

Minutes of the Board Meeting

Date / Time: 9 September 2015, 19:00-20:30

Venue: The Meadows Community Centre, Family Wing, 1 St Catherine's Road, CAMBRIDGE, CB4 3XJ.

Present: Val Moore - Chair
Mike Andrews (MA), Graham Jagger (GJ), Karen Begg (KB), Ruth McCallum (RM), Sue Westwood-Bate (SWB)

Sandie Smith - CEO (SS)
Kate Hales (KH) Co-ordinator
Angie Ridley (AR) Communications Manager
Trisha Napier, (Minutes)

Four members of the public.

1 Notification of Chair

- 1.1 The public section of the Board of Director's meeting was opened by Graham Jagger, Acting Chair. He welcomed everyone and introduced the new Chair for Healthwatch Cambridgeshire, Val Moore.

The Chair thanked GJ for his help since Ruth Rogers' retirement. The Chair told the meeting that her post was a three-year role with the option to stand for a further three years. She expects it to be hard work but is eager to begin.

The Chair welcomed the staff and volunteers to the meeting, and proposed to hear comment on each agenda item from the floor following their completion.

2 Introduction and Apologies

- 2.1 Apologies have been received from Mike Hewins, Victor Lucas, Ann Campbell and Mike Thorne.

3 Declarations of Interest

- 3.1 There were no new conflicts to report. The register of interests is listed on the website.

4 Minutes of Previous Meeting 20 May 2015

4.1 Approved and signed as such by the Chair.

5 Matters Arising

5.1 The Chair asked that an Actions Log be used in future and if the draft Minutes of the AGM can be put on the website with a 'draft' watermark.

- 5.2
- 11.1.1: Information has now been sent to the volunteers.
 - 11.3.1: SS explained that this is ongoing and she is waiting for a reply from UnitingCare.
 - 11.5.1: Will include the use of Equality Impact Assessments.

6 Work Programme Update

6.1 SS informed the meeting that this report included the CEO report and highlighted:

- The Communications report would be a separate item on the agenda.
- Partnership working: it was important to ensure that work wasn't being duplicated and, when appropriate, was in partnership.
- The Healthwatch Cambridgeshire role of encouraging good practice in Health and Social Care.

Outcome 1

6.2 Cambs Voice has a half-day event in October. This will include showcasing Young People's work and workshops regarding the gypsy and travelling community. The event is targeting professionals.

Outcome 2

6.3 Reaching seldom heard people: road shows have been held in libraries to the north of the county, markets, a community event called 'Live in the Park', Carers' Week, and Time banks. The aim of these road shows was to collect more experiences from a wider and diverse range of people.

6.4 Healthwatch England is looking at gender identity services. Healthwatch Cambridgeshire has put out a call for evidence.

6.5 Children and Young People's engagement programme was presented at the recent AGM.

6.6 Maintenance of volunteer base: Healthwatch Cambridgeshire has a healthy volunteer base and is currently looking to develop volunteers to ensure that they always maintain high standards.

6.7 Consultation Network: currently over 140 people and all consultations are

listed on the HWC web site.

Outcome 3

- 6.8 Information and signposting: a six month report will be presented to the Board in November.

Outcome 4

- 6.9 As suggested by Ruth Rogers, from July 2015 the Health and Wellbeing Board start their meetings with a 'person's story'. These have been well received and are an excellent way of highlighting people's experiences. The next meeting is about mental health and Mind in Cambridgeshire will have a 'story' to relate.
- 6.10 Individual concerns: currently looking for stories regarding mental health services and the transference between the young people's service and the adult service. Evidence is required regarding this subject.
- 6.11 GJ said that the Enter and View project was a very important area and was pleased this was going on. He asked about future plans. SS reported that processes and training are important and a new programme was now needed to develop where best to go. This would be wider than care homes.
- 6.12 **Action - CEO**
The Chair asked for a report at the November meeting regarding Enter and View methodology and how it works, in relation to and as distinct from Care Quality Commission activity.
- 6.13 Another question was asked regarding crisis management in mental health, and if it was all ages or mainly young people? SS confirmed it was all ages and asked for Board support to look for feedback.
- 6.14 The February consultation event at Ely on Healthwatch Cambridgeshire strategy was discussed and declared very helpful and professionally run. It highlighted issues and brought feedback to inform the current Strategic Plan.
- 6.15 **Action - CEO**
Reports related to this event to be forwarded to the Chair.
- 6.16 A question regarding the previous consultation was raised: Was this something that should be an annual project or, issue a survey one year and workshop the next on an alternating rota?
- 6.17 **Action - CEO**
Agreed a 'light touch' survey should be conducted to support the review of the Strategic Plan in 2016 and provide Healthwatch Cambridgeshire with feedback on how it was doing.

6.18 The Chair asked What does good look like? Could HWC develop some measures to track our performance? SS informed the meeting that Healthwatch England was developing an outcome framework and she would like to see that before making a decision.

6.19 **Action - CEO**

Track national developments to see what is helpful and useful before developing key performance indicators.

Chair thanked SS for her report.

7 Communications Report

SS presented the six-monthly written report to the Board.

7.1 The number of web site traffic and twitter followers have increased. Facebook however is more difficult, but HWC has found the advertising useful.

7.2 Angie Ridley will look at the web site to see which areas are the most popular and so invest more time in those areas.

7.3 A discussion took place regarding getting information out to the public. GP flu clinics were mentioned and SS reported that the team had attended some of these last year.

7.4 The Chair suggested that this is looked at again next year, but to also explore new opportunities.

7.5 The Chair thanked AR for the report.

8 Volunteer Review

8.1 SS explained that the team has reviewed volunteering asking questions such as what is it like volunteering for HWC, what do you get out of it?

8.2 HWC is reassured by the positive responses which included contributing, gaining skills and being valued. DBS checks are now processed by a different organisation.

8.3 Chair asked if 27 volunteers is enough.

SS explained that this was a large number to manage and taking on more could prove difficult.

8.4 Kate Hales asked for her thanks to the volunteers, who are 'fantastic', to be recorded. The Chair also thanked the volunteers.

9 First Steps to Health Update

9.1 The report has now been published. Healthwatch Cambridgeshire has written to the Chief Medical Officer at CCG and NHS England. CCG replied within 21 days, but NHS England's response was difficult to obtain and SS had to ask Healthwatch England for assistance.

9.2 **Action:**
Chair to review the correspondence and write to NHS England.

9.3 The following was agreed:

- 1) Working with partners to clarify and raise awareness of entitlements and processes for accessing interpretation services. Good practice from the Healthwatch network has been identified to assist with this. HW Enfield has drafted a letter regarding entitlement to interpreting services. The team are adapting for Cambridgeshire.
- 2) Raise awareness of the report's findings and recommendation through the Primary Care Joint Commissioning Board and other strategic groups
- 3) Raise awareness of the report's findings and recommendation through involvement in procurements, such as 111 and Out of Hours.
- 4) Link with the County Council and other partners to promote the information and support available for young people and ensure that young people's views are taken into account
- 5) Continue to work closely with the CCG and other partners on the production and promotion of easily understandable information
- 6) Publicise the progress made to the public, interested individuals, politicians and partner organisations
- 7) Continue to seek intelligence to inform all of the above and ensure our views are informed by current and relevant lived experience

9.4 The Board approved the recommended next steps and asked for an update in due course.

9.5 A question was raised asking why the same literature wasn't used for all HWs?

It was explained that the literature was tailored to different regions and this would be difficult to do in generic literature.

10 Financial Controls and Reserves Policy Review

10.1 SS reported that no points were raised this year with the audit of annual accounts and congratulated the office manager.

10.2 The Policy has been reviewed and all contents are still appropriate. The only change is to the reserves figure which has been increased as staff numbers are higher and this must be borne in mind with regard to redundancy payments. The Board discussed how this figure had been reached.

10.3 **Decision**

It was agreed that GJ would review and clarify the reserves level with SS. Subject to this clarification the policy was approved.

11 **Finance Report**

11.1 SS was pleased to report that the budget is on track with no significant or unexpected variances. The figures may appear incorrect as they contain one off or professional fees. Payroll shows a slight under-spend as a member of staff is on maternity cover and the current person covering this post is working less hours.

11.2 A question was asked as to whether HWC pay corporation tax?

SS informed the Board that the corporation tax payment for 2014/15 was £19.

12 **Public Questions**

There were no questions from the floor.

Date/venue of next Meeting:

18 November 2015, 7pm
Maple Centre, 6 Oak Drive, HUNTINGDON, PE29 7HN