

## Minutes of the Board Meeting

**Date / time:** 1st October 2025, 5.00pm  
**Venue:** Via Zoom  
**Present:** Chair: Jonathan Jelley (JJ)  
Non-Executive Directors: Frances Dewhurst (FD), Ann Green (AG), Philippa Brice (PB) Saqib Rehman (SR), (JH), Jess Slater (JS), Chris Palmer (CP), Laura Beer (LB) and Chelsia Lake (CL)  
**Apologies:** Jonny Hebron (JH)  
**In Attendance:** Carole Rose (CR), Lucy Kennedy (LK), Ildiko Docsova (ID)

### Introduction and apologies

1. JJ welcomed all Directors and staff to the meeting.

### Declarations of interest

There were no declarations of interest in regards to this meeting agenda.

### Minutes of the previous meeting

2. The minutes of the meeting on 25th June 2025 (attached) were agreed as accurate.

### Matters Arising

3. JJ highlighted three matters arising.
4. The Citizen Advice Bureau's Health and social care queries will be put onto the agenda for the next meeting.
5. Molly, Youth Engagement Officer, will be invited to attend a future meeting and provide an update. The Youthwatch project has only just started, so it will likely be in the spring time. A full report can be provided at a later date.
6. The Cambridgeshire and Peterborough websites cannot be combined. If someone accesses the website and clicks on the staff structure it will take them to Healthwatch Cambridgeshire. Elements such as the Health and Care Forums are put onto the relevant website, not shared on both.

### Action Log

7. Discussed as above.

### Partnership Boards Report

8. LK/CR's report was circulated to members prior to the meeting.

9. JJ said that there has been a new lease of life in the Partnership Boards and he is pleased to see a lot of positives in the report. The work being done is going to strengthen accountability and ensure that the feedback continues to shape Healthwatch services.
10. LK gave some further updates since the report was drafted. She met with the Cambridge City taxi licensing leader, as a cross-board meeting with Independent Members from the Physical Disability and Sensory Impairment Partnership Boards. They were able to make comments on the accessibility questionnaire. The leader wants to continue working with the Independent Members and hopefully get them involved in taxi driver training, so that the taxi drivers gain a different perspective.
11. There is a county meeting with the taxi licensing leads across Peterborough and Cambridgeshire on 9th October. LK will attend and have the opportunity to represent the Independent Members and take forward any feedback.
12. Independent Members from the Physical Disability and Sensory Impairment Partnership Boards have been involved in Podaris' research for the Combined Authority buses. They are designing a metric for bus companies to measure accessibility and they need people with lived experience to provide feedback.
13. AG asked for clarification and more information on the Partnership Boards. LK explained that there are 5 Partnership Boards – Physical Disability, Sensory Impairment, Learning Disability, Older People and Carers – who cover the whole of Peterborough and Cambridgeshire. They meet every 3 months, with the exception of the Carers Board, who meet every 2 months. They represent people with lived experience to be heard directly.
14. AG asked where the Dementia Panel fitted in. JS advised that the Dementia Panel was part of a number of small projects suggested by Peterborough City Council because there was no joined-up collaboration around dementia. When Labour came into Government, they took it off their list of priorities. There is a cross over with the Carers Partnership Board because often it is the people looking after those with dementia that have been asking for the support. The first meeting with JS as temporary chair looked at the appetite around it, where they discussed terms of reference and governance. On review, it makes sense for the dementia panel to sit with the Partnership Boards, as it will be facilitated and coordinated in the same way.
15. PB commended Lucy, specifically for the work on taxis, which was a real stand out. It is helping to tackle issues but also preventing future problems. She said well done to everyone involved. LK will pass this feedback on to Independent Members.
16. FD explained that the Partnership Boards pre-date Healthwatch – they were run by another charity until Healthwatch took on the contracts from the LA. They have been part of the fabric of the voluntary sector for many years. This is the first time getting the voice of the Independent Members coming through in the report, which is a major step forward.

### **Chair's report**

17. There is a large amount of transition taking place, including local government organisation. JJ took the report as read and asked for any questions.
18. FD asked about the National Neighbourhood Health Implementation Programme. JS said this is a project put out to all England boards, with the aim of sharing learning and coaching. JS attended a webinar this week about trying to get partners to support it.
19. PB's understanding of it is that they are trying it first with a small number, to see what lessons can be learnt from the rest of the country.
20. AG said the map was really helpful. The size of the whole thing is enormous. It seems to be a divisive move and a retrograde step. There are fears the patient voice will be lost in such a huge organisation.

The Board noted the Chair's report.

### **Chief Executive's report**

21. JJ introduced the CEO report for JS to expand on.
22. JS advised that Jan Thomas is the new CEO of the Central East ICB. JS will be meeting with her and has a list of questions, especially regarding the function of the patient voice and where it will sit within the ICB.
23. JS will be putting questions to Healthwatch England around national archive data and where it will go when Healthwatch closes.
24. JS will confirm the Unitary Council structure at a later date.
25. Healthwatch will continue to report on impact around the measures in the format the senior management team put together. It is expected that people reporting positive experiences will reduce because monitoring has been put on pause.
26. There will be an ICB transition board. They have asked for one representative from the region. Neil Tester in Hertfordshire is a good fit to represent the region. The local ICB board is continuing until April 2026. Work is being undertaken in the background, including meetings around triangulation of data.
27. Healthwatch is receiving lots of requests for patient feedback and data. They will make sure functions are transferred properly.
28. AG asked how signposting is going to work with all the changes. How can people be directed when they don't really know what they are looking for? And if PPGs will continue when Healthwatch closes? JS said it is on her list of questions to ask Jan Thomas.
29. PB said there is a desire to push patient feedback onto an App, which will have limitations for patient engagement.
30. LB asked if there is an update on the PPI innovation project. JS said that this was not awarded. A proposal has been sent regarding the Workwell plan and they are waiting to hear back.

No further questions were raised in relation to the CEOs report.

The Board noted the report and thanked JS.

### **General Purposes Group (GPG) report**

31. JJ introduced the report from GPG held on 10th September 2025.
32. The financial position is good. There is a potential surplus of £25,000, which will reduce to about £7,500, when the new Head of Communications is recruited.
33. The focus remains on delivery of performance rather than cost cutting and investment in staff training has increased.
34. Long term projects are being avoided but staff are continuing to manage short term commissioned projects.
35. Healthwatch England have suggested that Healthwatch will close in October 2026 at the very earliest, therefore redundancies are not reflected in the 2025/2026 financial year.
36. Pay review – discussed at the end of the meeting (see AOB).

The Board noted the report with thanks.

### **Any Other Business and Public Questions**

37. It was raised that the role of Deputy Chair is unclear and the job description needs strengthening. JJ asked FD and SR, as current Deputy Chairs, whether they have been asked to carry out any tasks in their role. Tasks are minimal and not regular. They are willing to take on more but have not been asked.
38. The role of Chair is paid but Deputy Chair isn't, so there is an imbalance.
39. The Chair gathers knowledge over time and becomes well informed, it was suggested that the Chair should be sharing more in case of absence, where the Deputy Chair needs to step in.
40. JJ said it was good that this issue had been raised at the GPG but the Board may need to come back to it later down the line. He thanked FD and SR for their support as Deputy Chairs.
41. FD is due to come to the end of her role in December. She has offered to stay for up to another year. The Board voted to reappoint FD until October 2026. JJ thanked her for her service and the historical context and contribution she brings to the Board.
42. JJ said that everyone had been brilliantly briefed for the Summit. He thanked everyone for the considerable effort that has gone into it. It sold out in 3 weeks and will have over 200 people attending. It will be a really exciting day with great speakers and a panel.

JJ thanked ID and LK for joining but asked them to leave before salaries were discussed. They left the meeting.

43. The Board discussed the staff pay review. JJ's proposal is a 3% increase. This was based on looking at the national figures, and both the NHS and charity sector (3.6% and 2.5% respectively.)
44. Healthwatch has budgeted for a 2% increase. The figures include a 3% increase – with this there is still a £8,000 profit.
45. PB asked if there is room for a better offer, given inflation rates and cost of living?

46. JJ stated that listening to the amount of work that is going on and the transitional arrangements, the Board needs to be mindful that Healthwatch wants to retain its core staff. 4% would be a marginal financial difference compared to the feel it gives and the moral principle.
47. JJ stated that it is worth considering that the local authority may curtail expenditure in April ([add to Risk Register.](#))
48. JJ asked if AG was happy diverting away from her original proposal and AG confirmed that she was.
49. All members of the Board voted for a 4% pay increase. This will be backdated to 1st April 2025.
50. JJ gave credit and recognition to Jess for the changes she has implemented to financial management, which has made a significant improvement.

JJ thanked everyone for attending and for their continued support. It is hugely appreciated.

No questions had been submitted by the public in advance of the meeting.

The meeting closed at 1835