

Minutes of the Board Meeting

- Date / time:** 14th December 2022, 5.00pm
- Venue:** Via Zoom
- Present:** Chair: Stewart Francis,
Non-Executive Directors: Philippa Brice (PB), Ellie Addison (EA), Chelsia Lake (CL), Chris Palmer (CP), Johnny Hebron (JH) and Laura Beer (LB).
CEO: Sandie Smith (SS)
Minute taker: Carole Rose
- Apologies:** Saqib Rehman

Introduction and apologies

1. SF welcomed all Directors, management team and members of the public to the meeting.
2. There was one apology for this meeting.

Declarations of interest

3. There were none declared relating to the agenda.

Minutes of the previous meeting

4. The minutes of meeting on 28th September 2022 were reviewed and the Board agreed that the minutes were a true and accurate record.

Action log

5. SS advised that the only action she had from the last meeting was to send part of the CEO report to Kit Connick at the ICS and this was well received.

Reappointment and appointment of Non-Executive Directors

6. SF referred to his paper and sought the approval of the Board for the reappointment of Frances Dewhurst and the appointment of Ann Green. He invited Frances to introduce herself to the Board.
7. FD has been in Cambridgeshire for the past 16 years working with Hearing Help as well as Healthwatch and Meridian as a social

prescriber. She completed one term as a NED and was involved in primary care and patient representation groups and is looking forward to working with Healthwatch again.

The Board approved the appointment of Frances Dewhurst and Ann Green.

Chair's report

8. SF introduced his report which he takes as read and raises one point which is to find a replacement for the CEO position. He is pleased to advise the board that five candidates will be attending for interview so he hopes to have good news for the Board soon.
9. SF thanked PB very much for her support and for acting in the Chair position during his recent absence.

The Board noted the Chair's report.

Review of Strategic Priorities

10. SS advised that this is the mid-term review of the 5 year strategy. The plan for the review has three elements as detailed in the paper. The analysis of data has been completed and was considered by the NEDs at a development session. As a result of that a priority has been added around streamlining the enquiry and complaints channels in health and social care. Complaints in particular are high currently so if we can add anything from the public perspective to streamline this process it would be welcomed.
11. The second part of the review was about brand awareness but there was limited feedback so this is difficult however the East of England region has got the highest awareness of all the regions and the biggest increase as well so this is very positive.
12. The third element is to carry out a stakeholder awareness survey to include individuals and organisational stakeholders. We have asked Healthwatch Lincolnshire to carry out this survey as they are independent of us but well sighted on all aspects. Work is underway to design the survey now and she hopes to have the results by April development session.
13. SF asked if we planned to continue the work to increase brand awareness as he is keen to explore other mechanisms to gauge

awareness, SS will be discussing this with our new comms manager to see if we can find a cost effective method.

Action: Mechanisms to measure brand awareness to remain on the agenda

Chief Executive's report

Ann Green (AG) joined the meeting at this point

14. SF welcomed AG to the meeting and advised her that the board have approved her appointment and invited her to introduce herself. AG has chaired the Parson Grove patient group and one of her passions is ensuring that the patient voice is heard. She has a background in the NHS as an HR director and was Chair of Jeans for Genes, she is vice-chair of the Light Project in Peterborough. She is now looking forward to working with Healthwatch.
15. SF thanked AG and introduced the CEO report which shows how much our organisation is doing.
16. SS took the report as read and she highlighted and updated the Board on a few of the points.
17. On page 1, point 2. SS is very pleased to have been granted this funding and we have been successful in appointing Karen Igho to this role to involve more local people and she will start with us in January. On point 3. CTJ is now attending the Health Alliance which is the VCS contribution to the developing ICS. We are working with the CAB to design a format for sharing data which we hope will combine the voluntary sector data, getting all this data from the community perspective will provide a huge opportunity.
18. SS confirmed that we now have funding for a North Health Champions project similar to that provided by the Health Champions in the South area and KI will be working on this.
19. SS thanked LB for contributing to the end of life information and resources which has been a great piece of work.
20. We are now tagging any feedback which has any element of hardship due cost of living crisis and the findings will be reported to the next Board meeting.

21. The newly added strategic priority is number 6 on page 2 and the Communications team has been really busy as ever. This is Angie's last meeting as she is moving on, SS thanked her for all her work and the data she regularly supplies for these meetings, we wish her all the best in her new role. SS welcomed Paul Gould who has a tough act to follow.
22. The engagement team have also been very busy and 2 pages of the report details this work. SS flagged the amount of feedback that we are getting from young people in the area since our team have been working with Universities and Colleges, these figures are very high when compared with the national average for this age group.
23. We will be receiving the early feedback from the Let's Talk campaign which is the ICS feedback survey. The ICS are very conscious that they need to prove that they are willing to act on the information from this survey.
24. We have worked with Healthwatch Croydon and Healthwatch Liverpool who have shared ideas regarding encouraging Volunteering and simplifying our recruitment process to reduce barriers and assist us to be more inclusive.
25. The top three things that we are hearing about has not changed and these remain of concern.
26. SS drew attention to the long list of Impacts and Influencing on pages 11 and 12, we use the Healthwatch England tracker for this data. There is also a growing list of projects which the teams are working on and these generate streams of income for us as well. We are careful to ensure that we have capacity to deliver and that we do not take on projects that are not within the Healthwatch brief, we are pleased that organisations are approaching us to do this work.
27. SS is working with the management team to figure out a handover plan for the new CEO and ensuring that there is backup for each line of work as she prepares for her retirement. She invited questions from the Board.
28. SF updated that he had attended the Peterborough Forum and is happy to say that they needed a bigger room as lots of people attended and participated in the meeting. He asked in relation to the Partnership Boards if there are plans for these to meet face to face now. SS responded that they are funded through a different contract

and we need to keep in line with the delivery that is required. The people attending these meetings have differing needs. GL conducted a review of the independent members 6 months ago and the overwhelming response was for the hybrid option although another review could be done in the Spring as we all return to normal following the pandemic. CTJ added that people are now realizing that it is good for them to get out and meet face to face although some work will need to be done particularly with the Learning Disabilities Board to enable this as it is one of the larger meetings.

29. CP commented that East Cambridgeshire appears to be a bit light on engagement and involvement and he wonders if our Comms team can focus on this area more. SS agreed that this is our lowest response area, this is where the further detailed data is useful for highlighting these disparities so that we can target our work better.
30. SF commented on the 28 active volunteers which is less than the figures pre-pandemic, he appreciates that lots of organisations are struggling to bring volunteers back but he would like to see clearer options for them and more variety of involvement to assist in this. SS responded that a key part in attracting volunteers is developing the representation role and she is hoping that with the new ICS role we will start stimulating that involvement.
31. FD commented that volunteering has significantly declined during the pandemic for various reasons and it seems to be just a small number of people who are involved in several volunteering roles themselves. She believes that we need a broader more diverse base and something to make it more attractive for a wider group of people to get involved rather than relying on recently retired people who have historically filled these roles.
32. JM commented that she has heard from our lottery funder that many projects are really struggling to recruit volunteers but we have a good rate of retention for our Health Champions who have specific projects and tasks to be involved in. The level of training and support they have had seems to be a significant factor in retaining them in the role. By extending this work into the North area we have the opportunity to recruit similar people from diverse backgrounds and the training will be available to any of the other volunteers to take them through every aspect of a project right through to evaluation and report writing.

33. SS suggested that we do a survey of all our volunteers to ask them what makes volunteering attractive and this may assist us with future plans.
34. CTJ updated that we will soon be renewing our Investors in Volunteering award and one of the requirements is a survey of the volunteers so this will be done and a question around attraction and retention could be included.

Action: SS to speak to Engagement Manager and Comms about targeting some work in the East Cambs area.

Action: to conduct a survey of all our volunteers, the findings to aid recruitment.

The Board noted the Chief Executive's report with thanks.

General Purposes Group (GPG) report

35. SF introduced the report which would normally be presented by SR but he was unable to attend the meeting. SF took the report as read and invited questions from the Board.
36. PB asked about the financial position and pointed out that the income figures are incorrect in the total. An action has been taken to recheck and reissue the paper. PB also asked if we have now received the full CCC grant and SS assured her that we have. SS advised that we have purchase order numbers now for next year so there should be no delay with this grant in 23/24.
37. The insurance amount has not yet been spent, PB asked when this is paid, CR advised that the insurance renewal date is 6th January. The training and wellbeing expenditure is higher than the budget so PB queried this, SS responded that the over expense was the part of the lottery contract that we subcontracted to a provider to deliver the Removing Barriers competency training, this extra amount is within the lottery budget so the ring fenced figures discussed at GPG have more details of this.
38. In future we will have more ring-fenced accounts so we will be meeting the new auditors with a view to having a better structure to report these. PB suggested a new row for sub-contractor or project expenses would be good rather than mixing this with staff training and wellbeing. Noted.

39. PB asked about the reserves figure and is this sufficient given that there was such a delay with our grant coming through and we had to draw on this amount. SS responded that our Reserves policy set out the amount as being four months operating costs and because we have expanded our staff base we will also need to amend our reserves so there will be an increased figure here.
40. CP commented it was fortunate that we had the reserves in an easy access account so we could assist cashflow with this, if it had been in a different sort of account we could have been in a different position. SF commented that this shows that our policy for reserves has served us very well this past year. We still forecast that there will be a slight surplus so we are on course.
41. SF advised that the GPG has reviewed the three policies, and to reassure the Board that the data protection and confidentiality policies have also been reviewed by our retained Data Protection adviser at Taproot.

Action: CR to recheck and reissue the financial paper

Action: CR to work with auditors on a new reporting structure

The Board approved the three policies and noted the report.

Any other business

42. SF confirmed that no questions had been submitted by the public in advance of the meeting.
43. JH asked about the Board appraisal process and when this would be progressing, SF advised there is no set date but he has attended training at HWE regarding different approaches so his intention to start the process in late January. He hopes that these discussions will feed into the Board evaluation day later in the year. No further questions were raised by the Board.
44. SF reminded everyone that Angie will be leaving Healthwatch soon and this is her last meeting, the Board thanked her for her contributions to Healthwatch as she has been here since the start and has done some remarkable things in this time. We have a very good reputation and a lot of that is down to the communications and Angie has been in charge of this for almost 10 years. AR thanked the Board and

is looking forward to taking all that she has learned to her new role with the Comms and Engagement team at Addenbrookes.

45. SF advised that now FD and AG have joined as NEDs this provides an opportunity for a slight reshuffle of Board responsibilities so he will be talking to various NEDs about this in the coming weeks. As the year end approaches SF acknowledged that it has been an extraordinarily challenging year for the people that we represent as well as for those working in the health and care sectors, SF knows that the situation will not change quickly and that makes our work even more important in 2023.
46. SF thanked everyone for attending and reminded them that the next meeting will be on 26th April.

Meeting closed at 18:27 hrs.

DRAFT