

## Healthwatch Milton Keynes

**Board of Trustee Meeting Minutes, Tuesday 8<sup>th</sup> May 2018. Milton Keynes Business Centre, Milton Keynes, MK14 6GD**

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

**Apologies:** None

Agenda Item No.	Agenda Item	Action/Agreements
1	<p><b>Opening Remarks and apologies</b></p> <p><b>Apologies:</b> None. JM to leave meeting at 12.30pm.</p> <p>Hilda welcomed the board, and that everybody had a nice weekend. Hilda noted that there had been much in the way of work going on, with different Trustees advising on different work. HK noted AD's support to the CEO with the Business Plan.</p>	
2	<p><b>Declaration of Interests</b></p> <p>None</p>	
3	<p><b>Adoption of Agenda</b></p> <p>The agenda was approved. MN noted that the board would like to discuss the two members of staff that are leaving.</p>	
4	<p><b>Adoption of Minutes of Board of Trustees Meeting of 6<sup>th</sup> March 2018.</b></p> <p>It was noted that Jeff Maslen was present at the last meeting. Item 14 - need to delete "doesn't". MT apologised for the lateness of the minutes, which had caused accuracy issues. The board adopted the public meeting minutes. They were signed by Hilda Kirkwood.</p>	
5	<p><b>Matters Arising from Meeting 6<sup>th</sup> March 2018.</b></p> <p>Training and moving all trustees and HSCC members to Healthwatch emails and using Yammer as a point of contact and information is a big job. Prioritising other GDPR actions at first.</p>	

	<p>Bank changes: There are on-going issues with Metro Bank. The Board agreed that the CEO can explore other banking options and communicating to the bank that the organisation may need to other banking options if they are unable to resolve online banking and general support issues.</p> <p>The Board noted that there had been agreement to change the November board meeting date, so that MN could attend but the date hasn't changed.</p> <p>Hilda met with Andy Stockbridge and AD asked for an update. HK stated that she went through the position of the Board and organisation. Andy felt with the information provided that there was no further input to offer at this stage. MT is conducting the Community Action:MK Governance Assessment. The Board agreed that all actions taken in regards to governance should be in proportion to the size of the organisation. AD noted that Andy was very supportive, in terms of support with fundraising and this is something the Board should note.</p>	<p><b>MT to action</b></p> <p><b>MT to action</b></p>
<p><b>6</b></p>	<p><b>Partnership Boards</b></p> <p>MT briefed the Board on the proposal from MK Council that Healthwatch take over the management of the Partnership Boards for Older Persons, Dementia, Mental Health and Carers.</p> <p>JM clarified how he envisioned the Partnership Boards would be incorporated into Healthwatch MK's general work. JM asked for clarification around how MKC want constructive challenge and feedback from service users. MT responded about how Healthwatch would manage the raising of single issues through Terms of Reference and planned agendas, as well as the added value of Healthwatch being able to address single issues outside of Partnership Board meetings.</p> <p>AD asked if MKC would agree to do a joint press release on the Partnership Boards and queried about general communication to service users to promote the meetings.</p> <p>MN voiced concerns about finding appropriate Chairpeople for the meetings, and their skills in chairing the meetings will determine how successful the meetings will be. MN noted that he was cautious to go ahead today with a number of unanswered questions as to how the council will support the Boards.</p> <p>AD felt that with appropriate independent Chairs, we will have opportunity to have more strength.</p> <p>HK noted that Healthwatch MK needs to put efforts into making the Boards a success.</p>	<p><b>Mt to share breakdown costs of additional funds from MKC to cover Engagement Post</b></p>

	<p>AD stated that her instincts were to agree and move ahead. She queried what the MOU will state about what success looks like. She also discussed the importance of branding and how it will fit into our strategic objectives.</p> <p>HK finished the discussion stating that she has taken the time to consider the proposal and feels strongly about the need to risk manage the project appropriately and revisit at each Board of Trustee meeting.</p> <p>HK formally asked the Board to approve Milton Keynes Council’s proposal for Healthwatch Milton Keynes to manage and administrate the four Partnership Boards.</p> <p>Proposer and approver: Hilda Kirkwood Seconded: Jeff Maslen</p>	<p><b>MT to set up Task and Finish group to plan Partnership Boards. AD and MW to attend TAF group.</b></p>
<p><b>7</b></p>	<p><b>CEO report</b></p> <p>MT noted the highlights in terms of CEO and other activity highlights from the last two months.</p> <p>Relationships building highlights:</p> <ul style="list-style-type: none"> <li>• Met with CEO of GP Federation - The GP Federation vision aligns GP relationships in a way that could be advantageous to building a stronger PPG network.</li> <li>• Met with CEO of the Citizens Advice Bureau - keen to work closer and share information. Will set up quarterly meeting.</li> <li>• Holding regular meetings with CEO of Community Action MK - looking at a framework of how HWMK, CAMK and VCS representative could liaise to operate more strategically for residents of MK</li> <li>• Met with Connect Health, new Physiotherapy provider</li> <li>• Advising on MKCCG’s Engagement Strategy at the Patient Improvement and Equalities Reference Group</li> <li>• Attended spring networking event hosted by CAMK. Made connections with Peter Kingham at Q: Alliance and discussed reaching to LGBTQI community. Secured free leadership in VCS training for Deputy CEO</li> </ul> <p>Activity Highlights:</p> <ul style="list-style-type: none"> <li>• Workplan meetings held with Board/HSCC</li> <li>• Proposed work with CCG on Homeless ‘Right to Healthcare’ Cards</li> <li>• Met with NHSE Dentistry team to discuss local issue</li> <li>• Mapping and gap analysis for Youth Health and Justice</li> </ul> <p>MT gave a review of the end of year performance against</p>	

<p>the Grant Fund (core funding). They were happy with the progress made by HWMK in the last year but continue to stress more focus on Social Care in our activity is needed.</p> <p>MT advised that capacity in the operational team remains low. With the departure of both the Communications Officer and the Administration Officer (noted in the risk register) the ability for the remaining personnel to provide an effective Healthwatch is challenged. Mitigating actions are outlined in the risk register but some difficult decisions may need to be made in terms of some operational activities.</p> <p>Mt noted that one area of concern is the Health and Social Care Committee. The Chairperson is unable to currently undertake the role, and one of two deputies is away for a few months. The Board have not discussed, or taken a decision on how the Deputy Chair will report to the Board, or instructed the CEO to do so. With the Administrator leaving this means that all administration and management will fall to the CEO. MT proposed that until a solution is agreed about the functionality of the HSCC and its future, that meetings up to the Annual General Meeting are suspended. MT proposed a sub-meeting is held to discuss the strategic and operational need and requirements the Board have for the HSCC, outside of the duties performed by the CEO role, to remove duplication of roles and purpose.</p> <p>JM noted that when he came to HWMK, he was surprised to see a two-tier governance structure and questioned whether the organization and proportionately sustain two major bodies. JM noted support of MT's proposal and felt it a good opportunity to review.</p> <p>HK stated that it has occurred to her that the Board may be asking too much of a second tier, in terms of proportionality to the size of the organisation. MN noted the reasons for having two-tier structure when the orgnaistaion was set up, to provide a stage for discussions about health and social care matters.</p> <p>MT agreed but urged the Board to trust in the CEO and look toward reducing unnecessary duplication of the roles of the CEO and the HSCC. MT recommended to continue with election processes and all agreed that the HSCC can discuss its role in September, when new HSCC is in place.</p> <p>HK agreed to carry on with election processes.</p> <p>JM clarified that MT is proposing to cancel the HSCC meeting running up to the AGM. He noted the issue of keeping HSCC members engaged over summer. Once the elections have been held, the new HSCC will have the</p>	<p><b>MT to cancel HSCC meetngs and Jeff/Maxine to send out comms to HSCC</b></p>
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	<p>opportunity to say how it will run, and the duties it will have.</p> <p>The Board closed the discussion with a general discussion about providing valuable volunteer opportunities.</p> <p><b>IT</b> MT discussed current difficulties with IT, namely website and potential options for development.</p> <p><b>GDPR</b> MT presented the Data Protection Officer role description and set out the two decisions to be made at the Board. One, that there is sufficient guidance to assure the Board that a Trustee can be the DPO for Healthwatch Milton Keynes and two, that the role description is acceptable.</p> <p>MN stated that the DPO role description felt less proportional to the size of the organisation, and needed to focus on oversight only.</p> <p>Subject to changes to the DPO role description Mike Newton expressed interest in taking on the post of DPO, with agreement to review the needs of a DPO on an ongoing basis. AD seconded the proposal.</p>	<p><b>MT will provide update at next Board</b></p> <p><b>MT to revise DPO role description</b></p> <p><b>MT to set up meeting to discuss DPO additional training requirements</b></p>
8	<p><b>Business Plan</b></p> <p>MT introduced the HWMK 2018-21 Business Plan for approval by the Board. HK thanked AD for supporting MT to reflect on the Business Plan and set out some things clear.</p> <p>HK had a question about item 4 and item 10. The Board agreed to look at something more proportional than the example given of looking at options for pursuing 'Investors in People' accreditation.</p> <p>MN noted his concerns about the staff having too much to do, particularly in light of the issues with two staff leaving in May. He also felt that the grant core funding should be noted as a threat, as this will end in December 2019. After a brief discussion, the Board felt that the threat didn't need to be added, but the Board is aware of the funding situation over the next 18 months.</p> <p>JM stated that the Business Plan was good, but it needed to be underpinned by the workplan, which is formatted for what success looks like, and how to get there.</p> <p>MN felt that the Business Plan felt over-ambitious. He also felt that the workplan will need to reflect the focus on Social Care. JM stated that he feels the Council is correct in feeling we have a bias toward Health and to utilise Enter and View to uncover issues in Care Homes. AD noted that</p>	

	<p>the government are putting a lot in to Social Care, reflecting the national issues and recommended looking at Social Care Institute for Excellence.</p> <p>HK formally asked the Board to adopt the Business Plan 2018-21. JM agreed, MW seconded the proposal.</p> <p>JM left meeting at 12.35pm</p>	
<b>9</b>	<p><b>Finance</b></p> <p>MT presented the end of year management accounts up to end March 2018.</p> <p>GA noted that it would be preferable to use the word surplus, as opposed to profit in financial records.</p> <p>HK clarified whether the report includes all income and expenditure for the final quarter. MT confirmed the only outstanding payment was NHSE for Young Carers project.</p> <p>MT presented some guidance on Reserves policy, for the Board to discuss. The Board has a policy on accruing 3 months of reserves but this has met challenges from within the Board and a formal policy needs to be created, to provide clarity to the Board, and allow the CEO to manage reserves and organisational investment.</p> <p>AD noted HWMK should have its reserves physically separate from cash account.</p>	<p><b>MT will explore whether Xero reporting can do this</b></p> <p><b>MT to set up sub-group with GA and MN. Set dates from June 12th</b></p>
<b>10</b>	<b>Comfort Break</b>	
<b>11</b>	<p><b>Risk register</b></p> <p>MT noted that she had taken a full look at the Risk Register, and made significant updates but that the register does need some attention.</p> <p>Due to Partnership Board discussion over running, the Board noted the changes to the risk register and agreed to fully review at the next Board meeting.</p>	
<b>12</b>	<p><b>Governance</b></p> <p>MT met with MN to review the Healthwatch CIO constitution. There were reasons why the model constitution was speedily edited to enable the CIO to begin operating but there are a number of issues with formatting, flow and relevant and non-relevant content being edited (where advised in the template). The largest of issues is the Appendix, which outlines how a CIO could run its election processes. It is clear in the way that the template has been edited, that the appendix is</p>	

	<p>not an approved part of our constitution. If it is to be, the Board should take a decision on the approach and agree what to do, in terms of editing the Constitution moving forward.</p> <p>Due to the agenda over-running, this item will be revisited at the next Board meeting.</p>	
13	<p><b>Staff Retention Issues</b></p> <p>MT discussed with the Board, some key themes emerging from the exit interview of the Communications Officer and the resignation of the Administration Officer leaving. The Board agreed that the organisation faces a financial challenge, in terms of retaining staff and noted that some exploration should be done, in terms of contract terms and conditions. HK and MW agreed to pick this up.</p>	<p><b>HK and MW</b></p>
14	<p><b>Adult Safeguarding Board Annual Report</b></p> <p>MT presented the Milton Keynes Adult Safeguarding Board Annual Report for 2016-17. The Board are to make comment and approve. MT will collate feedback and formally respond to MK Together.</p> <p>HK noted that the report was very late, and the Board require such reports in good time so that they can take a full view of the relevance of the information. With the changes to the ASB and the MK Together team, HK is looking forward to being more involved.</p> <p>The Board approved the report.</p>	<p><b>MT to collate a response and send to MK Together</b></p>
15	<p><b>AOB</b></p> <p>AGM planning for 20<sup>th</sup> September. MT requested sub-group and trustees to support the event planning. MW and AD volunteered.</p>	<p><b>MT to set up AGM TAF group meeting</b></p>
16	<p><b>Dates and Times of Future Meetings</b>  Thursday 12<sup>th</sup> July 2018  12<sup>th</sup> September 2018</p> <p>Additional Board meeting on 11<sup>th</sup> October 2018 to meet and greet new Trustees, rather than wait until November.</p>	<p><b>TF to rebook all Board meetings</b></p>

