

Minutes of the Board Meeting

Date / Time: 15th January 2020, 2.00pm

Venue: The Meadows Community Centre, 1 St Catherine's Road, Cambridge CB4 2EZ

Present: Chair: Val Moore. Directors: Nadia Emmony, Paul Jobling, Margaret Robinson, Graham Jagger, Nick Patten and Frances Dewhurst.
Guarantors: Clive Morton and Victor Lucas and CEO: Sandie Smith

Apologies: Susan Mahmood, Susan Westwood Bate, Jonathan Wells and Saqib Rehman

Minute taker: Graham Lewis

Introduction and apologies

1. The Chair welcomed everyone to the Board Meeting held in public.
2. Apologies received from Directors: Susan Mahmood, Susan Westwood Bate, Jonathan Wells and Saqib Rehman

Declarations of interest

3. There were none declared relating to the agenda.

Minutes of the previous meeting

4. The minutes of meeting on 13th November 2019 were agreed with no changes.

Action log

5. All actions were completed.

Appointment of Directors

6. The Chair described the competitive process to recruit new directors and recommended the successful applicants to the Board.
7. The Board approved the appointment of Nadia Emmony and Paul Jobling to January 2023.

The Best Start in Life Programme

8. Helen Freeman, Commissioning Team Manager, Public Health, Cambridgeshire County Council presented the programme. It is bringing together public and community health, maternity services, children's commissioning, early year's education and early help teams working together with voluntary sector partners to develop a strategy and design a place-based delivery model that supports outcomes for children pre-birth to 5 years.
9. HF talked through the 'Domains of intervention'; family and community connections, one team defined by place, making the most of data and every contact counts.

10. HF then talked through the 'Intermediate outcomes and indicators'; attachment, parents support healthy development, parent stress and mental health, play is valued and social supports.
11. HF explained the 3 headline outcomes of children leading healthy lives, children are safe from harm and children are confident, resilient and with an aptitude for learning.
12. GJ supported the importance of this work and given the closing of Sure Start centres asked how the teams address cultural and social barriers. He commented that there are not enough health visitors. HF said that Sure Start existed in a world where services still managed their budgets and priorities separately. The qualified workforce starts making links through the maternity services, nurseries as well as health visitors. There is a pilot 'pathway to parenting' project in Wisbech with the maternity and health visitors working together on a 4-week programme.
13. FD asked about workforce and how the programme will support them to see possibilities gained from 'letting go' of expert roles to ensure smooth co-operation. HF said they are identifying training needs that all staff will need to ensure common understanding.
14. SS said that Tongue Tie Separation is an issue that leads to low levels of breast feeding. The issue has been raised by Healthwatch and a new pathway agreed but is subject to funding.
15. NP asked whether the programme has linked to developing Primary Care Networks, commenting that it may be the same children struggling with obesity or school readiness for example. HF said services have got more targeted but universal non-stigmatising services can play a key role and help identify the right child at the right time for greater support. MR added that some parents don't readily understand healthy development unless they hear it from within their communities.
16. CM asked about the role of physical space in community building. HF agreed that maintaining buildings could be hard. Gaining family services from Section 106 agreements was an ambition. NE commented that providing link workers to visit the places that people go works.
17. HF then went on to talk about dental and oral health. Dentists are commissioned by NHS England. The CCG is looking at how they can ensure people know about and connect with dental services. The 'MySmile' service operates in the most deprived areas of Cambridgeshire and Peterborough. SS offered to help distribute the materials.
18. PJ asked if difficulties in getting a dentist as an adult is an inhibitor to people taking their children. HF said that she didn't have information on this.
19. GJ asked about staffing and if there are a sufficient number of dentists. He also asked if some of the preventive work can be done by others, such as dental technicians and oral hygienists. HF agreed with this.
20. VL asked who has the oversight to ensure that agencies implement the activity and monitors to ensure it happens. HF advised that this is the role of the STP.
21. FD observed that the requirement for specialists to unearth a range of needs and respond to them was also a theme for urgent and emergency care services.
22. VM commented that the public engagement and insights from families about the programme had been very impressive, and she wondered what they learnt and what advice Helen would give on service user research. With no time to address this VM said the Healthwatch team would follow this up.

Action: SS with VM and SM to ask Health Overview and Scrutiny Committees again about dental and oral health.

Chair's report

23. VM introduced her report which sets out the public activities carried out by the Chair since the last Board meeting.
24. VM said that our strategy consultation is now live. Staff and Directors are discussing it at Health and Care Forums and some of the Partnership Boards.
25. VM said that Healthwatch welcomed a recent document issued by the Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) about the way that it planned to commission services. VL pointed out the complexities of incentivising co-ordination. CM and MR commented on the impact on voluntary services. SS noted and thanked Angie Ridley for asking the CCG to highlight the document on their website.

Chief Executive's report

26. SS introduced her report, highlighting the Communities Values Panel commissioned by the CCG as part of its Big Conversation. We recruited 30 people reflecting the demography of Cambridgeshire and Peterborough. The outcomes from their discussions are being written as a series of reports. These will help the CCG deliver commissioning based on social values.
27. SS said that the Engagement team had spoken to 428 people at 16 engagement events during November and December 2019. This was a similar number to the same period in 2018. It was emphasised that the team was close to saturation point and there was no expectation for the team to achieve more each year. The volunteer base is well spread geographically, and slow turnover indicates retention. It's been a year since the Board escalated feedback on mental health service access and problems for people persist.

Action: SS and VM to update the Board about the Community Values Panel at either a full Board meeting or development session.

Information and Signposting Report

28. SS highlighted these key themes:
 - People who are too ill/not ill enough for services
 - Access to dentists
 - Problems with administration leading to inaccurate appointment information.
29. MR stated in response to the pie chart on feedback type and numbers that this is an excellent service that Healthwatch provide.
30. It was noted one of the challenges faced by the Information and Signposting Service is finding out who delivers or commissions services.
31. GJ asked how we know about our impact on change. SS said that this is not always easy, but by keeping items on the agenda, raising awareness and telling people's stories we are able to influence change. The recent Healthwatch England report on how complaints are handled in hospitals was highlighted as a useful resource. SS commented that themes from GP complaints are fragmented and therefore hard to see and address.

32. CM said that he was surprised that there was no mention of delayed discharge from hospital. SS explained that people don't always identify as delayed discharge but describe it as a lack of domiciliary care.
33. FD asked if we felt that 351 contacts was the right level. SS explained that we are always seeking to signpost more people. Angie Ridley said that the new website will have better information and signposting pages and that we will have the ability to monitor visits to individual pages.

General Purposes Group report (including Finance)

34. NP presented the report, confirming that we were in a healthy financial position at the end of November 2019. The data for December will be available at the next meeting.
35. NP said the GP Group had adopted a new policy review cycle and recommended the Reserves Policy.
36. VL asked about the value of the current reserves. SS explained that we currently hold approximately £125k. Our commissioner is satisfied that we have the right level of reserves.
37. The Board approved the Reserves Policy.

Public questions

38. No public questions were submitted.

VM thanked all attendees. Meeting closed at 16:00