

**Minutes of Healthwatch Cornwall Board meeting
Wednesday September 13, 2017, 10am
6 Walsingham Place, Truro**

Present:

Directors: -Margaret Abban (MA), Gareth Dix (GD), John Evers (JE), Jayne Howard (JH), Jon McLeavy (JM), Roger Sinden (RS), Amanda Stratford (AS),
Staff: - Celia Newcombe (CN), recording minutes

Staff attendees: Jo Smith, Natalie Swann

PART 1: In public agenda

- **Welcome and Introductions:** JM welcomed everyone to the meeting. There were no members of the public expected or in attendance.
- **Apologies:** None.
- **Questions and comments from the public:** There was one question via twitter that was discussed and that will be answered by the operations group. Copy of question to MA to follow up. **ACTION 1 CN**
- **Conflicts of Interest:** None declared.
- **Advising of any other business:** None.
- **Minutes of the last meeting:** The unrati ed minutes of the meeting held on May 17, 2017 were approved and signed by JM as a correct record.
- **Actions/Matters Arising:**
 - Action 1: GD has looked at the risk register and has put a few language amendments in to ensure it aligns with strategy.
 - Action 2: One volunteer who has a strong background in HR wishes to find out more about the sub-committee but has not confirmed that they want to be part of an official group RS will speak with this person. AS to forward contact details. **ACTION 2 AS**
 - Action 3: Review of people policies complete.



Action 4: People code of conduct complete.

Action 5: To find out how stakeholders want to be engaged in ensuring all Healthwatch Cornwall publications are as accessible as possible AS and her team will be investigating by speaking with their contacts. A reader's panel to be considered as a possible long term fix.

ACTION 3 AS

Action 6: Finance committee working on this as an on-going project.

Action 7: Working Group September 13 to cover Corporate Governance Review.

Action 8: CN to continue reminding board members with regard to meetings and reports.

Action 9: Board members email addresses now set up. Derek Williams to advise re use during Working Group meeting today.

Action 10: Exchange of information for external meetings which included board members to be a two way process.

ACTION 4 ALL

Action 11: AS will be producing a monthly report from CRM database to discover trends in information received.

ACTION 5 AS

Action 12: End of Life to be discussed later in meeting.

Action 13: Paper re partnership boards has been presented to commissioner.

Action 14: Working group meeting planned for today.

Action 15: Enter and View policy to be discussed at working group meeting.

Action 16: Business plan to be discussed at working group meeting.

Action 17: Draft terms of reference for people sub-committee prepared but currently not relevant for this meeting.

Action 18: Risk register has been reviewed and distributed.

Action 19: Register of interests has been updated by board members.

Action 20: Board skills audit to be developed at working group meeting.

o **Directors Reports from meetings attended**

As the meetings attended were not open to the public this section was covered in part 2 of the meeting.

o **Operational Report**

- Positive feedback had been received from recent meetings with commissioner, Stuart Cohen. A proposal regarding the inclusion of additional partnership responsibilities had been presented. Clarification of key performance indicators to enable improved measurement of impact to be provided by Cornwall Council. Partnership work contract to remain separate from main contract.

- A review of feedback from the public had shown top priorities to be:-



- Waiting times to see GPs - Healthwatch Cornwall are talking with Kernow Clinical Commissioning Group with regard to what the actual issues are and appropriate future research to enable their money to be spent more effectively.
 - Accesses to NHS dentist services - NHS England is aware of problems and are mapping resources in Cornwall. Healthwatch Cornwall is meeting with them to see the best way of helping their work to find resolutions.
 - Mental Health.
- The three areas that are currently being concentrated on are : End of Life, Mental Health and engaging more input from younger people in Healthwatch Cornwall research.
 - Drop in research by outreach staff is going well and Healthwatch Cornwall is to be extended further beyond hospital locations.
 - Healthwatch Cornwall attended Playfest in August as a piece of Outreach work.
 - AS and Jody Wilson had attended the Healthwatch England Conference and were able to absorb information about the work that is currently being done elsewhere.
 - AS has met with MP Sarah Newton and will be arranging meetings with other MPs with Cornish constituencies. Other AS meetings included those with Barbara Vann of Cornwall Foundation Partnership Trust, Phil Confue also of Cornwall Foundation Partnership, and Peter Stokes of Kernow Health. Meetings with Adam Paynter and Kate Kennally of Cornwall Council had been set up. Healthwatch Penwith are due to visit in the near future.
 - AS is now regularly attending the NHS Quality Surveillance Group meetings and meetings with other local Healthwatch branches. There is engagement with the Care Quality Commission and Patient Experience teams re items of concern.
 - AS has engaged Mentor to review all Human Resources Policies. They will offer staff support and maintain staff related policies to ensure they, the Health and Safety compliance plan and the staff handbook are kept up to date. AS will send the relevant formal service level agreement to RS.
- ACTION 6 AS**
- AS is attending the NHS Kernow Citizen's Advisory Panel meetings, providers of social care are to be invited to attend in the future.



- Outreach worker Natalie Swann has been reappointed to the Research Manager position. The Outreach position is being advertised.
- It starts with you campaign (report by Josie Purcell) was started by Healthwatch England in July 2017; they report large increases in visitors to the website; facebook posts and tweets seen by 5000 and 12,600 respectively. In Cornwall the campaign has been published on the website including three personal stories, at the park and ride sites, on email footers, in pod casts, in blogs and on posters with a focus on mental health, dentistry and waiting times for a GP appointment. In autumn 2017 the Healthwatch England campaign will be reinstated with a focus on GP services.
- Mental Health Project (report by Jody Wilson). To date we have received approximately 70 cases of feedback. Mental Health is predominant in most meetings attended, Cornwall Foundation Trust are aware and a package of information has been provided as part of the CQC inspection of the Trust. Meetings with Mental Health agencies including Carrick and Restormel Mind, Pentreath, Outlook and Rethink are being held these will provide more background information on gaps in services to establish whether a broad or a specific investigation is most appropriate.
- Finance report was reviewed - now meeting regularly - helpful to all three members. Payments to outside organisations now missing from reports ACTION Finance sub-committee to confirm reallocation.
- Risk register - Enter and view and Rate and review
 - Enter and view - Cornwall council have requested more information about this facility. Healthwatch conference indicated that this facility was popular, discussion re use to be held outside of this meeting.
 - Rate and review is used by other Healthwatch branches re social care AS extended an invite to board members to participate in the next Healthwatch Cornwall Advisory Forum where a focus group will be proposed to consider the strategic viewpoint as it evolves. JH said that the amount of work required including promotional work around good use of rate and review would need to be extensive. To be discussed at Working Group meeting along with Enter and View.
 - Loss of contract needs to be viewed in terms of current positive feedback and the review of impact measurement possibilities.
 - Change required to titles to show poor data management existing problems relating to staff changes during 2017, data flow management and staff training needs.
 - Data security needs to be added as a risk - a business continuity plan is required.



- **Shaping Our Future**
Discussion took place re Healthwatch Cornwall's responsibility being to assist public engagement and to voice any concerns rather than to drive the process, that KCGG may incur implications that Healthwatch Cornwall will need to escalate and the importance of Healthwatch remaining consistently independent.
- **Cornwall Council Safeguarding Adults Policy section 4.3.3.11**
The statement is not one created by Healthwatch Cornwall but as this is now a published document and discussions with the new Safeguarding Adults manager have taken place Healthwatch Cornwall is happy to adopt the statement.
- **Future meetings.** AGM not required as a Community Interest Company. CN to send out doodle proposal re 2018 board meetings.
- **Next meeting Wednesday November 15, 2018, 10am 6 Walsingham Place**

ACTION 7 CN

Public meeting finished at 12.27pm

Acronyms:

CC - Cornwall Council
CCG - Clinical Commissioning Group
CIC - Community Interest Company
CPF - Cornwall People First
CQC - Care Quality Commission
CRCC - Cornwall Rural Community Council
CRM - Customer Relationship Manager
CSB - Children's Safeguarding Board
EOL - End of Life
HC - Healthwatch Cornwall
HR - Human Resources
HWE - Healthwatch England
KCCG - Kernow Clinical Commissioning Group
LDPB - Learning Disability Partnership Board
NEST - National Employee Savings Trust
OPPB - Older Persons Partnership Board
RCHT - Royal Cornwall Hospitals Trust



SAB - Safeguarding Adults Board

SAH - St Austell Healthcare

STP - Sustainable Transformation Plan

SWAST - South West Ambulance Service NHS Foundation Trust

ACTION LOG:

<u>ACTION</u>	<u>RESPONSIBLE</u>
1. Send actual question to MA and ensure an answer from operations team is sent	CN
2. Details of volunteer to be sent to RS	AS
3. Investigate how stakeholders want to be engaged in ensuring Healthwatch Cornwall publications are accessible	AS
4. Engage in two way process re information flow into and out of meetings where Healthwatch Cornwall is represented	ALL
5. Monthly report from CRM database to discover trends in information received.	AS/NS
6. Send relevant formal service level agreement to RS	AS
7. Send doodle proposal re board meeting dates for 2018	CN

