

## MINUTES

Name of meeting: Healthwatch Hampshire Board Meeting  
 Date: 4 May 2018  
 Venue: Westgate Chambers, Staple Gardens, Winchester, 10:00 - 14:00  
 Present: Pat Bull (PB), Mark Deal (MD), Ian Glenday (IG), Christine Holloway (CH), Emma Leatherbarrow (EL), Richard McKay (RM)  
 Guest: Lynne Lockyer (LL) [10.00-10.30am only]  
 In attendance: Steve Manley (SM), Heather Wyper (HjW)

Item	Action
1. <b>Apologies</b> were received from Sue Alford (SA).	
<p>2. <b>Board recruitment outcomes</b></p> <p>i) Pat Bull was confirmed in post as a Director by the Members (Help and Care [H&amp;C] and Citizens Advice Hampshire [CitAH]). EL would ensure paperwork completed. PB agreed to be the Board's lead on <b>acute care and marketing/communications</b> (not including digital). She would also share her expertise on volunteering with SM without taking an active role in volunteer management.</p> <p>The Board also welcomed as a guest Lynne Lockyer, who might be recommended as a Non-Executive Director.</p> <p>ii) <b>Non-Executive Director for Governance:</b> CH explained that neither LL nor PB wished to take on this specific role. The group discussed governance responsibilities, where they should lie and, more generally - in response to queries from LL - the roles of NEDs and EDs within a local Healthwatch organisation.</p> <p>The Board agreed that the governance role and title should be reviewed and the specific responsibilities clarified before deciding the best way forward.</p> <p><i>10.30am LL left the meeting.</i></p> <p>iii) <b>Filling remaining vacancies:</b></p> <p>It was agreed that once board responsibilities had been reviewed, CH would update LL, discuss how HWH operated, and determine whether she wished to pursue her application.</p> <p>It was agreed that HWH should continue to seek further applications for Directors by disseminating the opportunity through suitable channels in line with the Equalities Policy, but without incurring additional cost.</p> <p>Southern Health was currently inviting applicants for non-executive positions on its Board. The Southern Health Chair had offered to pass on information about HWH openings to suitable candidates. It</p>	<p>EL</p> <p>CH, EL &amp; RM</p> <p>CH</p> <p>CH</p> <p>CH</p>

<p>was agreed to accept the offer - CH would provide details.</p> <p>RM would approach people of whom he was aware who might be interested if /when their current commitments to another body ended.</p> <p>iv) <b>Associates:</b> Due to lack of take up, it was agreed that this role would not be re-advertised. Instead, PB and SM would discuss the best ways to find people interested in such a role.</p> <p>v) <b>Board selection procedures:</b> Due to diary/communication difficulties, the Healthwatch Champion had not been able to attend the recent interviews. The Board stipulated that future Appointments Panels <u>must</u> include a patient/user representative on the interviewing panel.</p> <p>vi) <b>Appointment of Board chair for 2018/19:</b> CH left the room briefly while Board colleagues discussed this item. On her return, it was agreed that CH would be Board chair in 2018/19.</p> <p>vii) <b>Appointment of Board vice-chair:</b> Given the recent and ongoing recruitment, the vice-chair role would be allocated later in the year.</p>	<p>RM</p> <p>PB, SM</p> <p>CH (future agenda)</p>
<p>3. <b>Declarations of interest</b> - No new declarations were made. EL to arrange for PB to be sent a Declaration of Interests form to complete.</p>	<p>EL PB</p>
<p>4. <b>Minutes of the previous meeting 2 February 2018</b></p> <p>Approved as a true record and signed by the Chair.</p>	
<p>5. <b>Strategic planning</b></p>	
<p>a) <b>Annual plan 2018/2019</b> (circulated with agenda) - PB had already suggested improvements to punctuation and text layout which SM would include. The draft was approved with these amendments and those below. SM received permission to put document on website in present form although will be updated.</p> <p>(i) Information and advice service (and NHS complaints advocacy subject to contract continuing) would be integrated into main report, to include actions/aims supplied by H&amp;C and CitAH.</p> <p>(ii) Introductory paragraph would be added to make clear the context (reduced contract value and budget. A simple pie chart was suggested, to which should include costs of core activities as well as projects.</p> <p>b) <b>Delivery partner workplans including tender commitments</b> - RM and EL confirmed that workplan objectives and tender commitments were set out in the SLAs (see (c) below) and annual plan. EL had a separate note of incidental tender-related actions. Some had already been completed. EL to give verbal update at next meeting.</p> <p>c) <b>CIC contracts with delivery partners</b> (“service level agreements” or</p>	<p>SM</p> <p>SM EL, RM, SM</p> <p>EL</p>

<p>SLAs)<sup>1</sup> -</p> <ul style="list-style-type: none"> <li>i) Citizens Advice Hampshire - approved.</li> <li>ii) Help &amp; Care (general) - approved.</li> <li>iii) Help &amp; Care (board support) - approved.</li> </ul> <p><b>d) Key performance indicators</b> (chart circulated with agenda) - approved on a trial basis, after some immediate amendments/clarifications:</p> <ul style="list-style-type: none"> <li>~ target column to be removed in report to Hampshire County Council (HCC); previous years' outturn figures would be used for monitoring by the HWH Board</li> <li>~ may need to differentiate between Gateway and CitA due to different reporting mechanisms</li> <li>~ it would not be appropriate to record waiting times except for CitA advocacy; delivery partners would only do so for information and advice as exception reports</li> <li>~ Further comments and changes should be passed on to SM by 18 May</li> </ul> <p><b>e) 5-year strategic planning</b> - The Board agreed to meet for planning (and integration of new Board members) at an away day to be held on Tuesday 31 July from 12noon to 5.00. SM to arrange venue. CH and EL to plan format.</p> <p><b>f) NHS complaints advocacy tender update</b> - RM reported that HCC had not issued any communication or tender announcement to date. The current (extended) contract was due to expire on 30 June. This was causing difficulties for CitAH with planning problems and staff seeking jobs elsewhere. CM agreed to write to HCC (RM to liaise). <i>[Note: action not needed because on 11 May 2018, HCC sent notification that the tender would be issued shortly].</i></p>	<p>SM</p> <p>SM/ SA</p> <p>SM. CH/ EL</p> <p>CH &amp; RM</p>
<p><b>6. Governance</b></p>	
<p><b>a) General Data Protection Regulation (GDPR) implementation</b></p> <ul style="list-style-type: none"> <li>i) <u>Help &amp; Care</u> - EL reported that the website Privacy Statement had been redrafted and would be sent to the Board shortly. Minor changes were also being made to the Information Governance policy. In the next ten days, all mailing list contacts would receive a Mail Chimp newsletter inviting them to opt in. All staff would receive training. They would need to be particularly careful to ensure explicit and informed consent in face-to-face engagement work. An easy-read Healthwatch-branded leaflet to inform contacts about their information/privacy rights would be produced.</li> <li>ii) <u>Citizens Advice Hampshire</u> - RM explained that security protection was high because Citizens Advice nationally ran their contact database, and staff and volunteers could not access it via portable or home</li> </ul>	<p>SM</p>

<sup>1</sup> Although listed here in agenda order, at the meeting item 5c was dealt with (and Board approval confirmed) during afternoon session to allow reading time for MD who had not received advance copies

<p>devices. Good procedures were already in place although consent was now being made more specific.</p> <p>iii) <u>CIC</u> - The Board welcomed the news that H&amp;C would be appointing its own Data Protection Officer (DPO) which would cover both the main charity and the local Healthwatch organisations it supported, including HWH CIC. The DPO would be employed by H&amp;C.</p> <p>In response to a query, EL said that she believed HWH CIC was insured against a serious data breach - EL to check - but that the risk was low, and minimised by robust policies and processes.</p> <p>As Margaret Woodhead had stepped down, EL agreed to review and update the CIC's Data Protection Policy. She would also provide/ draft a template for privacy impact assessments (which would be part of all HWH project plans in future). The template would be used to assess the new HCC contract.</p> <p><b>The Board agreed they were satisfied that all required steps were being taken for HWH to meet its GDPR obligations.</b></p> <p>b) <b>Period of office on Board</b> - A limit of 6 consecutive years for Non-Executive Directors was agreed in principle, subject to operational requirements. This would bring existing and new Directors into line. IG and CH had been appointed on 15 May 2014; MD indicated that he had started about the same time. CH to add succession planning to the away day agenda.</p> <p>c) <b>Board responsibilities/lead areas:</b> It was agreed that by 18 May each person would check their responsibilities on the draft chart and inform CH whether they agreed and/or had any suggested changes or additions. EL would supply a short summary of the 'strategic influencing' role.</p>	<p>EL</p> <p>EL EL</p> <p>CH</p> <p>All EL</p>
<p><b>7. Performance Management</b></p>	
<p>a) <b>Q4 activity report</b> - draft received. SM gave verbal summary.</p> <p>i) The Board noted that:</p> <ul style="list-style-type: none"> <li>• the possibility of CCG funding was under discussion to allow HWH to continue chairing United Communities.</li> <li>• the urgent care report circulated to the Board was an interim report on CitAH's part of the project for internal use only. It had been produced by an outgoing member of staff. The formal report covering the whole of the project was in preparation.</li> <li>• 'Our Hands Are Tied' (issues faced by d/Deaf service users) had attracted significant interest from Frimley STP. The draft report would be sent to providers for comment before publication.</li> <li>• Community Cash Fund project reports had been received and were being uploaded to website.</li> <li>• Four (to date) trained volunteers were available to deliver Healthwatch presentations in the community.</li> </ul>	

<ul style="list-style-type: none"> <li>• Maternity Matters - commitment to positive change by commissioners would be followed up. EL and SM had conducted a national webinar sharing learning from the project as part of NHS England's Experience of Care week.</li> </ul> <p>ii) Advocacy services for people with mental health conditions - SM confirmed there was a shortage of such services in Hampshire, with nowhere to signpost individuals to. The Board asked SM to write a short report formally communicating the issue. The report would be sent to Frimley STP (mental health alliance programme led by Chris Bailey and Southern Health CEO) with a copy to HCC, and a formal response requested from both.</p> <p>b) <b>Performance against 2017/2018 workplan</b> - SM gave a verbal summary. No concerns raised.</p> <p>c) <b>Delivery partner performance concerns</b> - No concerns raised.</p> <p>d) <b>Healthwatch England awards</b> - SM confirmed that he was entering HWH in six categories.</p> <p>e) <b>Annual report</b> - Deadline for publication 30 June. SM on leave last week of June. SM agreed to send final draft to all Board members by 13 June. The Board recommended producing a shorter shareable document focused on impact; with a distribution plan.</p>	<p>SM in liaison with EL</p> <p>SM in liaison with PB</p>
<p><b>8. Finance</b></p>	
<p>a) <b>Finance Committee meeting 25 April 2018</b> - minutes received.</p> <p>i) In his verbal summary, IG highlighted that</p> <ul style="list-style-type: none"> <li>• a decision had not yet been reached about whether/when to try to recover VAT tribunal costs.</li> <li>• HCC had not yet paid the retrospective VAT invoices. H&amp;C Finance team, who were regularly chasing, advised that it appeared to be an administrative delay. EL reported that delays in HCC payment were a common problem which was being taken up by the Hampshire Volunteer Sector Consortium which she attends.</li> <li>• VAT on payments under new contract - H&amp;C were charging VAT based on the tribunal decision; CitAH planned to get advice from HRMC based on their new contract with the CIC. Either way it would not affect CIC's finances as any VAT charged could be claimed back.</li> <li>• H&amp;C and CitAH seeking quotations to reduce insurance costs.</li> <li>• concern was expressed that HCC had still not provided written feedback on tender despite chasing by CH and IG.</li> </ul> <p>ii) <b>Reserves:</b> After discussing the Finance Committee's recommendation, the Board agreed that the CIC should hold reserves of a minimum of 3 months' running costs, with a £10k budget for unforeseen issues.</p> <p>b) <b>2017/18 Quarter 4 accounts</b> - noted, no concerns. £11k known</p>	<p>IG</p> <p>EL</p> <p>IG</p>

<p>overspend due to tribunal costs. H&amp;C and CitAH internal overruns not being passed on to CIC.</p> <p>c) <b>2018/2019 Budget</b> - Draft approved by last Board meeting was confirmed, no changes having been made by the Finance Committee.</p> <p><i>Meeting adjourned for lunch.</i></p>	
<p><b>9. Developments in local health and social care</b></p>	
<p>a) <b>Hospitals and acute care</b></p> <p>i) <b>Hampshire Hospitals Foundation Trust</b> - SM reported that planning for critical care (i.e. next steps following the decision not to build a new hospital) was neither being publicly discussed nor communicated. HCC's Health and Adult Social Care Select Committee (HASC)<sup>2</sup> had called the Trust in to report on 16 May 2018.</p> <p>SM reported that representatives were being sought for the planning committees for two non-emergency care centres being created in Lymington and Andover. SM will discuss and update.</p> <p>ii) <b>Southern Health</b> - CH reported on her recent conversation with the Chair. Southern Health had new non-executive directors and top management. The Chair had asked if HWH could submit the case study write-up (see 3 Feb minutes 10a), or at least a draft, by July to coincide with their CQC report/visit.</p> <p>b) <b>CCGs and related</b></p> <p>i) <b>Hampshire CCG Partnership (formerly the Hampshire Four)</b> - The board noted that the Isle of Wight CCG had now joined.<sup>3</sup> A response to HWH's request to meet with the CEO had been received; SM to follow up.</p> <p>ii) <b>North and Mid Hants Transforming Care Services programme</b> [North Hants CCG, West Hants CCG and Hampshire Hospitals NHS Foundation Trust] SM reported the Transforming Care Patient and Public Reference Group was concerned at the lack of patient engagement (see 9a ii above), and its future was unclear after the retirement of its chair.</p> <p>c) <b>Wessex Voices</b> - EL reported on current areas of work, including screening take up and end of life care. Funding had been confirmed for repeating the leadership programme in Hampshire.</p> <p>d) <b>Health and Wellbeing Board subgroup on co-design and engagement</b> - CH confirmed that all the subgroup's recommendations had been agreed by the Hampshire Health and Wellbeing Board. They now needed to focus on monitoring implementation.</p>	<p>SM</p> <p>CH/ SM</p> <p>SM</p>

<sup>2</sup>formerly Health Overview & Scrutiny Committee (HOSC). For details of newly named forum, go to <http://www3.hants.gov.uk/scrutiny/health-overview-and-scrutiny-committee.htm>

<sup>3</sup> <http://www.isleofwightccg.nhs.uk/about-us/our%20governing%20body/whos-who/whos-who-at-the-ccg.htm>



<p>flowchart with RM and use to update HWH complaints policy.</p> <p>f) <b>Care Opinion</b> (3 Nov 2017 minute 5c) - No new recommendations from SM. No need for Board to track progress any longer.</p>	
<p><b>11. Risk Register</b></p> <p>The risks and mitigating actions were reviewed and updated (revised register attached - version 8).</p>	
<p><b>12. Matters arising from the minutes of the previous meeting</b></p> <p>Matters still outstanding were carried forward:</p> <p>a) <b>Impact of domiciliary care services report</b> (3 Nov minute 6(c)iv).</p> <p>b) <b>Policy and process for responding to challenging members of the public</b> (5 May 2017 minute 7a) - to be addressed in parallel with the review of the complaints policy and procedure.</p> <p>c) <b>Storage of financial and other Board records</b> (3 Nov minute 10d) - Agreed to engage HjW to carry out this work. CH and EL to liaise.</p>	<p>CH</p> <p>CH, EL/ HjW</p>
<p><b>13. Any other business</b></p> <p>a) <b>Winchester Clean Air event (21 May)</b> - it was agreed that HWH should accept the invitation to lend its support (name and logo only) to this event, which was led by Winchester Action on Climate Change. HWH would be open to supporting similar events in neighbouring areas where appropriate (e.g. not covered by another local HW). CH to advise organisers across Hampshire.</p> <p>b) <b>HWH office premises</b> - The Board noted and approved the planned office move from Staple Gardens to a new community hub in Winnall, planned for downsizing and cost-saving purposes. SM agreed to ensure Companies House was advised of the change in HWH's registered office.</p> <p>c) <b>Strategic Influencing</b> - following the small group discussion set up by the last Board meeting, CH had circulated a draft paper (separately from meeting papers). Each Board member to reply by end of June with comments/suggestions/changes.</p> <p>d) <b>Community Cash Fund video</b>: SM showed the group a short film on the links between men's mental health and criminal behaviour made by one of the Community Cash Fund recipient organisations, Fixers. In the discussion afterwards, it was suggested that relevant organisations might be encouraged to apply for Community Cash Fund funding for a project to give prison inmates a voice about their care.</p>	<p>CH</p> <p>SM/ EL</p> <p>all</p>

**14. Dates of future Board meetings**

Away day: 31 July 2018, 12-5pm

Agenda items to include:

- Integration of new board members
- Board succession planning
- 5 year strategic plan

Next meeting: Fri 10 August 2018

Agenda items to include:

- Safeguarding training (EL to arrange)  
*Brought forward items - updates on:*
- NHS Complaints Advocacy contract
- HWH tender feedback in writing
- Safeguarding policy (EL)
- Complaints policy and process (EL & RM)
- Challenging members of the public policy and process (EL)
- Southern Health case study (SM)
- Articles of Association
- Continuing Healthcare (discussion with SA)
- Vice chair appointment

**Further meeting dates:**

Fri 9 Nov 2018

Fri 8 Feb 2018

Fri 10 May 2018

Agreed & signed: .....C. Holloway.....Chair

Date: ....31/7/18.....

**HEALTHWATCH HAMPSHIRE RISK REGISTER (version 8)**  
**4 May 2018**

Probability and risk both measured on scale of 1 (lowest) to 5 (highest)

High/Red Risk 12 - 25

Medium/Amber Risk 6 - 11

Low/Green Risk 0 - 5

When last amended	Risk	Probability x Impact	Risk Score
2 February 2018	<b>Failure to win advocacy contract reduces capacity to provide information.</b>	3 x 4	12
<p><b><i>Mitigating action</i></b></p> <ul style="list-style-type: none"> <li>• Deliver current contract to specification with excellent performance.</li> <li>• Influence HCC so they understand the benefit of integrating low level advocacy in the community with a specialised service for complex cases.</li> <li>• Maintain good relationship with commissioner</li> <li>• Review plans in light of HCC priorities</li> <li>• Reflect HCC vocabulary in advocacy tender</li> <li>• Identify competitors to ensure we can outbid.</li> </ul>			

When last amended	Risk	Probability x Impact	Risk Score
2 Feb 2018	CIC deemed by the Information Commissioner to be in breach of the Data Protection legislation [including new regulations from May 2018]/ data is released inappropriately	2 x 5	10
<p><b><i>Mitigating action</i></b></p> <ul style="list-style-type: none"> <li>• Ensure delivery partners are compliant with existing and new data protection requirements (including GDPR), request regular updates to the Board</li> <li>• Ensure staff teams and Board have up to data protection training, including Citizens' Advice and Gateway staff</li> <li>• Ensure data protection is considered during volunteer induction, deployment and supervision.</li> </ul>			

**RISK RADAR (not high enough risk to be on register but need to keep an eye on in case the probability or impact increases)**

1. Client not safeguarded
2. Breaching H&S legislation
3. Breaching employment legislation
4. IT failure
5. Poor performance against targets
6. Break up of partnership and/or loss of supply chain delivery partners
7. Inappropriate risks reside with CIC rather than contractors
8. Loss (actual or perceived) of independence
9. Change in Government policy in relation to local Healthwatch impacts negatively on services or continuity of the Company
10. Not possible to deliver adequate quality service within contract value