

Healthwatch Milton Keynes

Board of Trustee Meeting Minutes, 14th November 2017. Milton Keynes Business Centre, Milton Keynes, MK14 6GD

Attendees: Hilda Kirkwood (HK) (Chair), Marion Wale (MW) Mike Newton (MN), Anita Devi (AD), George Assibey (GA), Maxine Taffetani (MT)

Apologies: Jeff Maslen (JM)

PART 1

Agenda Item No.	Agenda Item	Action
1	<p>Opening Remarks</p> <p>Hilda Kirkwood Welcomed the trustees to the meeting.</p> <p>Hilda noted that as the Board of Trustee meetings are open to the public, the board scheduled the finance standing agenda item to a private session (part 2) as matters arising include sensitive information, not appropriate for public disclosure. HK noted that the public sessions are good practice for when someone wants to come along and listen. HK also acknowledged that it is a struggle only meeting on a two month basis and suggested perhaps the board need a less formal meeting in-between.</p>	<p>At Jan Board meeting agree what elements of the Part 2 meeting should be available in the public domain. (All Board)</p>
2	<p>Apologies</p> <p>Jeff Maslen is sick and apologies for his absence. Will not have an HSCC Chairperson update. Removed from agenda.</p>	
3	<p>Declaration of Interests</p> <p>None</p>	
4	<p>Adoption of Agenda</p> <p>All agreed.</p> <p>HK noted it was a very large agenda.</p>	
5	<p>Adoption of Minutes of Board of Trustees Meeting of 4th September 2017</p>	

	All agreed.	
6	<p>Matters Arising from Meeting 4th September 2017</p> <p>Health and Social Care Committee (HSCC) Standing Procedures: MT: Procedures need thoroughly rewriting, although there is an informal agreement to adopted them at HSCC in the interim. Will be signed off at HSCC in February. Will need to be signed off by board in March. Will be in place for April.</p> <p>Finance: HK: noted discussion is required on reserves policy. Agreed to discuss later in the agenda.</p> <p>Deputy Chair Elections for HSCC: MT: Alan and Denise Latner-McLaughlin are the two new appointed Deputy Chairs for HSCC.</p> <p>Discussion about Homelessness and Winter Night Shelter: AD: Recap on the winter night shelter (operating Dec-Feb), run by New Life Church. Mornings and evenings for homeless. In the day, it will be used for a range of things, can use the space for meetings, focus groups etc... Can utilise it for catching up with membership also. Ad will pass on Donna Elliott's contact details.</p> <p>Treasurer job role: To be discussed on main agenda.</p> <p>Trustee Induction: HK needs to set up an induction meeting with the trustees and MT needs to set up a meeting with Alan for George.</p>	<p>MT to pass contact details on to Tracy Keech (Deputy CEO)</p> <p>MT will ask Tracy Fenton (Admin Officer) to set meetings up.</p>
7	<p>CEO's Operational report</p> <p>Projects: MT gave an update to the Board on the Dentistry Project and Enter and View activity. MN noted that he was aware of issues around access to NHS check-ups and further charges for hygienist appointments. AD suggested that one outcome/action for Healthwatch could be to publish some standard questions to help patients navigate the system, allows the organisation to check what difference has information being available made, has an information toolkit helped, for example, as a way of adding value and impact to our work.</p> <p>MT gave an overview of recent discussion at the previous Patient Participation Group (PPG) network meeting and follow-up meeting with the CCG and Arden Gem personnel to address how the CCG can improve communications and patient engagement, particularly with regards to the PPGs.</p>	<p>MT to ask Tracy Fenton to send PPG dates to new board members</p>

	<p>The two new trustees were keen to learn more about the PPG network. AD mentioned an educational tool she has used previously, which she thought may be useful. It could be used as an exercise for the PPG network to undertake, to visualise some of the barriers they experience in communications.</p> <p>MN noted that only half of practices are being represented at PPGs. He stated that only a small number are successful at getting people engaged.</p> <p>MT noted that MK Clinical Commissioning Group (MKCCG) have circulated their commissioning intentions document. HK suggested this was circulated to the board.</p> <p>MT presented the GAANT chart that outlines project activity timelines. AD stated this was a useful tool for the board.</p> <p>Annual Event Debrief: MT presented the Annual Event debrief with the following recommendations that the event is no longer held in its current format. The board agreed the decision to not run the event again next year. MN: Stated that if Healthwatch wishes to run a comparable event, we will need a location and planning soon. There was a brief discussion about what other options for events there were, whether it should be passed on the HSCC. MW noted that the HSCC will need direction to run something. MT recommended that no pressure should be forced on agreeing an alternative immediately, and that future activities should be reviewed, in line with building of the new strategy and operational plans for 2018.</p> <p>Contract Performance: MT gave an overview of performance against our contract and discussed the challenge received from commissioner that our activities are focussing heavily on health, rather than social care. Requested more focus on social care. MT noted E&V on Care Homes is planned in for Q1 of 2018/19 and activity on Home 1st is imminent. There was a brief discussion on Healthwatch relationships and asserting/checking our independence. AD noted an academic paper on Healthwatch that she felt would be useful.</p> <p>HR Christmas annual leave for staff. MT presented a request that, for the reasons presented in the CEO report, that the Board allow the paid staff an additional 3 days leave to cover the Christmas period, not within their general entitlement. The Board agreed this proposal. MT thanked the Board.</p>	<p>AD to send MT links to the toolkit</p> <p>MT to circulate doc to the Board.</p> <p>AD to circulate Healthwatch paper</p>
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	<p>The CEO now has full access to the BreatheHR personnel management dashboard. Noted that the administration officer also required good access to the dashboard to manage information on the CEO's behalf. Board agreed.</p> <p>Information Governance Discussion on the pending General Data Protection Regulations update, launching in April 2018. MT noted in her report a few areas of potential concern.</p> <p>HK stated that she will be attending training for Chairpersons on the GDPR changes. There was a general discussion on some operational considerations. AD discussed a potential issue with the E&V report of Ward 17 and 18 which should be taken in to consideration.</p> <p>Insurance: Renewal review is underway.</p> <p>IT Survey MT presented the findings of the IT survey undertaken by staff, Trustees and HSCC committee members. MT noted that people have different hardware and software, and confidence in their skills with IT. MT recommended, as a minimum, all Trustees, Chair and Deputy chairs of HSCC use their allocated Healthwatch email address to communicate internally and externally. This is a standard, professional approach, if we want to be recognised as professionals. The Board agreed. MT stated this should be a phased approach, with a deadline, and support from Tracy Fenton to manage external mailing lists.</p>	
	<p>Risk Register</p> <p>MT presented risk register and recommendations for escalating risks. Mike Newton (in his capacity as temporary Treasurer) and Maxine Taffetani met to review finances and risk. MN recommended that the Board need to list risks associated with only Tracy Fenton being highly skilled in reconciling the accounts. MT to arrange a formal agreement with how Advalorem can help in adverse situations, or planned absence.</p> <p>MN and MT also recommended listing the risk to finance, with £865 outstanding in payments from Health and Social Care Annual Event.</p>	<p>MT to adjust risk register accordingly</p>
<p>9</p>	<p>Governance</p> <p>MT presented the Governance report which included:</p> <p>Annual Charity Commission return: Awaiting reconciliation of annual accounts from Advalorem. Expected early Dec.</p>	<p>Deadline for return 31.1.2018</p>

	<p>HMRC Access issues: MT exploring with Advalorem</p> <p>Schedule of Delegation: MT presented a Schedule of Delegation and recommended that the Board adopt, as good governance practice, to demonstrate how the Board of Trustees delegates its responsibilities to the HSCC and Operational team. MN: Noted that the Board Terms of Reference identifies a company secretary and both the ToR and the proposed Schedule of Delegation needs to clarify the roles of CEO and Company Secretary.</p> <p>One of the main features of the Schedule of Delegation is assigning trustees with specific areas of responsibility, to enable fast and effective decision making. Areas of responsibility as agreed: Marion Wale: HR Mike Newton: Finance (as temp treasurer) and IT George Assibey: Governance Anita Devi: Communications Jeff Maslen: HSCC</p> <p>There was a discussion where the Board agreed there should be a Deputy Chair appointed. Will discuss further with Jeff Maslen present, at the January Board meeting.</p> <p>AD noted that she had a good contact for a trustee development trainer and will forward the contact details to the Chair.</p> <p>Policies: MT outlined the schedule of policy creation and review. MN noted he would be able to support with Data Protection and Safeguarding. AD noted some useful information on the LGA website.</p>	AD
10	<p>HSCC Report from Chair of Health and Social Care Committee</p> <p>Jeff Maslen absent - no update. MT updated board on 1-1 meetings held with HSCC committee members.</p>	
11	<p>Strategic Planning for 2018/21</p> <p>MT had previously presented a document outlining an approach to building the strategy, and a timeline for strategic planning activity.</p> <p>MN discussed that he had looked into other Healthwatch strategies and found a ‘frightening’ level of detail.</p> <p>There was a general discussion about engaging with stakeholders and using our vision and mission as a guide.</p> <p>MT highlighted that engaging the staff and volunteers on reviewing Healthwatch values would support how all staff</p>	

	<p>and volunteers drive their work and activities with the strategy in mind.</p> <p>AD: Recommended a 2-tier strategy. MT is not too concerned about how many tiers, but that the HSCC needs the appropriate level of design and involvement in setting and working to activities.</p> <p>There was a general agreement that stakeholder analysis is unnecessary - there is strong clarity about stakeholders.</p> <p>It was agreed that the previous SWOT should be reviewed and that a PEST should be undertaken.</p>	<p>MT to arrange a ½ day away day. TF to arrange room at Advalorem for 18th December.</p>
12	<p>Treasurer Job Role Review</p> <p>Discussion about the edits to the terms of reference MT had made. Board agreed for these to be made and the Role Description to be adopted.</p> <p>MN noted that the risk register should reflect the lack of appropriately trained Treasurer.</p>	<p>MT to formalise and circulate</p>
14	<p>AOB</p>	
15	<p>Dates and Times of Future meetings</p> <p>9th January 2018</p>	<p>MT to ask Tracy Fenton to circulate invitations for schedule of meetings next year.</p>