

Minutes of Healthwatch Cornwall Board Meeting
Tuesday, 25 July 2023, 10.00 am to 12.30pm
Truro Library

Present:

Directors: Anna Pascoe (AP) – (Chair); Christine Hunter (CH), Deryth Stevens (DS), Tracey Camps (TC)

In Attendance: Nick Bailey (NB), Anne Oliver (AO)

Part 1: In public agenda

1. Welcome and introductions

1.1 AP welcomed all to the meeting especially NB who was attending his first Board Meeting.

2. Apologies

2.1 Julia Wildfire-Roberts was unable to attend the meeting.

3. Questions and comments from the public

3.1 No formal questions or comments have been received.

4. Declarations of interest

4.1 No declarations of interest or comments.

5. Minutes of the last meeting: 25 April 2023

5.1 Subject to minor amendments as below the minutes were agreed upon and ratified as a true record.

5.2 Para 7.3 – to amend wording around DS finance knowledge to better reflect this statement.

5.3 Para 7.8 and 7.18 – minor typo changes.

5.4 Para 12.1 – to delete reference to Board members with regard to 1-2-1 training.

5.5 Action log – AP noted she had not seen the succession matrix, this to be checked by AO. TC noted the Chair appraisal process is not yet complete. AP commented she had not seen any diary dates for engagement and/or training activity.

5.6 Proposed by AP, seconded by CH and approved by all.

6. Matters arising

6.1 TC shared her thoughts around a 360 degree Chair appraisal which was agreed as an appropriate method. Agreed she would discuss content via email with other Directors and this would form a Smart Survey to be circulated to Directors. the management team including CEO and KMVP senior lead) and key stakeholders. AP noted she is keen to learn and is looking forward to developing her training opportunities.

6.2 AP asked for a summary of the email trail that had identified under-represented areas both in personnel and in general engagement.

6.3 AP noted that we had not been successful in finding an independent financial advisor and stated this was a top priority. She suggested Cornwall Chamber of Commerce as a possible source of signposting.

6.4 AP advised that Anna Jay, who had been suggested as a possible advisor around governance and probity training, has not made contact with her, AP to follow up. AP clarified that this would include formal governance training for Directors, and the role of the Board and how the inter-accountability relationship works for management team and general staff. Responsibility of Directors of CICs differs to that of Trustees of charities, and includes probity to scaffold financial policies, eg lines of separation in procurement especially as HC is funded by public money. TC asked if there are any online training packages. AO explained HE training covers all local Healthwatch, some of whom are not CICs and are hosted by other organisations. It was noted that it would be appropriate to review the Articles of Association once this training is completed.

6.5 No other matters arising.

7. Governance

- 7.1 AP presented the July Governance Bulletin which is an update including CEO induction. She noted actions are still being completed from the April bulletin and that the absence of a development area in July is deliberate to take into account the two items that occurred in June.
- 7.2 More public contact is scheduled for September around amplifying the voice of the public to help set some targets for Autumn.
- 7.3 We should know if HC is being re-commissioned by the planned Board health check in October.
- 7.4 The Risk prioritisation scheduled for December will include health checks on the Business Continuity Plan, finance and lived experience.
- 7.5 DS said that the programme was comprehensive. She had concerns around staff uncertainty over contract renewal and asked if it was possible to obtain a Letter of Comfort from the Council. AP said this had been asked for by August but was more likely to be forthcoming after their budget planning in September/October.
- 7.6 It was noted that it is important for HC to be clear to the commissioners about our success, and that they are keen on developing the Partnership Boards (PBs). It is helpful for our work to align with Cornwall Council priorities but we need also to assert our independent role.
- 7.7 TC asked why the Council are asking for detailed information now? AP explained that the commissioning officer had started more meaningful involvement with HC following the previous CEO's letter. HC have always provided quarterly reports, but these have historically been number-driven KPIs. The move now is for them to understand impact/value. DS noted that the Annual Report answers this for the previous year.
- 7.8 AP confirmed that the PB contract is separate to the core contract and agreed the onus is on HC to challenge if council representation at PB meetings is seen by participants to be tokenistic.

- 7.9 There was discussion around how core delivery could be enhanced, AP said that HC are contractually obliged to undertake 3 projects per year. The Board need clarification around the Cost of Living and ED projects. The ICB are interested in the broader emergency response service including MIUs, 111 and SWAST and it needs to be clear that the commissioning offers are satisfied this is within the scope of our core contract.
- 7.10 It is possible that the Council will go to tender to recommission the core contract. It is important for HC to be more active at ICP level, especially around the impact on Adult Social Care.
- 7.11 TC said it is clear that HC needs to focus on how we are making a difference and what we are making a difference on. AP said that it is for HC to come forward with what we think we need for an enhanced service delivery. NB noted that the money is not ringfenced at LA level. CH said it is clear we need to be ready to tender.
- 7.12 AP noted that we have not yet done a SWOT analysis on possible competitors. We need to demonstrate awareness of system priorities and concentrate on the “so what”.
- 7.13 TC noted that less feedback is received around social care and this feedback mostly comes from carers. It was suggested that paid core care elements in residential/nursing/care homes could be an area of investigation. NB commented that there is regenerated interest in palliative and End of Life (EoL) care, and there is an intention to revisit the 2018 My Life My Death report, to review and update on progress. It is acknowledged that there is a connection between discharge delays and how this affects social care. It would be useful to understand if virtual wards and acute services have made a difference.
- 7.14 NB said that Cost of Living and how it affects health, and scoping out an ED investigation are already in place as projects.
- 7.15 NB/AP to discuss later this week for a clear action plan.
- 7.16 The governance action log was approved.

8. Management Report

- 8.1.1 NB presented the CEO report that had been circulated with the papers.
- 8.1.2 NB commented that it had been an interesting 3 months since he took up the CEO role. During his induction he has met a lot of people internally and externally and he is confident we can move forward after the uncertainty over the last few months. HC is in a much more stable position and recognised as part of the System. Our reputation has been strengthened within the ICB, with wider stakeholders and also in the media.
- 8.1.3 There was discussion about the recent national GP survey, and it was confirmed there is an intention to triangulate our data against the national and local results.
- 8.1.4 NB noted dentistry, pharmacies and optometry are now under the remit of the ICB.
- 8.1.5 NB highlighted that the EoL Charter, originally recommended in the My Life My Death report, has now been endorsed and the Research team are actively liaising with stakeholders over the recommendations in the Hear our Voice dementia report.
- 8.1.6 It was noted that we must not fear sharing feedback that raises concerns around Adult Social Care, and that we can include feedback from PBs as part of the core project.
- 8.1.7 The long-standing Ageing Well report, completed in the last financial year, is now on the verge of sign-off by the commissioner.
- 8.1.8 The Older Peoples Partnership Board is now being re-established and the management team are keen to ensure separation from the Dementia Partnership Board with the emphasis being on frailty. It was noted that it could make sense for the Dementia PB (currently hosted by a different organisation) to come under our remit.
- 8.1.9 It was confirmed that JW-R is our representative on the Adult Safeguarding Board and we need to confirm that she is able to attend. DS said she has capacity to take this on if necessary.
- 8.1.10 NB noted there has been investment in CAMHS and some collaboration with Devon – waiting times are now down to weeks rather than up to 18 months.

- 8.2.1 NB presented the quarterly feedback report that had been previously circulated and asked for any questions.
- 8.2.2 AP said that this should be our primary source of intelligence and what we use to identify where engagement needs to happen. Our feedback is more robust than the GP survey.
- 8.2.3 TC asked if we have posters in GP surgeries? This is dependent on each surgery who choose what publications to put up but it was agreed that the Cost of Living survey poster should be sent to all GP practices. TC also asked about the cost of advertising on GP screens which will be investigated.
- 8.2.4 It was noted that there is less feedback from the North and East, and that this area could be used to pilot some work with GPs.
- 8.3.1 AP thanked NB for the updated Representation List which is much improved. She asked if it could be filtered by priority level for Directors.
- 8.3.2 AP asked if staff are comfortable with being deputies and wanted to confirm that the management team have briefed them. TC suggested it might be a good idea to allow them to shadow at meetings before attending as deputies.

9. Finance report

- 9.1.1 The 2022/23 accounts had been circulated with the papers, these have been reviewed by the FGPSC and are now complete apart from a small discrepancy between actual reserves and those recorded in our Xero accounting software which has been noted in the accounts.
- 9.1.2 AP asked that NB/AO continue to search for an external financial consultant who may be able assist in locating the discrepancy.
- 9.1.3 Directors approved for the accounts to be sent to our Accountants to prepare for filing at Companies House.
- 9.1.4 AP said that a certain amount of reserves needs to be kept for potential winding down of the organisation. The management team have done some work on a reserves policy but she would like to see independent calculations for reserves.

At this point the public Part 1 of the meeting was deferred to an Extraordinary General Meeting to be held in 2 week's time.

**Minutes of Healthwatch Cornwall extension of Board Meeting
Friday 11th August 2023 at Truro Library**

Present: AP, TC, CH

In attendance: NB, AO

Apologies: DS

- 9.1.5 NB and AO updated the Board on the 2022/23 accounts. A forensic examination has confirmed that the discrepancy between the Xero accounting software and the actual money in bank of £183.79 was inherited from the transfer from the Sage accounting software used by CRCC (previous finance support). The note on the accounts has been amended accordingly.
- 9.1.6 AP asked that CRCC be contacted in writing to review/explain the discrepancy and that the accounts that will be sent to our Accountants should include a note to reflect this, in addition to the note in 9.1.5.
- 9.1.7 The discrepancy will be reviewed at October FGPSC after update on CRCC's response.
- 9.2 Updated draft budget and Q1 accounts for 2023/24 were presented at the meeting by NB and AO.
- 9.2.1 Partnership Boards – request for 14 hours admin support and laptop and Owl for hybrid meetings, using underspend from 2022/23 of £7,706.13.
- 9.2.2 Additional accumulated reserves prior to 2022/23 of £26,116.04
- 9.2.3 Maternity Projects – now combined (previously separated as KMVP and KJP). Salaries include ad hoc additional hours for current personnel while recruitment for Perinatal Manager vacancy takes place.
- 9.2.4 Increased permanent hours for Senior Lead and Engagement Officer are still under discussion. TC requested a deadline for this request – agreed that given the uncertain nature of staffing, the £12K underspend within the Maternity Projects budget is reasonable contingency and if current Engagement Officer does not wish to increase hours on a permanent basis, there may be a need to recruit

a temporary Engagement Officer. NB to follow up and report to Board by 18/08/23.

- 9.3.1 Core accounts – AO advised that part of the requested spend from reserves is to fund additional equipment, legal fees around the lease and HR issues, start-up costs for new IT support, temporary support to manage the information and advice line and mentoring support for managers and Board during the absence of the CEO.
- 9.3.2 The balance of requested spend from reserves is to account for no extra commissioned work being included in the budget. This could be adjusted if we were awarded new commissioned work.
- 9.2.3 It was agreed to separate these lines in the income section for the draft core budget.
- 9.2.4 AP requested completion of the Assets Policy requested at previous FGPSC before the request for additional IT and office equipment could be approved.
- 9.2.5 Reserves to be kept under review – dependent on contract negotiations as to amount needed at the end of the current core contract.
- 9.3.1 The Risk Register had been circulated with papers for the Board Meeting having previously been reviewed at the FGPSC.
- 9.3.2 It was agreed to upgrade the risk around Cornwall Council tendering the two main contracts in 2024 as the likelihood was possible rather than unlikely given the commissioning officers have stated they are considering going to the open market.
- 9.3.3 Noted that an effective system is needed for the feedback loop around representation. This could include calendar reminders for meetings and an explainer of how to debrief key points/intelligence gained.
- 9.3.4 Directors discussed the need for HC to complete a 3rd report to fulfil contractual obligations to Cornwall Council. It was felt that a rationale would need to be provided to the public if GP access or dentistry was not covered in a report this year, given that it so

regularly forms part of feedback. CH suggested a report could align to the national GP survey published recently.

- 9.3.5 The situation regarding staff vacancies and financial stability has changed since the first part of the Board Meeting. NB advised shortlisting for Perinatal Manager will take place on 23/08/23 with interviews planned for 07/09/23. DS was nominated as potential Board member on the interview panel.
- 9.3.6 Risk Register approved subject to amendments as discussed.
- 9.4.1 Contracts Register has been reviewed by FGPSG and circulated with Board papers and was presented for information.
- 9.4.2 The Employee Assistance Programme contract is due to be renewed in November with notice to terminate required in August. The suppliers of the current contract do not provide summary reports or timely invoices. NB presented a paper at the meeting that summarised 3 alternatives. AP reminded it was a FGPSG action to consult with staff over what they would like to have in an EAP support programme and if people have accessed the current system what was their experience prior to a decision being made as to an alternative, and to produce a cost benefits analysis.
- 9.5 The Finance Standard Operation Procedures had been previously circulated with Board papers and presented for information. These have been developed and improved over the last year and represent current procedures.

10. ODAG report to Board

- 10.1 TC presented a summary of the two meetings that had been held prior to Board and went through the written report for the first meeting that had been circulated with Board papers.
 - 10.1.1 At the second meeting, 2 new staff members were welcomed.
 - 10.1.2 There were 3 volunteers who had responded to the volunteer survey. It was felt the lack of feedback could be due to a number of issues and it was agreed to arrange a workshop for all volunteers (Core, PBs and Maternity) to be an inclusive celebration but also talk through how feedback could be improved and actioned.

- 10.1.3 There were 14 responses to the staff survey and TC has reported to AP and NB. Key themes include:
- 10.1.3.1 More attendance in the office
 - 10.1.3.2 1-2-1s the new form has been positively received and agreed they should be diarised and happen regularly – two minor amendments were agreed – to remove references to supervision and to include date of next meeting on the form
 - 10.1.3.3 The desire for clarification around roles and expectations of Board, management and staff, and for team meetings to no longer have regular Board attendance
 - 10.1.3.4 To be open and transparent around positive attitude to training, and benefits gained from training
- 10.1.4 A proposal for an enhanced timesheet was presented to the meeting, this will be presented to the team at the September awayday and introduced for the beginning of October.
- 10.1.5 It is proposed to discuss Terms of Reference at the October ODAG meeting as we have now moved forward from the original actions, and to consider a change of name.
- 10.2 The new forms for the Director 1-2-1 form and Chair/Vice Chair JDs were agreed, subject to the clarification that they are roles rather than jobs.
- 10.3 AO presented the Headline HR report that had been reviewed by ODAG and circulated with Board papers. She reminded Directors that suggestions for improvement are always welcome.
- 10.3.1 It was noted that sickness in Q1 had increased due to two long term absences.
 - 10.3.2 It was agreed that 1-2-1s should happen at least every 6 weeks and can be more frequent if needed.
 - 10.3.3 Manager appraisals have been completed, the target for completion of staff appraisals is end August 2023. TC asked for the status of staff appraisals and NB stated these were in progress.

11 Policies for review

- 11.1 Environmental Policy – this has been revised by a working group and now includes a statement of intent and an appendix for actions to be

audited. This was approved by the Board with the request to see audit updates at Board meetings.

- 11.2 Finance policy – this has been updated to reflect current practice and was approved by the Board.
- 11.2.1 AP requested an updated on the VAT position. NB said that Hodgsons had provided a verbal response that VAT could only be applied to work outside of our core activity such as consultancy. AP asked for an urgent written opinion including the concept of hosting projects and providing services, and their opinion on Director remuneration.
- 11.3 Quality Assurance Policy – it was agreed to defer this until the October meeting, to allow opportunity for a team discussion as how to best measure quality.
- 11.4 Data Protection Policy – AP asked that this be updated to take into account current best practice – for example the Data Protection Act has superseded GDPR and the terminology around Server Security needs updating. The measures we currently have in place for retention and disposal of personal data needs updating, and references to previous Chair need removing. We need to be clear around the process flow for potential breaches, eg Chair, ICO, action plan. If our Data Protection Officer is to be an external person, assurances need to be sought as to experience and qualifications to fulfil this role. A revised policy to be presented at the October meeting.

Date and time of next meeting

Next board meeting – Tuesday 24th October, 10.00 to 12.30 at Truro Library

Acronyms

- CAMHS – Child & Adolescent Mental Health Service
- CEO – Chief Executive Officer
- CIC – Community Interest Company
- CRCC – Cornwall Rural Community Charity
- ED – Emergency Department
- EoL – End of Life
- FGPSC – Finance & General Purpose Sub Committee
- GDPR – General Data Protection Regulations
- GP – General Practice
- HC – Healthwatch Cornwall

- HE - Healthwatch England
- ICB - Integrated Care Board
- ICO - Information Commissioner's Office
- ICP - Integrated Care Partnership
- JD - Job Description
- KMVP - Kernow Maternity Voices Project
- KPIs - Key Performance Indicators
- LA - Local Authority
- MIU - Minor Injury Unit
- ODAG - Organisation Development Advisory Group
- PBs - Partnership Boards
- SWAST - South West Ambulance Service Trust
- SWOT - Strengths, weaknesses, opportunities & threats
- VAT - Value Added Tax

Action logs:

October 2022 meeting actions:

Action	Responsible	Status	Target date
Publish to website "A Day in the Life" as a recruitment incentive	AO	Ongoing	July 23
Revise Inclusion Statement to reflect current and target operations	AO	Ongoing	October 23

January 2023 meeting actions:

Action	Responsible	Status	Target date
A succession planning matrix to be developed, displaying directors' terms and due dates for renewal/retirement and that our Articles of Association are reviewed, as we prepare for the new service design offer and re-contracting bid process	BST	Ongoing	May 23
A workshop to be organised to further enhance the organisation approach to risk management, including Assurance Framework/Lines of Defence; business continuity planning, risk appetite and risk register structural review	AP/AO	Ongoing	August 23

April 2023 meeting actions:

Action	Responsible	Status	Target date
Recruitment plan to increase number of Directors	Board	Ongoing	Aug 23
Source external financial support	AO	Ongoing	August 23
DBS checks for Directors and current staff as appropriate	BST	Ongoing	Jul 23
Source Governance and probity training	AO/AP	Ongoing	August 23
Process for Chair appraisal	TC	Ongoing	August 23
Governance actions:			
A system of DBS checks to be installed and refreshed with any successive term for all new/existing directors	BST	Ongoing	Jul 23
A workshop to be organised for directors and relevant staff to provide training on our updated management accounting processes as we enter into the first full year of operating with Xero/without CRCC	BST	Ongoing	August 23
A governance and probity training session to be arranged, for directors and team members, via the engagement of a suitably qualified independent provider, to further embed the culture of inclusive governance	AP/AO	Ongoing	August 23
To complement the governance and probity training, the appointed provider to create any additional policies and procedures necessary to further enhance the solid basis already extant	AP/AO	Ongoing	May 23

Action	Responsible	Status	Target date
Appraisal process for Chair	TC/Board	Ongoing	August 23

July 2023 meeting actions:

Action	Responsible	Status	Target date
Amended April minutes to be circulated to Directors	AO		01/08/23
Minutes published to the website within 4 weeks of meeting.	AO		25/08/23
Circulate summary of email trail identifying under-represented areas	AO	Complete	01/08/23
Source external financial support	AO/NB		August 23
Follow up sources of governance probity training	AP/NB/AO		August 23
SWOT analysis/action plan for service delivery plan	AP/MT		August 23
Check JW-R attendance at Adult Safeguarding Board	NB		August 23
Send CoL posters to GP Surgeries	BST		August 23
Brief/support for shadowing for deputies at meetings	MT		August 23
Contact CRCC re explanation of discrepancy	AO		14/08/23
Forward 2022/23 accounts to Hodgsons	AO		21/08/23
Confirm if additional hours required for Maternity Project	NB		18/08/23
Circulate amended draft budget with Assets Policy	NB/AO		18/08/23
Approval of IT and office equipment	Directors		25/08/23
Circulate amended Risk Register	AO		18/08/23
Obtain written advice on VAT and Director remuneration	NB/AO		18/08/23

Action	Responsible	Status	Target date
Governance actions:			

Recurring log:

Action	Responsible	Frequency	Review by Board
Directors to receive invites to team meetings	BST	Monthly	
Directors to receive diary dates for engagement events to support where appropriate	Engagement team	As and when appropriate	
Directors to circulate an electronic debrief from outside panels/committees where they are the nominated HC representative	Board	As and when appropriate	
All directors to receive a copy of papers for the formal groups of the Board, namely the Organisational Development Action Group (ODAG) and the Finance and General Purposes Sub-Committee (FGPSC).	BST	Quarterly	
Training opportunities for staff to be made available to directors where relevant and appropriate and vice versa	BST	As and when appropriate	
A rolling 12-month calendar of Full Board and formal Board group meeting dates to be made available with the opportunity for any director to attend a Board group to gain further insight if they wish	BST	Quarterly	
The formal groups of the Board (ODAG and FGPSC) to set out their workplans at the beginning of each year so that any director or staff member may contribute to themed discussions as well as standard business, with these workplans and their quarterly progress updates being received by Full Board	ODAG & FGPSC	Annually	
Review of Board composition, skills and experience	Board	Annually	
Review of Board Governance Plan	Board	Annually	