

Chair's Report

Purpose

1. This report sets out public activities carried out by the Chair since the last Board meeting, see Appendix, and gives an update on the Healthwatch Cambridgeshire and Peterborough merger activities.

Action required by the Board

- 2. The Board is asked to:
 - Note the report
 - Agree the priority areas for 2017/18 and a Board champion for each.

Author

Val Moore, Chair

13 September 2017

Healthwatch Cambridgeshire and Peterborough merger

3. I am delighted to share the news that Sandie Smith will formally take up the role of Chief Executive Officer from 1st October. This is the point that our new commissioning arrangements with the Peterborough City Council (PCC) and Cambridgeshire County Council (CCC) joint commissioning unit will commence. The first half of this year has seen us deliver the work programmes in parallel, albeit with increasing internal coordination. I know the Board and volunteers will join me in thanking Angela Burrows for her work leading the Peterborough team over recent years and wish her well in her future career. Sandie is now working with staff and the Board to realign our resources to the meet the challenge of the new organisation.

Volunteers and community engagement

- 4. A survey and meeting with Healthwatch volunteers from Cambridgeshire and Peterborough took place in June. Some immediate actions to enable a better understanding of the current roles, and to support volunteers, are being worked on now before the Board sets the future strategy later in the year.
- 5. To further inform the strategy, a special meeting of an important body connected to the predecessor Healthwatch was held in Peterborough on 15th August. The Advisory Committee which sat alongside the Board of Directors in Healthwatch Peterborough was formed initially from the volunteer Management Group of the preceding organisation Link. Together with the volunteer Directors and staff, the members attended monthly Healthwatch Community meetings in Peterborough. The views of the Committee members were sought about the value of the meetings, and about what members personally want from a volunteering role with Healthwatch Cambridgeshire and Peterborough.

The Community meetings were regularly attended by locally based health and social care professionals e.g. from the Clinical Commissioning Group, and the Peterborough and Stamford Hospitals Trust (now including Hnchingbrooke hospital and called North West Anglia Foundation Trust), who reported on their ongoing work, current issues and answered questions from Healthwatch Directors, the Advisory Committee members and any attending members of the public. There were frequent presentations from guest speakers. This structure provided a conduit between the community, Healthwatch and health and social care professionals in an informal atmosphere. Advisory Committee members also represent Healthwatch at external board meetings and other events and report on the meetings.

- 6. The views of the Advisory Group will be listened to for the volunteer development workstream (see paragraph 4). Of equal importance is another workstream to develop options on achieving public engagement with Healthwatch and local health and care providers in other/all geographically relevant patches, not just Peterborough. So far, the Board has specified the approach to community engagement should be equitable, but this does not mean it should be the same or demand equal resources.
- 7. The Peterborough Community meetings are continuing in the meantime, although there is no formal line sketched out from the Advisory Group to the new Healthwatch governance structures. It is a great pleasure that this Board meeting is being held in Peterborough, to further our joint learning, and I look forward to further ideas and suggestions.

Project continuity

8. With the CEO designate, and the advice of Directors, I am overseeing the review of several projects that were ongoing in Peterborough. A meeting with colleagues at HMP Peterborough is planned to ensure our small number of prison volunteers are supported to do their work on promoting engagement with health services to their fellow inmates. Sustainable solutions to this work, and with respect to Healthwatch role on the Cancer Wellbeing Service, and in relation to hydrotherapy facilities will be brought to the Board as soon as possible following discussion with the stakeholders.

Representation

9. The new combined Healthwatch Board has reviewed its representation on the Health and Wellbeing Boards, Health Scrutiny Committees and numerous other key health and social care partnerships or programme boards across the new patch. Selected updates from directors on the external environment for Healthwatch will be included in these Chair's reports from November.

Priorities for Healthwatch Cambridgeshire and Peterborough in 2017/18

- 10. After reviewing available data, and comparing approaches from the two predecessor Healthwatch, the staff and director team identified priorities for 2017/18 as follows:
 - Access to and experience of primary care particularly in growth areas
 - Access to social care assessments and experience of integrated support services
 - Access to and experience of mental health services for children and young people and adults
 - The promotion of health, self-care and independence
 - Transforming pathways for urgent and emergency care services

• Engaging patients and the public with the Sustainability and Transformation Programme

11.In all these areas of care Healthwatch will:

- Scrutinise the quality of patient and public engagement by the providers and commissioners of health and care services
- Promote the value of lived experience
- Encourage shared health and care decision making between people and professionals
- Review the impacts of service change on people's experience.
- 12. The staff team have refined a process for identifying within-year priorities, as people's concerns do not always mirror our strategic priorities. This means that on a day to day basis Healthwatch will gather and use information to systematically highlight concerns about local health and care services. These concerns will be escalated into projects according to the estimated impact on communities and our ability to influence change. The CEO will keep the Board in touch with what these projects are and what is achieved, as part of the CEO's report.

Appendix - Meetings attended by the Chair 1st July to 31st August 2017

Meeting	Purpose	Date
Healthwatch commissioners; PCC*	Healthwatch merger	04/07
CCC* Cambridgeshire Health and Wellbeing Board	Member	06/07
STP* Clinical Advisory Group meeting	Member	06/07
Drug and Alcohol Stakeholder consultation event	Observer	19/07
CCC Health Scrutiny Liaison Group	Member	20/07
STP Clinical Advisory Group meeting 2018-19 Priorities Workshop	Member	27/07
STP Clinical Advisory Group meeting	Member	17/08

*Abbreviation:

- CCC Cambridgeshire County Council
- PCC Peterborough City Council

STP - Sustainable Transformation Programme