

Paper 1: Minutes, Healthwatch Rutland (HWR) Board Meeting in Public

12 January 2026 (postponed from 2/12/25)

Present: Janet Underwood (Chair)(JU), Alan Walters, Jane MacDonald, Samantha Fraser

In attendance: Tracey Allan-Jones (TA-J)

		Action
1	Welcome	
2	Declarations of Interest None were declared.	
3	<p>Minutes of the previous meeting</p> <p>The minutes from the September board meeting in public were agreed as a true record.</p> <p>Actions:</p> <ul style="list-style-type: none"> - TA-J to draft annual meeting invitation for JU to send to RCC and produce comms to invite public attendance. Senior representatives of Rutland County Council and the Integrated Care Board were invited to speak at the Annual Meeting. Thanks to Kim Sorsky, RCC Director of Adult Social Care, Rachna Vyas, Deputy CEO, ICB and Sammi Le Corre, RCC Health and Care Integration project manager who all presented and responded to questions at the meeting. Action closed - TA-J to update the work plan to reflect time to be spent on the national patient voice campaign – action completed and closed. - TA-J to draft a paper for Rutland Scrutiny when more detail on closure is available. There had been no progress on these as further details of closure had not been received <i>–agreement after discussion on matters arising from the minutes to involve HW Leicester/shire in a joint paper to Joint Health Scrutiny which TAJ would draft.</i> - JU: to document how Rutland people value having independent place to give their feedback due to distrust of, or repercussions from, health and care providers – action closed. - JU/TA-J: to approach Alicia Kearns for a meeting when the Government responds to the petition – letter sent and action closed 	<p>Action carried forward TA-J</p>

	<ul style="list-style-type: none"> - JU: to ask for details of the Transferring Care Safely newsletter at the next TCS meeting with a view to us contributing to a future edition – opportunity had not arisen, action closed. 	
4	<p>Updates</p> <p>Integrated Care Board (ICB) cluster arrangements (JU)</p> <p>JU updated on the new ICB governance and executive team structure which clusters the two systems – Northamptonshire and LLR. She felt that the board is now weighted towards executives drawn from the Northamptonshire system.</p> <p>The five Healthwatch organisations that cover the new footprint have been offered a single representative on the board from February. JU advised that TA-J had produced a discussion paper suggesting what criteria could be used for selecting the representative. Healthwatch Managers and Chairs would be meeting shortly to agree the selection criteria and process.</p> <p>JU felt that it was unlikely that a Rutland representative would secure the seat due to the relative size of Rutland population within the system of 2m people. TA-J felt our current level of experience in working with minoritised ethnic communities may not be sufficient to meet the criteria as strongly as required. TA-J placed more importance on pitching for a seat on the sub-committees like quality/safety and strategic commissioning where decisions could be influenced before going to main board for ratification.</p> <p>Local Link update (AW)</p> <p>Towards the end of 2025 HWR had been invited to join a group to codesign the ground floor space for the new hub at Jules House in Oakham. Initially it was billed as a one-stop community hub with an open-door policy which anyone could visit to get information and help with health and wellbeing needs. AW advised that he had attended some meetings and, along with Citizen’s Advice Rutland (CAR) and Voluntary Action Rutland (VAR), was disappointed to find out that Rutland County Council had already determined what the space would contain.</p> <p>The original offer had changed; there would be no staffed front desk, no kitchen, nor an open door. Instead, it will be somewhere that service providers can run pre-booked groups and arrange to meet people by appointment.</p>	

	<p>After meeting with CAR and VAR, we agreed that HWR had little to contribute to the design meetings and should not be listed as having co-designed the offer, as no input from HWR had been sought or provided.</p> <p>HWR may be able to use space in the Local Link in the future and will keep a watching brief on developments.</p> <p>Discussion:</p> <ul style="list-style-type: none"> - SF expressed disappointment that opportunities for the public to influence such services are becoming more limited. The original premise of the Local Link was exciting but had been reduced to a meeting room. - AW mentioned that a by-product of discussions on Local Link was that there may be an opportunity to be involved in the new young people's space at the family hub in Oakham. <p>Healthwatch campaign to preserve independent local voice in health and care</p> <p>TA-J updated that the national petition to parliament to preserve an independent patient voice organisation had reached 10,000 signatures and triggered a direct response from the Secretary of State. The response had reiterated everything that had already been said.</p> <p>The Kings Fund, sponsored by HW England, is looking at what has worked well with the Healthwatch model and not so well. A report is due in early 2026 that will help shape the new DHSC Patient Experience Directorate.</p> <p>A second local HW meeting with the Dept of Health and Social Care (DHSC) is scheduled. The list of questions local HW want answered had been circulated to the board inviting inputs.</p>	
6.	<p>HWR Manager report</p> <p>The paper was taken as read. Noting that it had been created for the original meeting date in December, TA-J gave a few updates:</p> <p>Investing in Volunteers: TA-J thanked all volunteers for completing the questionnaire and participating in interviews with assessors where asked.</p> <p>The next steps after the Same Day Access consultation results had been published, with confirmation that the new Minor Illness</p>	

	<p>Service will start in April 2026, will be largely appointment based, with X-ray on Tuesdays and Wednesdays as before.</p> <p>Items noted by the board:</p> <p>Correspondence between Oakham Medical Practice and HWR (paper 2)</p> <p>Presentation slides and summary of questions and answers from the HWR Annual meeting (paper 4)</p> <p>LLNR Healthwatch correspondence with chair/CEO of ICB re: Healthwatch representation on the cluster board (paper 5)</p>	
7.	<p>Questions from the public</p> <p>No questions were received.</p>	
8.	<p>Any Other Business</p> <p>JU mentioned she had received a text message from her pharmacy advising of a new £50 charge for delivery of prescriptions for what previously has been a free service. JM who manages her parents' prescriptions through the same pharmacy, had heard nothing but would be very worried if the medications just did not turn up as expected.</p> <p>TA-J asked for feedback on this issue by email so that action can be taken if a theme develops.</p> <p>JM advised that she had received an invitation to attend an RCC carer's event to provide input to the new Rutland Carers Strategy but could not attend. SF may be able to attend with her mother-in-law.</p> <p>Action: JM to forward the link to SF</p>	JM
9.	<p>Next meeting</p> <p>March 2, 2-4pm.</p>	