

# Opportunities for Board engagement

July 2022

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## Introduction

Consequential to our previous Chair (Jon McLeavy) and two Board members standing down there is an opportunity for current Board members to undertake a range of engagement opportunities on behalf of Healthwatch Cornwall. Two of these are “internal” and two “external” committee engagement.

## Internal

### **The Organisational Development & Advisory Group (ODAG)**

The Organisational Development & Advisory Group exists to scrutinise staff and HR issues in a similar way that a finance subcommittee scrutinises financial stability, recognizing the importance of our staff to the organisation’s effectiveness and the significant proportion of the budget that is spent on staff. Membership has historically consisted of two Board members, the Business Support Manager, and a staff representative.

Work overseen by ODAG over the last few years includes

- Processes and forms for induction, probation, 1-2-1 and appraisals have been formalised, embedded, and monitored
- Training matrix and mandatory online training established and monitored
- Document standardisation and control has been improved
- Policies regularly reviewed in ongoing cyclical programme



- Training needs identified in appraisals are aggregated and incorporated in annual training plan
- Communication processes within organisation have been reviewed and improved

### Healthwatch Cornwall facilitated Partnership Boards

Following Deborah stepping down from the Board, we no longer have representation on any of the Partnership Boards.

Deborah had dual representation on the Carers Partnership Board as a carer herself and as a Healthwatch Cornwall Board member. Whilst it is not essential that we are represented, the Partnership Boards do provide the opportunity to hear and engage directly with both service users and professionals both in terms of upcoming and ongoing issues affecting people in Cornwall and strategy development and scrutiny of strategies post-implementation.

Members are invited to put themselves forward to sit on any of the four Partnership Boards. Here is a quick summary of their remits:

The **Carers Partnership Board** is committed to effective partnership working with an emphasis on empowering unpaid Carers to work with those who commission and provide services relevant to them. Board members will represent the interests of Carers to ensure that their voices are heard, and that their particular needs and aspirations are taken in to account.

The **Autism Partnership Board** arose from the government recommendations within the Autism Act in 2009. There have been many changes locally and nationally since then and its aims and goals have changed accordingly. It remains committed to effective partnership working which empowers self-advocates and carers to work with those who commission and provide health and care services. Board members



represent the interests of autistic adults to ensure that their voices are heard.

Every Council has a statutory obligation to support a **Learning Disability Partnership Board**. The Board was set up to ensure delivery of the goals in the Valuing People white paper, published by the Department of Health in 2001. There have been many changes locally and nationally since then and the Boards' purpose, aims and goals have changed. It remains committed to effective partnership working with an emphasis on empowering self-advocates and carers to work with those who commission and provide services. Board members represent the interests of adults with a learning disability ensuring that their voices are heard.

The **Older Persons Partnership Board** is not currently in operation but the first engagement event in order to identify the concerns of people of 65 and over and to then draw up appropriate terms of reference will be held in August. The key will be ensuring that Board members represent the very wide interests of older adults to ensure that voices are heard and particular needs and aspirations are taken into account in the design of services.

### External

Traditionally our representation on the Safeguarding Adults Board and South West Clinical Senate Citizen's Assembly has been by Healthwatch Cornwall Board members. With recent retirements there are vacancies on both of these Boards for a Healthwatch representative. We would very much like to nominate new representatives to each from among our Board. Should a Board member be nominated to sit on either of these Boards we will provide them with agenda support ahead of meetings.

### Safeguarding Adults Board

The Care Act 2014 requires the Safeguarding Adults Board (SAB) to be made up of three statutory agencies: the local authorities (Cornwall Council and the Council of the Isles of Scilly), NHS Cornwall & Isles of Scilly



Integrated Care Board, and Devon and Cornwall Police. Other organisations including Healthwatch which are involved in reducing the risk of abuse or neglect and protecting adults with care and support needs from harm and exploitation are invited to join the Board.

From 1 April 2015 the Care Act 2014 placed adult safeguarding within a legal framework, setting out the responsibilities of local authorities and their partners. It placed a duty on local authorities to establish a SAB. The purpose of the SAB is to help and protect adults by coordinating and ensuring the effectiveness of what each of its constituent members does. The remit of the SAB is not operational but one of co-ordination, assurance, planning and commissioning and contributes to the wider goals of improving the wellbeing of adults. The Act specifies that it must publish an annual report and a strategic plan setting out local priorities and how these will be achieved; as well as commissioning SARs as required

The SAB meets four times a year. The annual report and action plan is available should you wish to see it. <https://www.cornwall.gov.uk/health-and-social-care/adult-care-services/safeguarding-adults/cornwall-and-isles-of-scilly-safeguarding-adults-board/>

### **South West Clinical Senate Citizen's Assembly**

The role of the Clinical Senate is to work with commissioners to describe optimal service configurations in the quest for high quality, sustainable services. This is achieved by generating questions relating to specific service areas, which are addressed during Senate Council meetings. In this way the Clinical Senate hopes to establish itself as a critical friend of the whole system. (<https://www.swsenate.nhs.uk/>).

The Citizen's Assembly is the public facing function of the clinical senate and comprises members of the senate council (Chair, Vice Chair and Head of Senate) along with representatives from Healthwatch throughout the



South West region. It meets quarterly (currently online) and holds an annual conference.

**Recommendation**

The Board nominates one member to sit on each of the ODAG, Partnership Boards, Safeguarding Adults Board and South West Clinical Senate Citizen’s Assembly.

