other					
<b>Total Professional Fees</b>	2,340.39	3,187.50	-847.11	73.42%	
<b>Staff Costs</b>					
Pension Contributions	9,300.11	9,391.50	-91.39	99.03%	
Salaries & On costs	103,560.53	106,123.95	-2,563.42	97.59%	
<b>Total Staff Costs</b>	112,860.64	115,515.45	-2,654.81	97.7%	
<b>Staffing Costs</b>					
Recruitment	690.92	0.00	690.92	100.0%	un-anticipated spend due to staff changes

Subsistence	171.16	249.96	-78.80	68.48%	savings made through efficiencies
Training	379.20	350.00	29.20	108.34%	over budget due to new staff
Travel	1,136.70	1,125.00	11.70	101.04%	
<b>Total Staffing Costs</b>	<b>2,377.98</b>	<b>1,724.96</b>	<b>653.02</b>	<b>137.86%</b>	
Subscriptions	1,200.00	1,200.00	0.00	100.0%	
<b>Volunteer Costs</b>					
Badges	81.00	150.00	-69.00	54.0%	savings made by negotiating better deals
Subsistence	929.20	1,349.98	-420.78	68.83%	underspend due to volunteer not claiming expenses
Training	210.00	484.99	-274.99	43.3%	underspend due to volunteers taking advantage of free training opportunities
Travel	352.62	1,074.99	-722.37	32.8%	savings made via volunteers using concessionary travel
<b>Total Volunteer Costs</b>	<b>1,572.82</b>	<b>3,059.96</b>	<b>-1,487.14</b>	<b>51.4%</b>	
<b>Total Expense</b>	<b>140,841.99</b>	<b>148,529.93</b>	<b>-7,687.94</b>	<b>94.82%</b>	
<b>Surplus for the year</b>	<b>-36,261.99</b>	<b>-5,129.93</b>	<b>-31,132.06</b>	<b>706.87%</b>	awaiting invoice on grant payment of 45,000



	Apr - Dec 19	January	February	March	Total	Annual budget	Difference	NOTES
<b>Contracts</b>	11,580.00	0.00	0.00	0.00	11,580.00	8,400.00	3,180.00	
<b>Underspend carried forward</b>	3,000.00	0.00	0.00	0.00	3,000.00	0.00	3,000.00	
<b>Grants</b>	30,000.00	0.00	0.00	45,000.00	135,000.00	180,000.00	-45,000.00	invoice for 45,000 sent, awaiting payment
	104,580.00	0.00	0.00	45,000.00	149,580.00	188,400.00	-38,820.00	
<b>Accommodation</b>	3,420.56	1,150.44	49.36	49.36	4,669.71	4,745.83	-76.12	
<b>Co-Design Workshops</b>								
<b>Catering</b>	0.00	0.00	0.00	500.00	500.00	500.00	0.00	
<b>Resources</b>	0.00	0.00	0.00	500.00	500.00	500.00	0.00	
<b>Venue Hire</b>	0.00	0.00	0.00	200.00	200.00	200.00	0.00	
<b>Total Co-Design Workshops</b>	1,000.00	0.00	0.00	1,200.00	1,200.00	1,200.00	0.00	
<b>Communications &amp; Marketing</b>								
<b>Advertising</b>	120.00	380.00	500.00	500.00	1,500.00	1,500.00	0.00	
<b>Leaflets &amp; Posters</b>	329.75	390.08	390.08	390.08	1,500.00	1,500.00	-0.00	
<b>Total Communications &amp; Marketing</b>	449.75	770.08	890.08	890.08	3,000.00	3,000.00	-0.00	
<b>Community Engagement &amp; Outreach</b>								
<b>Booking Fees</b>	430.00	0.00	0.00	0.00	430.00	500.00	-10.00	anticipated underspend
<b>BSL Interpreters</b>	0.00	0.00	0.00	500.00	500.00	500.00	0.00	
<b>Resources</b>	841.53	129.00	529.47	0.00	1,500.00	1,500.00	0.00	
<b>Total Community Engagement &amp; Outreach</b>	1,331.53	129.00	529.47	500.00	2,430.00	2,500.00	-10.00	anticipated underspend due to changes in tax codes
<b>Governance Costs</b>	6,468.95	1,078.16	1,078.16	1,078.16	9,703.43	10,270.83	-567.41	
<b>IT</b>								
<b>software</b>	534.30	93.84	93.84	93.86	875.84	875.84	0.00	
<b>Support</b>	852.00	141.00	141.00	141.00	1,275.00	1,275.00	0.00	
<b>Total IT</b>	1,446.30	0.00	0.00	0.00	2,150.84	2,150.84	0.00	
<b>Office Costs</b>								
<b>Internet &amp; Hosting</b>	5,373.59	50.40	50.40	50.40	5,524.79	5,760.00	-235.21	anticipated underspend as domain costs remain unchanged
<b>Photocopying</b>	81.64	14.00	14.00	10.36	120.00	120.00	0.00	
<b>Stationery</b>	375.18	41.61	41.61	41.60	500.00	500.00	0.00	
<b>Telephone-Mobile</b>	542.66	143.69	143.68	143.64	991.67	991.67	0.00	
<b>Total Office Costs</b>	6,373.07	255.70	255.69	252.00	7,136.46	7,371.67	-235.21	
<b>Professional Fees</b>								
<b>Accounting</b>	1,192.80	0.00	0.00	0.00	1,192.80	1,416.67	-223.87	anticipated underspend due to accounting costs staying at same rate.
<b>Insurance</b>	832.35	0.00	0.00	0.00	832.35	1,062.50	-230.15	negotiated a better insurance deal
<b>Legal</b>	0.00	212.50	0.00	0.00	212.50	212.50	0.00	
<b>Payroll</b>	315.24	0.00	0.00	0.00	315.24	708.33	-393.09	anticipated underspend as payroll costs negotiated at same rate
<b>Other</b>	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
<b>Total Professional Fees</b>	2,340.39	212.50	0.00	0.00	2,552.89	3,400.00	-847.11	
<b>Staff Costs</b>								
<b>Pension Contributions</b>	3,300.11	740.00	592.00	759.00	11,391.11	12,522.00	-1,130.89	anticipated underspend due to staff changes
<b>Salaries &amp; Oncosts</b>	103,560.53	12,324.72	12,324.72	12,983.50	141,193.47	141,498.60	-305.13	anticipated underspend due to secondment and staffing changes
<b>Total Staff Costs</b>	112,860.64	0.00	0.00	0.00	152,584.58	154,020.60	-1,436.02	
<b>Staffing Costs</b>								
<b>Recruitment</b>	630.92	0.00	0.00	0.00	630.92	0.00	630.92	confirmed overspend for staffing changes
<b>Subsistence</b>	171.16	50.00	160.00	50.00	431.16	500.00	-68.84	anticipated underspend due to savings due to staff changes
<b>Training</b>	379.20	312.00	0.00	103.00	794.20	500.00	294.20	anticipated overspend due to staff changes
<b>Travel</b>	1,136.70	121.10	121.10	121.10	1,500.00	1,500.00	0.00	
<b>Total Staffing Costs</b>	2,377.98	483.10	281.10	274.10	3,416.28	2,500.00	916.28	
<b>Subscriptions</b>	1,200.00	0.00	0.00	0.00	1,200.00	1,200.00	0.00	
<b>Volunteer Costs</b>								
<b>Badges</b>	81.00	0.00	219.00	0.00	100.00	300.00	-200.00	anticipated underspend due to re-use efficiencies
<b>Subsistence</b>	329.20	100.00	165.00	425.00	1,619.20	2,000.00	-380.80	anticipated underspend due to lunch entitlement not always being met
<b>Training</b>	210.00	180.00	180.00	180.00	750.00	750.00	0.00	
<b>Travel</b>	352.62	150.00	150.00	150.00	802.62	2,000.00	-1,197.38	anticipated underspend due to concessionary travel
<b>Total Volunteer Costs</b>	1,572.82	430.00	495.00	755.00	3,171.82	5,050.00	-1,878.18	
<b>Contract management fee</b>	0.00	0.00	0.00	3,000.00	3,000.00	3,000.00	0.00	
	140,841.99	4,580.98	3,650.86	5,070.70	193,348.01	206,409.77	-13,061.77	
<b>Surplus for the year</b>	<b>-36,261.99</b>	<b>-4,580.98</b>	<b>-3,650.86</b>	<b>39,929.30</b>	<b>-43,766.01</b>	<b>-18,009.77</b>	<b>-25,756.23</b>	awaiting invoice on grant payment of 45,000

Figure 2. Cash flow forecast

Board Report Title	Relationships with stakeholders
Governance framework component	Working with stakeholders
Date and Agenda Item	12 <sup>th</sup> February 2020, agenda item 10
Author	Fazilla Amide and Parin Bahl
Purpose (for information, decision or consultation)	Information
Key Recommendations (where applicable)	N/A
Attachments	N/A

## Local relationships

### **Barnet Enfield and Haringey Mental Health NHS Trust**

We continue our involvement with the Board at Barnet Enfield and Haringey Mental Health NHS Trust.

For 2019/2020, we established a schedule of regular pop-ups at the mental health units at Chase Farm hospital site. This aligns with our key priority areas and was put in place to diversify feedback sources, enhancing the evidence base.

### **Chase Farm Hospital, part of Royal Free London NHS Foundation Trust**

We continue our involvement with the Board at the Royal Free London NHS Foundation Trust alongside a regular schedule of visits to Chase Farm hospital on a monthly basis.

### **North Middlesex University Hospital NHS Trust (NMUHT)**

We continue our involvement with the Board at NMUHT.

Parin and Noelle met with Maria Kane, Chief Executive at North Middlesex University Hospital NHS Trust as part of our regular meetings.

### **NHS Enfield Clinical Commissioning Group (CCG)**

We continue our involvement with the Primary Care Transformation sub-group, Community Education Providers Network, Voluntary Sector Stakeholder Reference Group, Patient and Public Involvement Committee, Social Prescribing group and, through Parin, the Governing Body.

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## **London Borough of Enfield**

We continue our involvement with the Older People's Partnership Board, Mental Health Partnership Board and Health Scrutiny. Parin continues to attend the Safeguarding Adults Board and the Health and Wellbeing Board.

We were also selected to join the Voluntary Sector Strategy group, for the first time.

We have also been attending the Voluntary Sector Prevention and Early Intervention Steering Group to bring the voices of local communities as service developments are considered.

## **Engaging with local voluntary and community sector organisations**

We continue to maintain relationships with our voluntary and community sector partners. Throughout the period, we attended meetings with for example, Age UK, Our Voice, Enfield Carers and the North London Hospice.

## **Report on Meetings attended by Healthwatch Enfield's Board Members**

Healthwatch Enfield Board members attend a range of strategic and operational meetings both at a local level, as well as North Central London (NCL) area meetings (covering Camden, Islington, Haringey, Enfield, Barnet) and London-wide.

***It should be noted that a number of meetings were postponed during this quarter to allow for election 'purdah' rules.***

These meetings offer an opportunity for Healthwatch to share key messages from our wide range of engagement activities with key decision-makers. We also attend Trust Board meetings as observers and at a number of these, we have an opportunity to offer challenge to and support for, the work of local Trusts. A summary of meetings attended is provided below for information. Healthwatch Enfield is grateful to commissioners and providers for including us in key meetings and giving time to consider our contributions. An oral update on key contributions will be provided at the Board meeting.

A summary of this activity is provided below for information:

- Local
    - Health and Wellbeing Board meeting - (postponed)
    - NHS Enfield Clinical Commissioning Group Governing Body meeting
    - North Middlesex University Hospital NHS Trust's Clinical Quality and Risk Committee
    - North Middlesex University Hospital NHS Trust meeting with new Chair
    - North Middlesex University Hospital NHS Trust Board meeting as an observer
-

- Royal Free -Chase Farm Urgent Care Centre
  - North Central London (Healthwatch Enfield representative is one of two who attend these meetings on behalf of Healthwatch organisations in Barnet, Camden, Enfield, Haringey and Islington)
    - North London Partners in Health and Care meetings, including:
      - Stakeholder event for NCL CCGs
      - Engagement Advisory board
  - London-wide
    - Healthwatch London Region meeting
-

<b>Board Report Title</b>	<b>External factors</b>
<b>Governance framework component</b>	External communications
<b>Date and agenda item</b>	12 <sup>th</sup> February 2020, Agenda Item 11
<b>Author</b>	Emma Friddin
<b>Purpose</b> (for information, decision or consultation)	For information
<b>Key Recommendations</b> (where applicable)	N/A
<b>Attachments</b>	None

### Public back NHS plans for new rapid care measures

England’s top doctor has [welcomed](#) new polling showing that patients and the public support NHS proposals focussing on fast treatment for those who need it in A&E. A national survey commissioned by Healthwatch England found that an overwhelming majority of people placed a high priority on early initial assessment on arrival at A&E for everyone, allowing staff to prioritise those patients with the greatest need, and ensuring that patients with critical conditions get the right standard of care quickly..

### Tens of thousands given life changing diabetes monitors thanks to the NHS Long Term Plan

Nearly 30,000 people across the country with Type 1 diabetes have [received](#) life-changing diabetes monitors through the NHS Long Term Plan. The innovative device, which is the size of a £2 coin and worn on the arm, means people with Type 1 do not have to carry out multiple painful finger-prick checks to monitor their blood sugar levels. Instead, people with the condition can monitor their blood sugar levels in a much more convenient way, making it easier for people to manage their blood sugar levels.

### NHS taskforce to drive improvements in young people’s hospital mental health, learning disability and autism care

NHS chief Simon Stevens has [announced](#) that a new taskforce will be set up to improve current specialist children and young people’s inpatient mental health, autism and learning disability services in England. The NHS chief also announced that Anne Longfield OBE, Children’s Commissioner for England, will chair an independent oversight board to scrutinise and support the work of the taskforce.

### New NHS online training to help people get home from hospital quicker

NHS England and Health Education England have [launched](#) ActNow, an e-learning tool developed for health service and care staff to help them reduce hospital delays for patients. These new resources will help staff to take prompt practical actions and use every opportunity to ensure patients are cared for in the best place for them.

### 78 NHS trusts to receive new cancer screening machines

The 78 trusts that will benefit from funding for new cancer testing and detection technology have been [announced](#). The new machines will improve screening and early diagnosis of cancer, and are part of the government’s commitment to ensure 55,000 more people survive cancer each year. 14 London trusts are on the list to receive new machines, including the Royal Free London NHS Foundation Trust.

### All inpatients with learning disability or autism to be given case reviews

All 2,250 patients with learning disabilities and autism who are inpatients in a mental health hospital will have their care reviewed over the next 12 months. As part of the [review](#), the government will commit to providing each patient with a date for discharge, or where this is

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not appropriate, a clear explanation as to why and a plan to move them closer towards being ready for discharge into the community.

### **£26 million to help hospitals introduce digital prescriptions**

The [digital prescription technology](#) will see hospitals move away from handwritten prescriptions. The successful 25 trusts include acute, mental health and community services. View the list of trusts that will receive a share of the funding. The funding will support them to fulfil the NHS Long Term Plan commitment to introduce electronic prescribing systems across all providers. London Trusts who received funding include Barts Health, BHRUT, London North West University Healthcare NHS Trust and The Hillingdon Hospitals NHS Foundation Trust.

### **100,000 more people to be given personal health budgets**

A [change in law](#) means people who use wheelchairs or need mental health support will have greater choice and control in managing their own health and care. The change in law comes into force on Monday 2nd December, following legislation being laid in Parliament on the 31st October. From 2nd December, everyone eligible for an NHS wheelchair and people who require aftercare services under section 117 of the Mental Health Act will have access to a personal health budget.

### **CQC reports on safe use of radiation in health care settings**

CQC's annual [report](#) on their work to enforce the Ionising Radiation (Medical Exposure) Regulations in England has been published. The report gives a breakdown of the number and type of statutory notifications of errors received from healthcare providers in 2018/19 where patients were exposed to ionising radiation. Of all the notifications received, 796 (79% of the total) were from diagnostic radiology departments, 75 were from nuclear medicine and 138 notifications were from radiotherapy departments.

### **Nursing students to receive £5,000 payment a year**

All nursing students on courses from September 2020 will receive a payment of at least £5,000 a year which they will not need to pay back. It is expected to benefit more than 35,000 students every year. The [announcement](#) of the funding comes ahead of the UCAS university application deadline of 15th January. The funding comes as part of the government's pledge to increase nurse numbers by 50,000 over the next 5 years.

### **NHS to fast-track access to cannabis-based medicine for children with severe epilepsy**

Thousands of people, including children with severe epilepsy will have access to a potentially life changing, seizure preventing cannabis-based treatment on the NHS from the New Year. Following an NHS England [agreement](#) with GW Pharma, NICE has been able to recommend the treatment, with access fast tracked and available from 6th January.

### **Health and social care staff and senior leaders among those praised in new year honours**

Health and social care sector recognised in the [new year honours list](#) 2020. This list celebrates the achievements and service of extraordinary people across the UK. NHS Chief Executive Simon Stevens and Professor Dame Sally Davies, former Chief Medical Officer, among those honoured

### **Free hospital parking for thousands of patients, staff and carers**

Disabled people, frequent outpatient attenders, parents of sick children staying overnight and staff working night shifts will not have to pay for NHS car parking [from April 2020](#). The government will also consider car parking capacity across the country, and how improved technology will reduce burdens for hospitals and take away stress for visitors.

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<b>Board Report Title</b>	<b>Helping you find the answers</b>
<b>Governance framework component</b>	Statutory duties
<b>Date and Agenda Item</b>	12 <sup>th</sup> February 2020, Agenda Item 12.1
<b>Author</b>	Emma Friddin
<b>Purpose</b> (for information, decision or consultation)	For information
<b>Key Recommendations</b> (where applicable)	N/A
<b>Attachments</b>	N/A

Please note that pre-election Purdah began from 6/11/2019 - 12/12/2019. During this time we experienced a reduction in our external communications, especially communications relating to ‘involve’. This is reflected in some of the data presented below.

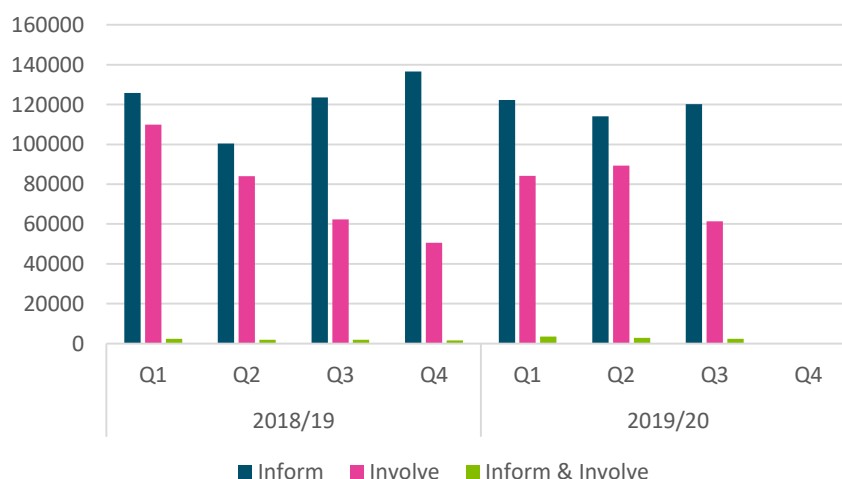
Between 1<sup>st</sup> October and 31<sup>st</sup> December 2019 (Q3 2019/20), we:

- provided information about health and care services to 120,270 individuals (inform)
- promoted opportunities for involvement reaching 61,294 individuals (involve)

Inform	Q1 2019/20	Q2 2019/20	Q3 2019/20
Signposting service	45	75	74
Website	5,231	6,099	6,349
Social media	116,963	107,992	113,847
<b>Total</b>	<b>122,239</b>	<b>114,166</b>	<b>120,270</b>

Involve	Q1 2019/20	Q2 2019/20	Q3 2019/20
Website	354	176	231
Social media	83,806	89,211	61,063
<b>Total</b>	<b>84,160</b>	<b>89,387</b>	<b>61,294</b>

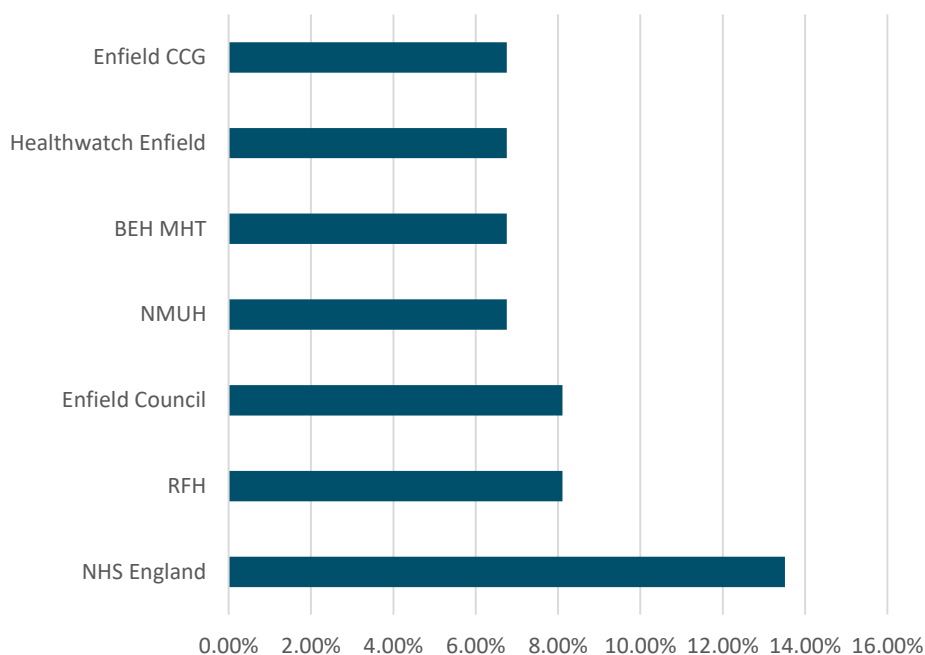
Inform & Involve	Q1 2019/20	Q2 2019/20	Q3 2019/20
E-newsletter	3,454	2,896	2,339
<b>Total</b>	<b>3,454</b>	<b>2,896</b>	<b>2,339</b>



## Helping you find information via our signposting service

### Inform

During Q3 2019/20 we signposted 74 individuals to help them find the information they need. The organisations we signposted to most frequently include NHS England, Royal Free London NHS Foundation Trust (RFH), Enfield Council Adult Social Care and/or Children’s Services, the North Middlesex University Hospital (NMUH), Barnet, Enfield and Haringey Mental Health Trust (BEH-MHT), Healthwatch Enfield and Enfield Clinical Commissioning Group (CCG).



We also signposted individuals to: DHL Patient Transport, Enfield Carers Centre, Enfield Disability Action, Enfield Mental Health Users Group, Enfield Voluntary Action, Barnet Clinical Commissioning Group, Healthwatch Haringey, London Ambulance Service, Mind in Enfield, Public Health Services Ombudsman, PoHwer, Silverpoint Sexual Health Clinic, The Samaritans and University College Hospital.

### Helping you find information via our e-newsletter

During Q3 2019/20, individuals had opportunities to obtain information via opening our newsletter 2,339 times. We sent 3 e-newsletters during this period.

Please note that two newsletters were sent in October and no newsletters were sent in November because of the pre-election Purdah period. The second October newsletter was sent just before Purdah started and the December newsletter was sent after Purdah had finished:

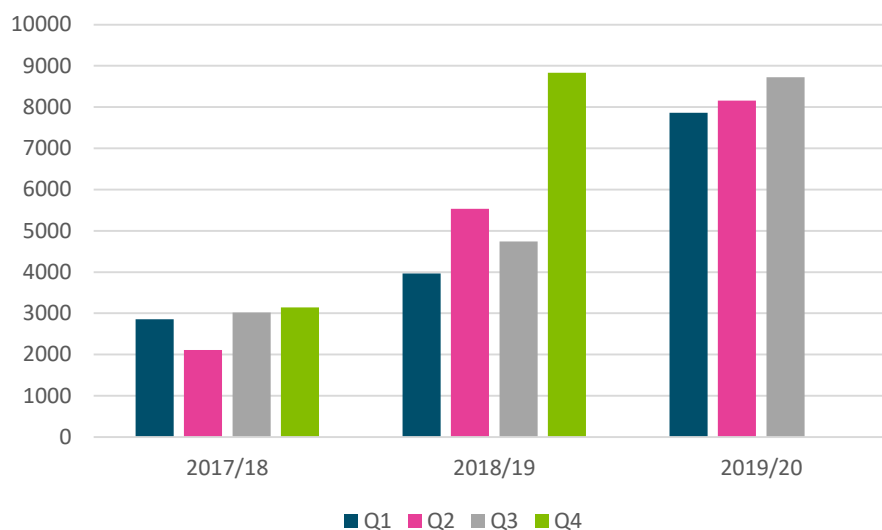
Newsletter	Opens	‘Inform’ content	‘Involve’ content
October 2019	695	Changes to GP ‘Walk in services’ during the weekends and public holidays	We are recruiting!  Have you, or someone you know, recently stayed on Charles Coward Ward at the North Mid Hospital? Tell us about your experiences



			<p>Tell us your experiences of using continuing healthcare or personal budgets</p> <p>Help choose a name for the new mental health unit at St Ann's Hospital Share your views about the future of Enfield Town</p>
October 2019	944	<p>NHS Enfield Clinical Commissioning Group agree to keep the Urgent Care Centre at Chase Farm open until 10pm</p> <p>Information on how to stay well this winter</p> <p>Temporary changes to leadership at Healthwatch Enfield</p> <p>The North Mid has been rated 'Requires Improvement' by the Care Quality Commission</p> <p>New weekly breastfeeding support group opens in Enfield</p>	<p>We are recruiting! Join us as a Community Outreach, Research and Events Co-ordinator</p> <p>Help develop the National Institute for Health and Care Excellence guideline on Social work for adults with complex needs</p> <p>Tell the Department of Health and Social Care how they can better support people with rare diseases</p>
December 2019	700	<p>Save the date for our annual conference</p> <p>Local NHS services opening times over the festive season</p> <p>Healthwatch Enfield becomes part of the Enfield Dementia Action Alliance</p> <p>Public urged to act fast to avoid festive flu</p> <p>Seasons Greetings from Healthwatch Enfield</p>	<p>Free Cancer Awareness sessions for local people</p> <p>Leave feedback of your experience of us on Google reviews</p> <p>Become a Healthwatch Enfield Volunteer</p> <p>Join our student placement scheme</p> <p>Join The London Clinical Senate Patient and Public Voice Group</p> <p>Join the London Immunisation Partnership Board as a Lay Member</p>

## Helping you find information via our website

During Q3 2019/20, 8,726 people used our website.



The most popular webpages include:

### Inform

Webpage	Number of visitors
Information about parking at NMUH	1047
Information about Enfield drugs and alcohol service Clavering	975
Information about Enfield Sexual Health Clinics	847
Information about booking a blood test online at NMUH	456
Information about Enfield drugs and alcohol service Vincent House	261
Changes to how you book an appointment at the Enfield evening and weekend GP service	233
Local NHS services opening times over the festive season	133
Information about Chase Farm Hospital mental health services	131
NHS Enfield Clinical Commissioning Group agree to keep the Urgent Care Centre at Chase Farm open until 10pm	116
Information about Bay Tree House Enfield	114
Information about the crisis resolution home treatment team	110
Enter and View - Capetown Ward	97
Information about In Health North London Diagnostics Centre	95
Information about St Ann's Hospital	93
Service directory - GP practices	92
Information on Willow House Dental Surgery	91
Book your blood test online at the Royal Free Hospital	88
Information about district nursing team Rowan Court	85

New wellbeing hub opens in Enfield Town	82
Information about the health visiting team, Forest Road	82
About health services	80
Information about Complex Care Team	79
Changes to patient transportation at Chase Farm Hospital	76
Temporary changes to leadership at Healthwatch Enfield	75
Information about district nursing team Rowan Court	73
Information about the Arc personality service Enfield	66
Information about the Magnolia Unit Enfield	59
Information about the Oaks Ward Enfield	59
Report: Accident & Emergency - a 'one stop shop' for everyday healthcare needs	58
The North Mid has been rated 'Requires Improvement' by the Care Quality Commission	55
Information about the looked after children's team	53
Information about the North Middlesex Hospital Sexual Health Team	53
Service directory - hospitals	51
Report: Using technology to ease the burden on primary care	49
Information about continence services	49
Change of Medical Director at North Middlesex Hospital	47
Changes to how you book non-emergency patient transport for hospital appointments	47
Information about Dorset Ward	47
Service directory - mental health services	45
<b>Total</b>	<b>6349</b>

### **Involve**

<b>Webpage</b>	<b>Number of visitors</b>
Community meeting with the Home Office at Enfield Civic Centre	91
Help choose a name for the new mental health unit at St Ann's Hospital	58
Consultation - new bus route 456 between Crews Hill and North Middlesex Hospital	49
Lets talk Enfield Town - share your views	33
<b>Total</b>	<b>231</b>

### **Other**

<b>Webpage</b>	<b>Number of visitors</b>
Get involved - jobs	683
About us	296
Contact us	286
News	202
Our reports	161
Volunteer with us	156
Events	96

Services	96
Our work	75
Attend a board meeting	66
Consultation	44
<b>Total</b>	<b>2161</b>

## Helping you find information via Social Media

### ○ Twitter

During Q2 2019/20, the information we posted on Twitter reached a total of 150,492 users.

	2017/18	2018/19	2019/20
Q1	83,700	236,700	158,398
Q2	126,400	149,548	156,805
Q3	150,300	158,130	150,492
Q4	191,700	132,676	
<b>Total</b>	<b>552,100</b>	<b>677,054</b>	<b>465,695</b>

The information we posted on Twitter (inform) reached a total of 97,499 users. The opportunities for involvement we posted on Twitter (involve) reached a total of 52,993 users.

### ○ Facebook

During Q2 2019/20, the information we posted on Facebook reached a total of 24,418 users.

	2017/18	2018/19	2019/20
Q1	5,046	23,117	42,371
Q2	15,527	31,847	40,398
Q3	4,861	33,799	24,418
Q4	7,231	46,847	
<b>Total</b>	<b>32,665</b>	<b>135,610</b>	<b>107,187</b>

The information we posted on Facebook (inform) reached a total of 16,348 users. The opportunities for involvement we posted on Twitter (involve) reached a total of 8,070 users.

## Helping you find information via local media outlets

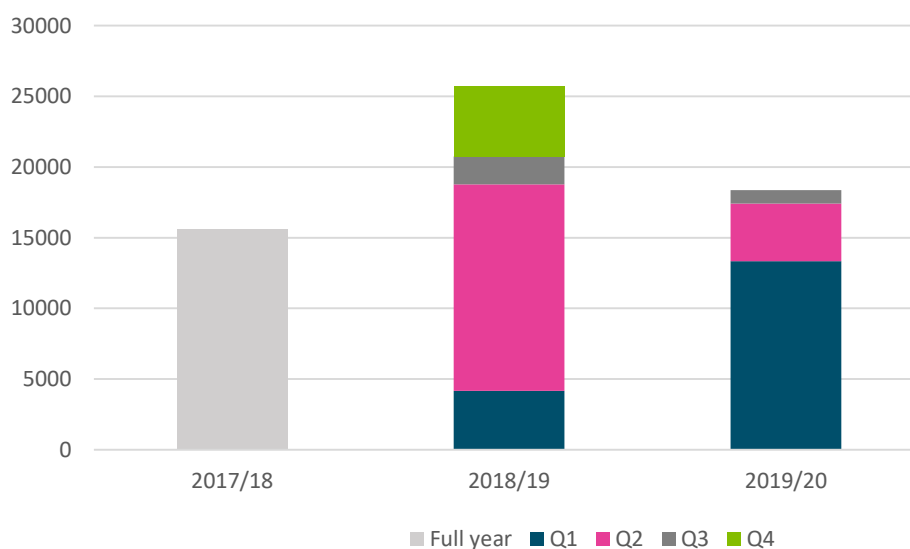
During Q3 2019/20 we had 5 mentions in local media outlets. Please note that we did not publish an article in Enfield Dispatch in December due to the upcoming elections and we did not send out any press releases during the pre-election Purdah period:

Date	Title	Media outlet
01/10/2019	Walk in services withdrawn	Enfield Dispatch
01/10/2019	How local Healthwatch can use CQC reports to drive improvement	Care Quality Commission
02/10/2019	Discontinuation of walk-in GP access on weekends and public holidays	Palmers Green Community
01/10/2019	Shaping future healthcare	Our Voice Enfield
01/11/2019	Another victory for people power	Enfield Dispatch

<b>Board Report Title</b>	Your views on health and care
<b>Governance framework component</b>	Statutory duties
<b>Date and Agenda Item</b>	12 <sup>th</sup> February 2020, Agenda item 12.2
<b>Author</b>	Emma Friddin
<b>Purpose</b> (for information, decision or consultation)	For information
<b>Key Recommendations</b> (where applicable)	N/A
<b>Attachments</b>	N/A

During Q3 2019/20, we have collected 954 items of feedback about local services through:

- Surveys - 103 items of feedback
- Enter & View visits - 647 items of feedback
- Activities - 192 items of feedback
- Online Feedback Centre - 12 items of feedback



### Feedback from surveys (103 items of feedback)

Survey name	Impact of survey	Responses	Items of feedback
Share your views on Continuous Healthcare/ Personal Budgets	To develop an evidence base for our work around Continuous Healthcare/ Personal Budgets	6	103
<b>Total</b>		<b>6</b>	<b>103</b>

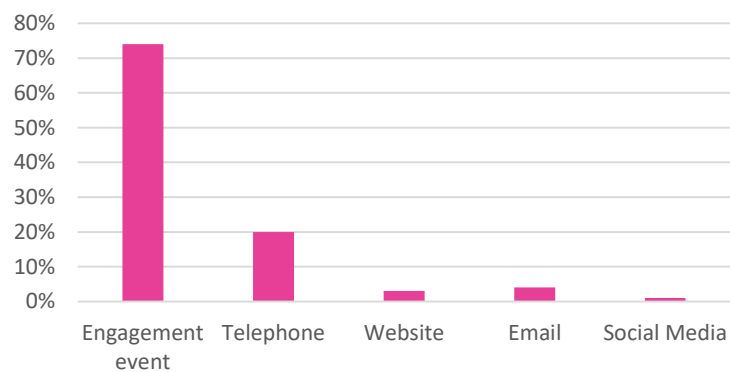
## Feedback from Enter & View visits (647 items of feedback)

Visit	Responses	Items of feedback
Charles Coward Ward North Middlesex University Hospital	27	436
Arnold House	18	211
<b>Total</b>	<b>45</b>	<b>647</b>

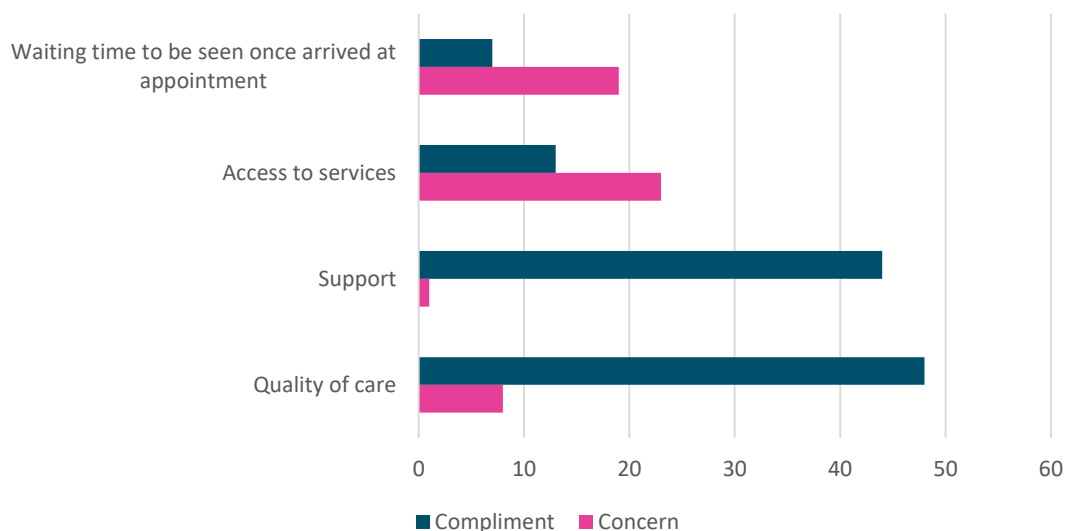
## Feedback from activities (192 items of feedback)

57% of the people we have heard from through our activities have told us about a negative experience of using services in Enfield. 42% have told us about a positive experience. 1% expressed their point of view.

74% of feedback has been collected at engagement events, 20% has been collected via the telephone, 3% has been collected via our website and 4% has been collected via emails. Individuals have also passed on their feedback via social media (1%).



The main themes arising from feedback include quality of care, support, access to services and waiting time to be seen once arrived at appointment.



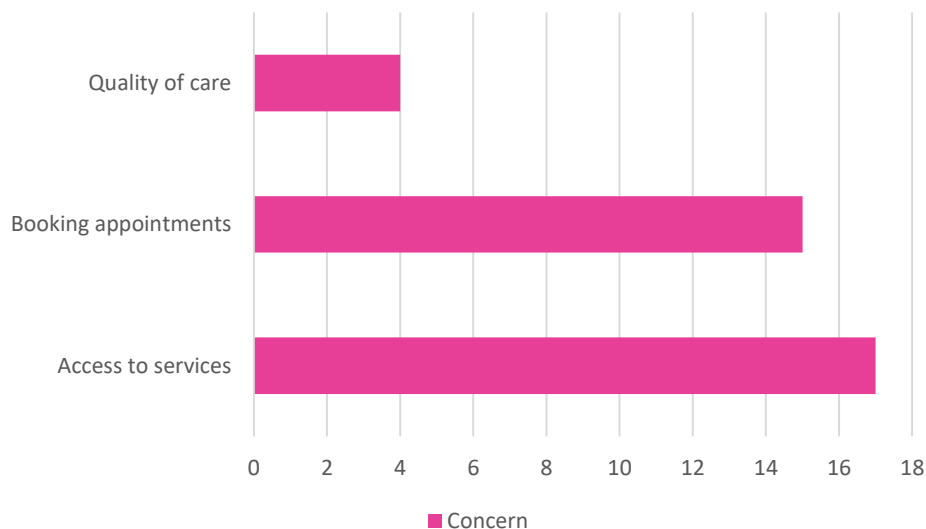
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## Feedback on and quality of services in Enfield

The following sections provide a breakdown (by service or provider) of feedback received by Healthwatch Enfield through its activities and online feedback centre alongside any recently published Care Quality Commission's reports on health and care provision in Enfield.

### 1. GPs in Enfield

52 individuals have shared their experiences with us of using GP services in Enfield through our engagement and signposting activities. This included 36 concerns (72%) and 14 compliments (28%). The main themes from intelligence gathered include booking appointments access to services and quality of care.



3 reviews have been written on the Healthwatch Enfield feedback centre about GP practices in Enfield.

#### Care Quality Commission reports

The CQC has published 2 reports relating to Enfield GP practices during this time period.

Provider	Date of publications	Current rating	Previous rating	Previous publication
North London Slimming Clinic	29/10/2019	Inadequate	No rating given	20/02/2019
East Enfield Medical Practice	27/11/2019	Good	Good	20/04/2016

### 2. Dental practices in Enfield

1 individual has shared their experiences with us of using dental services in Enfield through our engagement and signposting activities.

No reviews have been written on the Healthwatch Enfield feedback centre about dental practices in Enfield.

#### Care Quality Commission reports

The CQC has not published any reports relating to Enfield dental practices during this time period.

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### 3. Pharmacy services in Enfield

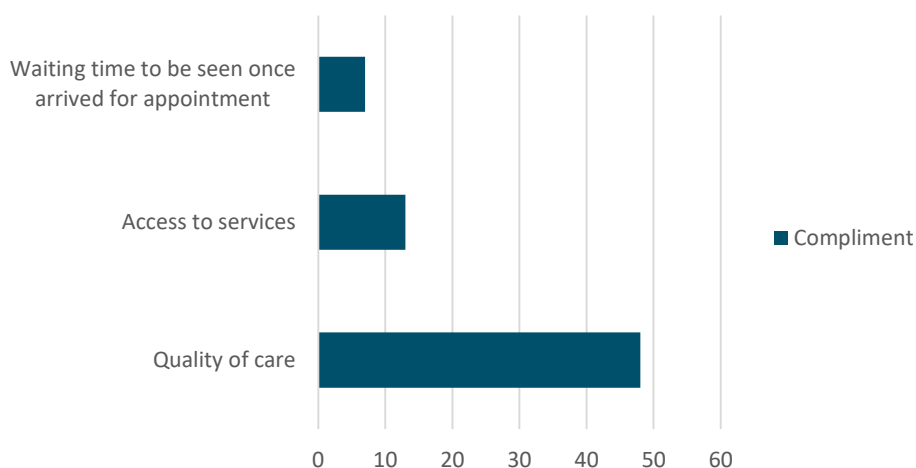
1 individual has shared their experiences with us of using pharmacy services in Enfield through our engagement and signposting activities.

3 reviews have been written on the Healthwatch Enfield feedback centre about pharmacy services in Enfield.

### 4. Hospitals in Enfield

#### 4.1 North Middlesex Hospital University Hospital NHS Trust (NMUH)

51 individuals have shared their experiences with us of services at NMUH through our activities. This included 19 concerns (37%), and 32 compliments (63%). The main themes from intelligence gathered include quality of care, access to services and waiting times to be seen once arrived for appointment.



No reviews have been written on the Healthwatch Enfield feedback centre about NMUH.

#### 4.2 Chase Farm Hospital, part of the Royal Free London NHS Foundation Trust

50 individuals have shared their experience with us of services at Chase Farm Hospital through our engagement and signposting activities. 22 were concerns (44%) and 28 were compliments (56%).

1 review has been written by patients on the Healthwatch Enfield online feedback centre about Chase Farm Hospital.

#### Care Quality Commission reports

The CQC has published two reports relating to hospitals serving Enfield patients during this time period.

Provider	Date of publications	Current rating	Previous rating	Previous publication
North Middlesex University Hospital	25/10/2019	Requires improvement	Requires improvement	14/09/2018
BMI The Kings Oak Hospital	05/11/2019	Good	Requires improvement	20/08/2019

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## 5. Mental health services in Enfield

9 individuals have shared their experiences with us about mental health services in Enfield through our engagement and signposting activities

4 reviews have been written on the Healthwatch Enfield online feedback centre about local mental health services during this period.

### Care Quality Commission reports

The CQC has not published any reports relating to mental health services serving Enfield patients during this time period.

## 6. Community services in Enfield

2 individuals have shared their experiences with us about community services in Enfield through our engagement and signposting activities.

No reviews have been written on the Healthwatch Enfield online feedback centre about community services in Enfield during this period.

### Care Quality Commission reports

The CQC has not published any reports relating to community services during this time period.

## 7. Care and nursing homes in Enfield

2 individuals have shared their experiences with us about care and nursing homes in Enfield through our engagement and signposting activities.

No reviews have been written on the Healthwatch Enfield online feedback centre about care and nursing homes in Enfield during this period.

### Enter and View update

On the 18th October we visited Charles Coward, a male, care of the elderly ward at NMUHT. There we engaged with 10 patients, 8 staff and 9 visitors. Our draft report is currently with the Trust awaiting their response to our recommendations.

On the 29th November we conducted a visit to Arnold House, a care home under the Leonard Cheshire group. There we heard from a total of 18 people (13 residents and 5 staff and management). We are in the process of developing our report and recommendations to submit to the home.

### Care Quality Commission reports

The CQC has published 15 reports relating to care and nursing homes in Enfield during this time period.

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Provider	Date of publications	Current rating	Previous rating	Previous publication
Bourne Hill Care Home	22/10/2019	Good	Good	21/09/2018
Minchenden Lodge	25/10/2019	Outstanding	Good	03/01/2017
Sharon House	31/10/2019	Requires improvement	Requires Improvement	10/01/2019
Spring view	05/11/2019	Good	Good	31/03/2017
Bridgewood House	19/11/2019	Requires improvement	Requires Improvement	03/08/2018
Arthur Lodge Residential Care Home	20/11/2019	Good	Good	20/04/2017
Fouracres Care Services	04/12/2019	Inadequate	Good	21/03/2017
Woodbury Manor	05/12/2019	Good	Good	21/02/2017
Maple House	10/12/2019	Good	Good	07/07/2017
Camden Lodge Residential Care Home	11/12/2019	Good	Good	26/05/2017
Chiswick Care Limited	11/12/2019	Good	Good	05/06/2017
Keevan Lodge	18/12/2019	Requires improvement	Good	30/03/2017
M.C.A. Care Homes	18/12/2019	Good	Good	26/05/2017
Five Oaks	19/12/2019	Good	Good	30/06/2017
Southgate Beaumont	28/12/2019	Requires improvement	Requires Improvement	15/10/2018

## 8. Supported living services in Enfield

No individuals have shared their experiences with us about supported living services in Enfield through our engagement and signposting activities.

No reviews have been written on the Healthwatch Enfield online feedback centre about supportive living services during this period.

### Care Quality Commission reports

The CQC has published 3 reports relating to supported living services in Enfield during this time period.

Provider	Date of publications	Current rating	Previous rating	Previous publication
Oak Tree Care Services	11/10/2019	Good	Good	05/05/2017
Ashford House	05/11/2019	Good	Good	29/03/2017
Paradise Independent Living	10/12/2019	Requires improvement	Good	22/03/2017

## 9. Home care in Enfield

No individuals have shared their experiences with us about home care in Enfield through our engagement and signposting activities.

No reviews have been written on the Healthwatch Enfield online feedback centre about home care during this period.

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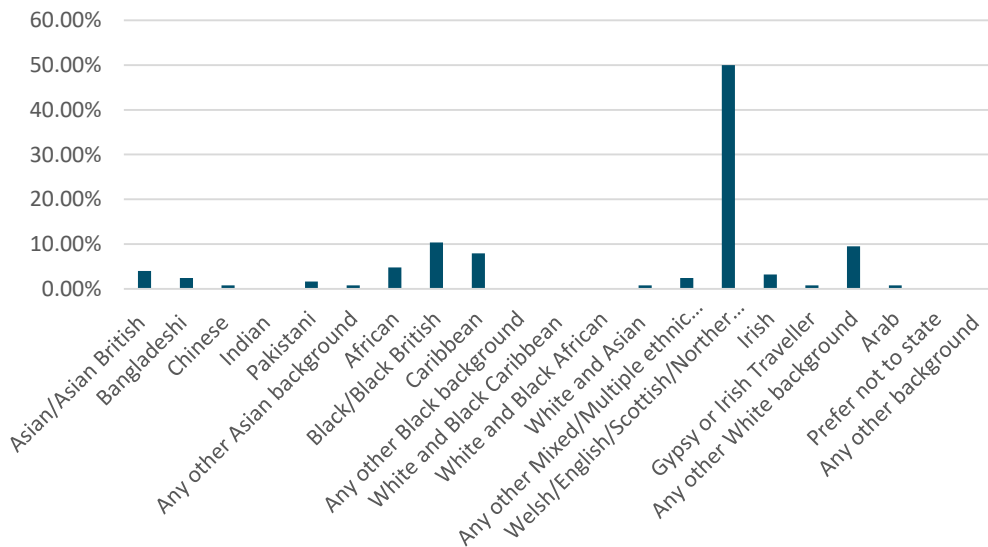
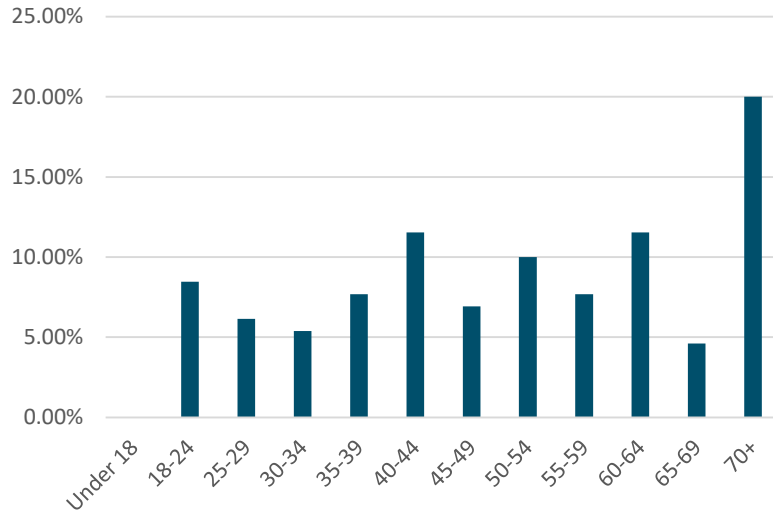
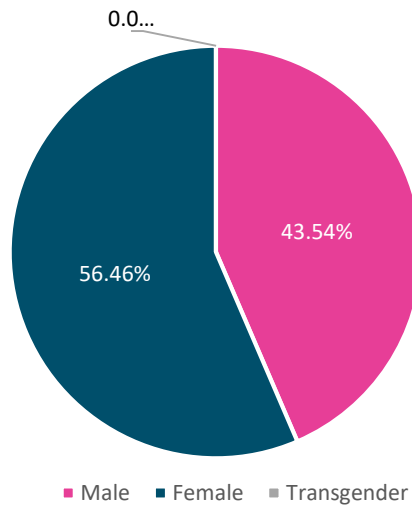
### Care Quality Commission reports

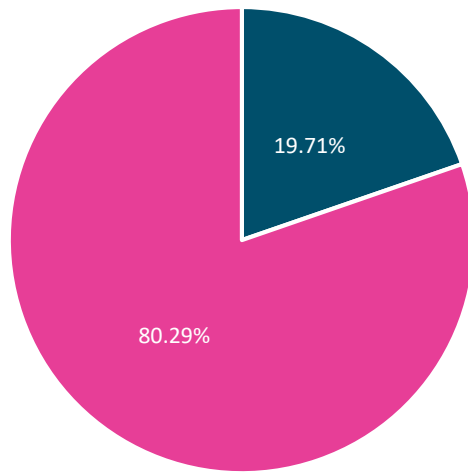
The CQC has published 6 reports relating to homecare services in Enfield during this time period.

Provider	Date of publications	Current rating	Previous rating	Previous publication
Rupaal Care and Training Ltd	9/10/2019	Requires Improvement	Good	23/01/2017
Oak Tree Care Services	11/10/2019	Good	Good	05/05/2017
Waterloo Care Services	4/12/2019	Good	Requires Improvement	24/10/2018
Vijaykoomar Kowlessur	05/12/2019	Good	Requires Improvement	29/10/2018
Paradise Independent Living	10/12/2019	Requires improvement	Good	22/03/2017
Foremost Care UK Limited	25/12/2019	Good	N/A	N/A

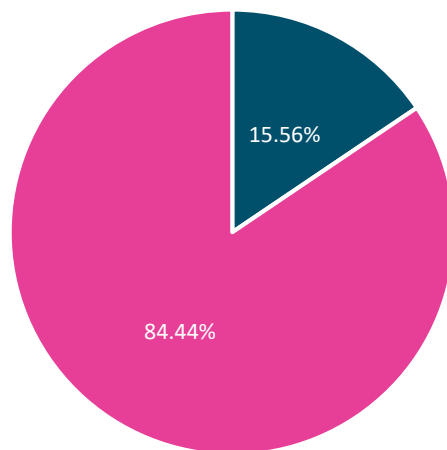
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## The demographics of the people we heard from

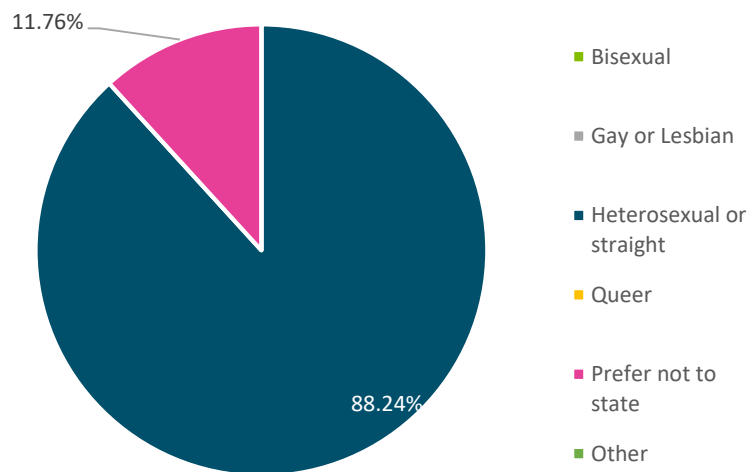




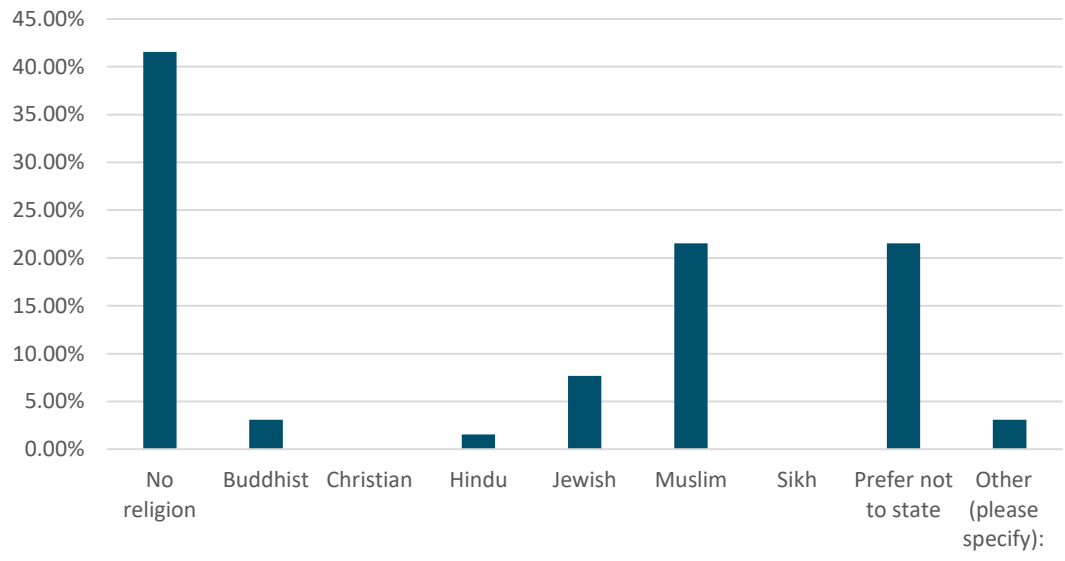
■ Disability



■ Carer



- Bisexual
  - Gay or Lesbian
  - Heterosexual or straight
  - Queer
  - Prefer not to state
  - Other
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<b>Board Report Title</b>	<b>Listening to local people's views</b>
<b>Governance framework component</b>	Statutory duties
<b>Date and agenda item</b>	12 <sup>th</sup> February 2020 Agenda item 12.3
<b>Author</b>	Ione Jackson
<b>Purpose</b> (for information, decision or consultation)	For information
<b>Key Recommendations</b> (where applicable)	N/A
<b>Attachments</b>	None

From 1<sup>st</sup> October 2019 to 31<sup>st</sup> December 2019, the team at Healthwatch Enfield attended 27 events including Westminster University, Job Centre and Enfield Volunteering fairs. We also held a stall with Mind Enfield during Mental Health Week.

Our focus for surveys and conversations with local people were around their experiences of using Health and Social Care services in Enfield in general. Change of staff in the Community Engagement team led to a decrease in the number of engagement events.

Please note: numbers in this report exclude commissioned work.

Number of events:

	Q1	Q2	Q3	Q4	Total number of events.
<b>2018/2019</b>	34	49	36	35	154
<b>2019/2020</b>	50	31	28		

Number of people engaged with:

	Q1	Q2	Q3	Q4	Total number of people engaged with.
<b>2018/2019</b>	1,033	1,119	514	969	3,635
<b>2019/2020</b>	1,117	865	646		

Our engagement activities in Q3 included:

- 11 hospital pop up stalls reaching 208 people.
- 5 visits to our local voluntary community sector reaching 142 residents.
- 11 other engagement activities including Primary Care Centres, Civic Centre, Library pop ups, Ward Forums, the Westminster University Volunteering Fair, Job Centre Volunteering Fair, Enfield Voluntary Action Fair and North London Hospice Open day reaching 296 people.

<b>Hospital</b>	<b>Date</b>	<b>Number of people engaged with</b>
North Middlesex Hospital pop up	10/10/2019	25
Chase Farm Hospital pop up	16/10/2019	20
North Middlesex Hospital pop up	21/10/2019	13
Chase Farm Hospital pop up	30/10/2019	18
North Middlesex Hospital pop up	07/11/2019	18
Chase Farm Hospital pop up	11/11/2019	15
Chase Farm Hospital pop up – Chase Building	11/11/2019	10
North Middlesex Hospital pop up	21/11/2019	25
Chase Farm Hospital pop up	27/11/2019	21
North Middlesex Hospital pop up	05/12/2019	20
North Middlesex Hospital pop up	19/12/2019	23



<b>Engagement Activity</b>	<b>Date</b>	<b>Number of people engaged with</b>
Westminster University Volunteering Fair	02/10/2019	50
Job Centre Volunteering Fair	03/10/2019	25
Civic Centre Pop Up	07/10/2019	15
Mind in Enfield - World Mental Health Week	08/10/2019	15
Enfield Town Library Pop Up	09/10/2019	23
CAPE Engagement activity	14/10/2019	15
North London Hospice Open day	17/10/2019	20
Enfield Lock Ward Forum	22/10/2019	10
Cockfosters Ward Forum	23/10/2019	50
Edmonton Green Library Pop up	06/11/2019	9
Saheli Group	08/11/2019	35
Rumi Mosque - Breakfast Club	12/11/2019	22
AGE UK AGM	14/11/2019	40
Enfield Carers Rights Day	21/11/2019	50
Our Voice Parents Conference	28/11/2019	17
Enfield Voluntary Action Fair	05/12/2019	20
Rumi Mosque - Breakfast Club	17/12/2019	22

<b>Board Report Title</b>	<b>Making a difference together</b>
<b>Governance framework component</b>	Statutory duties
<b>Date and Agenda Item</b>	12 <sup>th</sup> February 2020, Agenda Item 12.4
<b>Author</b>	Fazilla Amide
<b>Purpose</b> (for information, decision or consultation)	For information
<b>Key Recommendations</b> (where applicable)	N/A
<b>Attachments</b>	N/A

As defined by Healthwatch statutory duties, Healthwatch Enfield is required to demonstrate:

- examples where you have used a collaborative approach with service providers, commissioners, regulators and other partners to bring about change
- how we have promoted or supported the involvement of local people in the commissioning, provision and management of local health and care services
- how we have involved volunteers and other local people to help you carry out your statutory activities

This paper provides a summary of key activities carried out between 1<sup>st</sup> October 2019 and 31<sup>st</sup> December 2019 to ensure compliance.

Volunteers have been helping us carry out our statutory duties by taking part in Enter and View visits; undertaking community outreach; and collecting patient experiences.

We promoted the involvement of local people in the commissioning, provision and management of local health and care services through promoting 14 consultations. These ranged from local, organisations such as: Enfield Council, Department of Health and Social Care, Barnet, Enfield and Haringey Mental Health Trust, Age UK Enfield, to pan London and national organisations like the National Institute for Health and Care Excellence, Transport for London, NHS England, NHS X and The London Clinical Senate. These consultations covered a wide range of topics including (but not limited to): future plans for Enfield Town and Angel Edmonton, helping to choose a name for the new mental health unit at St Ann’s Hospital, experiences of sport and physical activity and a change of bus route between Crews Hill and The North Mid Hospital. Note: due to Purdah the proposed consultation, North Central London Adult Elective Orthopaedic Services, was put on hold until January 2020.

The focus of our activities to support the involvement of local people in health and care services involved:

- improving Continuing Healthcare

Following local residents sharing concerns around Continuing Healthcare and preparing and disseminating a ‘Case for further investigation’ which had been submitted to the NHS Enfield Clinical Commissioning Group, they are considering options for joint working and have also applied to be part of a pilot scheme being run by NHSE. In the meantime, we

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have continued to seek the views of local people undertaking this process and will look to analyse and develop a report in Q4 to share with all stakeholders including NHSE.

- Enter and View Visits

Following our Enter and View visit to the Charles Coward Care of the Elderly ward at the North Middlesex University Trust, recommendations were made, many of which have been received positively and taken on board. The report is due to be published in Q4.

We also visited a Care Home, Arnold House, part of the Leonard Cheshire group, and whilst the report is still in development, by working closely and collaboratively with the Home, some improvements were immediately put into place, following our visit.

- Community Outreach

Throughout the quarter we actively sought local people's views on a number of issues regarding their experiences of local health and care services, and ensured we were also reaching those groups whose voices are less often heard such as but not limited to:

- The Turkish Community
  - The Saheli group
  - Visitors at the Rumi Mosque
  - Parents and Carers of children and young people with a disability
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<b>Board Report Title</b>	<b>Volunteering update</b>
<b>Governance framework component</b>	Volunteering
<b>Date and Agenda Item</b>	12 <sup>th</sup> February 2020, agenda item 13
<b>Author</b>	Michelle Malwah
<b>Purpose</b> (for information, decision or consultation)	Information
<b>Key Recommendations</b> (where applicable)	N/A
<b>Attachments</b>	N/A

### Volunteers supporting Healthwatch Enfield

The following provides a summary of efforts to recruit and retain Healthwatch Enfield's volunteers' base in quarter three of 2019/2020:

	Q1 18/19	Q2 18/19	Q3 18/19	Q4 18/19	Q1 19/20	Q2 19/20	Q3 19/20
No. of application packs sent	24	20	22	20	26	31	9
No. of volunteers recruited	5	11	6	6	10	12	2
No. of volunteers to leave	3	4	0	9	3	7	2
Total no. of active volunteers	25	33	36	32	39	44	44

### Volunteer Recruitment/Retention

In Q3, volunteer recruitment activity was lower than usual due to staff changes and purdah resulting in a reduction in engagement activity. We recruited one graphic design and student placement volunteer.

The placement of two of our international students came to an end in December. Both commented on how much they enjoyed their time with us.

### Student placements

As previously mentioned, we have recruited one student placement this quarter. They will primarily be helping with community outreach, the young Healthwatch project and office based tasks.

### Development

This quarter a few of our volunteers took the opportunity to attend free training courses ranging from social media and young people to dementia friends training. We continue to provide one to one inductions for new volunteers/student placements.