

**Minutes of Healthwatch Cornwall Board meeting
Wednesday August 19, 2015, 10am
Large Room, Truro Community Library, Union Place, Truro**

Present: Margaret Abban (MA), John Evers (JE), Jon McLeavy (JM), Roger Sinden (RS), Debbie Pritchard (DP), Maisie Parkin (MP and note taker), Stevie Kochnowicz (SK and note taker).

Public attendees: Helen Kemp (HK) and Steve Holyer (SH), Directors of ADi Access.

The Vice-Chair MA chaired the meeting in the Chair's absence.

PART 1: in public agenda

- 1. Welcome and Introductions:** MA welcomed all attendees to the meeting.
- 2. Questions and comments from the public:** HK and SH did a presentation about their company ADi Access and a new initiative called RoomMate. SH is registered blind. The issue he has most difficulty with is navigating public disabled access toilets; he has to be taken into the toilet or has to navigate by himself. Some toilets have braille notices but only 1% of the blind population can read braille. RoomMate is an audio descriptions unit developed as a solution by University of Falmouth.
- 3. Advising of any other business:** None.
- 4. Apologies:** Nadia Hewitt (NH), Jayne Howard (JH), Gareth Dix (GD).
- 5. Minutes of the last meeting:** The unratified minutes of the meeting held on May 20, 2015 were signed off by MA after an amendment was noted for page 1. **ACTION 1 - MP**
- 6. Actions/Matters Arising:** None.
- 7. Conflicts of Interest:** RS noted two issues for him 1) Items to discuss today that places individuals in a conflict of interest situation 2) Register about conflicts of interest (which includes associates like spouses) which HW should update at meetings and in between meetings if issues raised. A recent conflict raised by RS had not been added. **ACTION 2 - MP**
- 8. Risk Register:** Risks of 6+ are high risk items and more feedback was requested as to whether enough is being done to mitigate risks. Risk 1 on visibility of HC was discussed and it was agreed that much had been done but that this could be explored at a development day in October.

Risk 3 - RS suggested splitting the risk into loss of Healthwatch function to Cornwall and loss of Healthwatch contract to current CIC. CC is doing a review with NHS Kernow in October and is unlikely to make a decision until November. JH has said that this would be too late and if a late decision is going to be made they should give HC a year's funding. Have a meeting with Joy Youart and Trevor Doughty in beginning of Oct which is too late for notice to be given on the offices. **ACTION - 3 DP**



Risk 4 Impact of office move: DP met with Nick Maffey from Millers and is extremely concerned about the ability to move due to the security of HC contract and having to give notice in Sept. Moving now could incur extra charges if went for a short term contract as landlords would see this unfavourably. DP to keep in contact with NM and let him know whether we have another year to negotiate an extension of tenancy and to discuss with Solicitors introduction of more break clauses if HC is only contracted in year spurts by council. Would cause a major disruption to operations to move and would take up to two weeks to get back to work. Board agreed that a renegotiation of contract is needed regarding break clauses and the decision about office move to be deferred until more is known about the contract. ACTION - 4 DP

9. CEO Report:

Item 2: The Press Statement around proposed changes to care at home has been released and taken press. CC did not respond. Meeting booked with Trevor Doughty, Jim McKenna and officers for August 26 to discuss their response to the report.

Self-harm issues to be discussed in confidential part of meeting with regards to CC meeting held on August 7.

End of Life Event: This will now be Jan 2016. A MacMillan speaker and partner organisations have, in response to the report, expressed a willingness to be part of the event. Focus of the event is the future direction of end of life care in Cornwall. JE agreed to be a consultant director on this matter with DP.

Pharmacies: Main focus is the questionnaire at the moment and actively getting feedback with focused events at pharmacies and future meeting set with MA and Georgina Praed for a focused pharmacy event.

GP Bookings: Reports received from 10 GP practices are currently being edited and will be sent to all practices for comment. This includes information on different booking styles and issues being raised by GPs. HC will do focus work with 6 selected practices to attempt to correlate booking style and patient satisfaction.

Item 5: New posters are being used which are more useful as they can be altered to suit needs.

Item 6: Representation

JM apologised for not submitting his report on the last Safeguarding Adults Board meeting.

Trying to get more volunteers to attend meetings with a view to the usefulness of the meeting and reviewing this. JW has approached other organisations to see if they have volunteers that we could use.



RS happy to reinstate CCG meetings with lay member or go to the meetings again and JE agreed to attend the CPFT meetings.

Item 9: Board formally welcomed SK the new Business Administrator.

10. Chairs Report: Chair of CPFT changed to Barbara Vann, but not sure on the lay person. Otherwise no comment.

11. Budget Summary: The budget is healthy. It was agreed to keep a reserve of £15,000 as the last CC payment was late so the underspend was used. Historically, there have been delays to HC payments from CC.

12. Approval of accounts from 2014-15 and Corporation Tax Return: JH and DP met with Mark Williams. The accounts were approved/accepted - proposed by RS, seconded by JM. JH is required to sign three copies of the accounts and forward to auditors. **ACTION - 5 DP**

13. Correspondence: Adult Safeguarding report was circulated at their request.

CPFT Chair Vicky Wood resigned. Barbara Vann is the new Chair, started at August 1.

14. Governance: DP brought up suggestions about governance and policies for staff training, outreach competitive activities and working at home. It was agreed to add working from home to the data protection policy. RS and DP to work on the current policy and add where necessary. **ACTION - 6 DP and RS**

Policy for Competitive activities: Board decided no policy was needed for this.

Staff training policy: It was decided that a process was needed to ensure equality of access to training of staff. This process should reflect that training should be aligned to the business plan of the organisation. **ACTION - 7 DP**

An exit strategy has been prepared and circulated to the board.

An evaluation has been completed.

15. AOB:

JM noted diabetes national exposure and the announcement about it being the biggest health risk the nation is facing, resources being used for this condition, causes such as obesity and whether we need to consider a response around this? Access to care, especially foot care, is difficult and need to separate type 1 and type 2 as different situations. Comment to be taken to SG. **ACTION - 8 DP**

16. Date, time and venue of next meeting: November 18, 2015, 10am in the Large Room, Truro Community Library, Union Place, Truro, TR1 1EP.

Meeting closed 11.35am.



Acronyms:

HC - Healthwatch Cornwall

CC - Cornwall Council

CCG - Clinical Commissioning Group

CPFT - Cornwall Partnership Foundation Trust



ACTION LOG:

<u>ACTION</u>	<u>RESPONSIBLE</u>	<u>COMPLETED</u>
1. Amendment to pg 1 last board meeting minutes	MP	Yes
2. Update conflict of interests register	MP	Yes
3. Split Risk 3 into two parts: loss of HC function to Cornwall and loss of HC contract to current CIC	DP	Yes
4. Renegotiate office contract to include further break clauses	DP	Yes-agenda item
5. JH to sign three copies of the accounts and send to the auditors	JH	Yes
6. Update Data Protection Policy to include working at home	DP and RS	Yes
7. Develop process for staff training	DP	Yes
8. Take diabetes comments to the Steering Group	DP	No

