

**Minutes of Healthwatch Cornwall Board meeting  
Wednesday 22 January 2020, 10am  
Truro Community Library, Union Place, Truro, TR1 1EP**

**Present:**

Directors: Jon McLeavy (JM) (Chair), Amanda Stratford (AS), Babs Rounsevell (BR), Deborah Came (DC), John Evers (JE) Margaret Abban (MA)

In Attendance: Anne Oliver (AO)

In Attendance for part: Georgie Watson, Maternity Voices Partnership HWC (GW)

**PART 1: In public agenda**

1. **Welcome and Introductions:** JM welcomed everyone to the meeting and introduced AO who was attending her first meeting.
2. **Apologies:** Christine Hunter (CH), Roger Sinden (RS).
3. **Questions and comments from the public:** None
4. **Conflicts of Interest:** None declared.
  - JM proposed we have a formal Conflicts of Interest statement as a Board of Trustees. AS to check if this already exists within our Articles and if not prepare one based on a template JM has.
5. **Advising of any other business:** None declared that would not be covered under the standard agenda.
6. **Minutes of the last meeting: 23 October 2019:** Minutes were signed and ratified as a true record.
7. **Actions / matters arising**
  - AO to prepare nameplates for each Director to be used at subsequent meetings
  - AS reported that it is difficult to arrange Board of Director meetings to link into other meetings as our meetings are scheduled a year in advance, although we could change venue if it was recognized that another meeting, for example PCN meetings, on the same date as one of our scheduled meetings.
  - BR confirmed she is now receiving e-mails from her HWC outlook account but we are unsure if RS is receiving his. Agreed to continue using personal e-mails until we were sure the all the HWC outlook



accounts work consistently - using these alone would be best practice for consistency around data protection

- AS to re-circulate West Cornwall Healthwatch's letter to Simon Stevens CEO of NHSE&I regarding integrated health and social care services
- Photocopying costs were investigated, the copier has now been defaulted to black and white printing which should reduce costs
- AS confirmed that RS is now getting details around the Residential Care Representative Group meetings
- Revision to whistle-blowing policy now complete

## 8. Finance Report

- Finance subcommittee have met and reviewed the report.
- Columns for re-forecast and variances have been added for better scrutiny
- AS advised that variance over original income in budget and current forecast was made up mainly from 2 issues - Safeguarding income, the income started halfway through the year; Core Contract and Partnership Boards contracts, and therefore income, is now running on a June - May year rather than our financial year which is April to March but adjustments have been made for this.
- Fundraising income - the delay in making the decision to become a CIO has affected certain bids - we would be eligible to apply for more funding streams once this is achieved, in particular research opportunities.
- Expenditure is also lower than the original budget so we remain financially stable.
- Discussion around business opportunities - agreed that there is room for expanding into areas that already meet our core values and we have demonstrated the success of those taken on so far while keeping our independence. It is timely to explore these as an operational team and Board together as we are now approaching year 3 (final year) of current Strategy. AS to look at setting a date in quarter 1 of next financial year as a board and staff development day. Agreed this would be facilitated externally.
- JM summed up that overall finances remain strong and stable, more balanced and with less underspend and he thanked Adam Jose and the CRCC team and the operational HWC team for remaining in the black.
- BR asked if there were any potential disasters on the horizon, AS replied that it was more there were potential opportunities coming up, for example HWC have been asked to help with evaluating ante-natal care and preparing a report. It was agreed that AS should pursue this opportunity. JE commented it is good that commissioners are approaching us for research, JM said that we have been cautious regarding opportunities as we need to ensure we have sufficient reserves for all contingencies.
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## 9. Risk Register

- Updated following sub group of RS, DC and AS. Some items have been taken off as no longer posing a risk (for example loss of contract as this has now been extended); and some added (for example the need for a business continuity plan).
- A column has been added to the register to show when a risk is added
- It is acknowledged that the shift to the Integrated Care System (ICS) is unsettling and uncharted for individual organisations. By being represented at every level except locality level is mitigating this risk. We have recently contributed to Cornwall Council's LGA peer review on this subject and are mindful that while processes are important cultural change is dependent on the relationships between individuals at leadership level - it is improving but this could change if personnel change.
- AS said we are likely to be asked to chair the End of Life Strategy Board and this was agreed.
- It was agreed to review representation at least annually - AS/AO to update and distribute current representation and distribute so that the Board can review this at next meeting.
- JM requested the Risk Register be "tidied up", regarding numbering, checking for duplication
- The Risk Register to be scrutinised at Board level - to be presented by AS and queried by exception rather than as a whole.
- Agreed items that had been static at low risk for 3 meetings could be taken off the register and that the sub group can be reconvened at any time.
- JM thanked sub group for the work undertaken.

## 10. Policies

### (a) Environmental Policy

- AS presented new Environmental Policy, the preparation of which has been triggered by a requirement for future bid applications.
- BR and DC both offered support around putting policy into practice, and evidencing impact on environment
- JM requested requirement for Action Plan to be included as part of CEO overall responsibility, BR suggested a Green lead be appointed within the team
- The Board approved the policy subject to being made aware of the minor recommended changes

### (b) Business Continuity Plan

- AS presented new Business Continuity Plan, as requested at previous Board Meeting.
- Approval in principle requested at this meeting with some details to be added at a later date



- The Board approved the plan subject to being kept updated of any changes while noting it is a live document

#### **11. Directors' reports from public meetings attended**

- JM continues to represent at the Clinical Senate Citizen's Assembly, no especial issues to report
- JM also represents at the Safeguarding Adults board, as unable to attend last one Becky Harrison-Plastow attended in his absence, delivering engagement in this area is part of our current Business Plan
- JM attends as a co-opted member of the Health & Social Care Overview and Scrutiny Committee - his role is to challenge if evaluations are not being properly carried out.
- BR is attending the Citizens Advisory Panel which meets monthly and is working effectively
- BR informed the Board of the Duchy's charity awards for young people, the aim is to develop community based projects. Chaos are involved in this.
- JE advised that the Duchy Health Charity is promoting population / health, there is a social prescribing conference on 27/03/20 and a fil for training practice staff at the Plaza on Saturday 25/01/20.
- MA acknowledged she had been unable to be active in representation recently but that she would like to be more involved over the next three months.
- DC attends the Children & Families Overview and Scrutiny Board as an observer, and the IUCS End-to-End review meetings. She reported that there are lots of cancellations and people not turning up. She feels this should be flagged, the representatives know what to do but there is an insufficiency of senior people attending.
- In view of the proliferation of new Boards, AS will source a structure chart to show how they all link together.
- The issue over organisational - vs - system priorities was raised, BR will sound out how CAP members feel. Possibly people miss meetings due to the time taken travelling to them, JE suggested more conference calling but technology could be then be an issue.
- JM reminded the meeting that HWC has no opinion of its own, it represents the voice of the Cornwall public to highlight when services are not working well for them. CAP is a good opportunity to test out how this voice gets translated.

#### **12. Operational update**

- AS presented the dashboard for the 3<sup>rd</sup> quarter of the financial year.
- There are delays in the Partnership Board objectives due to a member of staff being on long-term sickness, however we now have named council reps attending meetings and an Activity Plan is being worked on which will identify any lack of progress from the 2018 plan.



- There are two new boards that AS has been attending:
  - (a) Adult Social Care Modernisation Board - overseeing the next stage of development of the 3 Ps (People, Places and Partnerships workstreams). This is internally focused on how Adult Social Care contributes to the Integrated Care System. There are 7 workstreams sitting under the 3 Ps who each have external challenge (although safeguarding and quality will be separated out) some of which sit under a specific 'P' and others which are cross cutting across all 'P's. JM is currently providing external challenge by chairing the Engagement workstream.
  - (b) Community Services Quarterly Partnership Group. Embrace looks at services for older people, focusing on transfer of care.
- Notice has been served at our current offices, AS will circulate a summary of our requirements for new premises which we are now beginning to actively look for. It was noted that old Sure Start buildings could offer potential as they have to remain as buildings serving the public.
- 2 reports have been prepared in the last quarter- one a feasibility study into the value of digital provision for young people to access health information and one around Special Care Dentistry derived from additional information gathered when completing some engagement in this area for NHS England SW
- Conference planning is going well, and the key note speaker Sir Robert Francis will be available to meet the board and staff on the afternoon / evening of 25/03/20 (the day before the conference). AS will liaise with board members over the possibility of a supper meeting.
- We have recruited to Business Support Manager and Communications and Campaign Manager positions, we currently have an apprentice admin worker placed with us from KCCG for 2 days a week until we recruit permanent admin support.
- JM proposed the Risk Register be aligned to the operational dashboard, and these can then be scrutinised together. AS to action this with the support of AO.

### 13. Presentation: Maternity Voices Partnership

- GW gave a presentation summarising the work done so far within the Maternity Voices Partnership and the plans for the next few months.
- She explained she had previously been Chair in a voluntary capacity, elected by a panel of service users, and now still fulfils this function as well as working as MVP manager in a paid capacity funded by NHS England and hosted by HWC who provide mentoring and admin support.
- The funding for MVP was as a response to Better Births, a 2016 independent review to transform maternity experiences. NHS England issued a national directive and local delivery is commissioned by the CCG and RCHT.



- Work so far has consisted of a combination of building relationships with key personnel and groups, and engagement with service users and local communities.
- There has been a strong element of engaging with hard to reach groups, with especial focus and a successful relationship being built with Travellers Space and the Treyula Centre.
- Other key engagement has been carried out with the perinatal (mental health specialist) midwifery team, working towards Continuity of Care training to provide a known midwife throughout pregnancy and birth, and access to Care Opinion and the NICE guidelines panel.
- Royal College of Midwives delegation visited RCHT and made a visit to the Isles of Scilly where 100% engagement was achieved with new and expectant mothers.
- GW is currently expanding her volunteer base which offers community engagement training, induction, safeguarding, DBS checks and ID badges, to enable them Walk the Path (similar to Enter and View).
- Engagement has been really positive, and service users see us as really listening and making an impact to positive change. Quarterly meetings are held to which the public are welcome to attend. At these meetings staff who attend are held responsible for reporting back. They enable feedback to go straight to the ward managers and matrons.
- Cornwall MVP has been nominated for awards at the International Maternity Expo for the RCHT feedback forum, work at Treyula and for GW individually.
- Cornwall MVP recognized as a flagship MVP.
- DC asked about how this would move forward at the end of the contract. It is NHS funded for 18 months, the CCG would be evaluating it and hopefully be responsible for the funding going forward.
- The Board agreed that this was an astonishing success so far and looked forward to further updates nearer the end of the project that can document its success.
- The Board hoped to see it as a way forward for HWC to host / provide a home and support for similar projects, providing the project values are the same. The value to HWC was recognised and the fact that something doesn't have to be of high monetary value to be impactful.
- JM on behalf of the Board thanked GW for her time and for the very interesting and useful presentation.
- The Safeguarding presentation will be deferred to a future meeting.

14. **Any other business:** None declared.

15. **Date, time, location of next meeting**

- 22 April 2020 Truro Library 10am - 12.30pm





- It was agreed there would be a joint workshop with Board and full team on Managing Business Opportunities with a date in the first quarter of the financial year 2020/21, AS to set date/time/location.

**Acronyms:**

C&FOSB - Children & Families Overview & Scrutiny Board  
 CAP - Citizen’s Advisory Panel  
 CCG - NHS Kernow Clinical Commissioning Group  
 CHAOS - Community Helping all of Society  
 CIO - Charitable Incorporated Organisation  
 CRCC - Cornwall Rural Community Charity  
 H&SCOSC - Health & Social Care Overview & Scrutiny Committee  
 HWC - Healthwatch Cornwall  
 HWE - Healthwatch England  
 ICS - Integrated Care System  
 MVP - Maternity Voices Partnership  
 NHSE&I - NHS England and NHS Improvement  
 PCN - Primary Care Network  
 RCHT - Royal Cornwall Hospital Trust

**ACTION LOG:**

<b>ACTION</b>	<b>RESPONSIBLE</b>
Draft minutes circulated within 4 weeks of meeting.	AO
Public facing administrative items for the Board meetings to be available at the next meeting and circulated In advance to HWC and personal e-mail addresses of Board Members.	AO
Investigate Conflicts of Interest statement	AS
Nameplates to be in place for attendees at Board Meetings	AO
Re-circulate West Cornwall Healthwatch’s letter to Simon Stevens CEO of NHSE&I regarding integrated health and social care services.	AS
Set date for developmental awayday for Board and team members	AS
Progress opportunity for HWC to help with evaluating ante-natal care and preparing a report	AS
Update and distribute list of current representation	AS/AO
Prepare structure chart to show how various Boards link together	AS
Advise Board of minor changes to Environmental Policy	AS
Circulate summary of requirements for new premises	AS



Advise AS/AO of potential new premises	ALL
Liaise with board members regarding supper meeting evening prior to conference (25/03/20)	AS
Align Risk Register to Operational Dashboard	AS/AO

