

# Healthwatch England Committee Meeting Held in PUBLIC

Online

**Minutes and Actions from the Meeting No. 34 - 9<sup>th</sup> March 2021**

## Attendees

- Sir Robert Francis - Chair (RF)
- Phil Huggon - Vice Chair and Committee Member (PH)
- Andrew McCulloch - Committee Member (AM)
- Lee Adams - Committee Member (LA)
- Helen Parker - Committee Member (HP)
- Andrew McCulloch - Committee Member (AM)
- Sir John Oldham - Committee Member (JO)
- Danielle Oum - Committee Member and Chair of Healthwatch Birmingham (DO)
- Amy Kroviak - Committee Member (AK)

## In Attendance

- Imelda Redmond - National Director (IR)
- Gavin Macgregor - Head of Network Development (GM)
- Chris McCann - Director of Communications, Insight and Campaigns (CM)
- Joanne Crossley - Head of Operations (JC)
- Felicia Hodge - Committee Administrator (minute taker) (FH)

Item	Introduction	Action
	The Chair opened the meeting.	
1.1	<p><b>Agenda Item 1.1 - Welcome and Apologies</b></p> <p>The Chair welcomed Committee members and other attendees. There were no apologies for absence. The Chair welcomed Francesca Micalizzi and Roberta Bottai from the Directorate for Citizenship Rights and Social Cohesion Service Quality Sector, who were observing the meeting from Tuscany, Italy.</p>	
1.2	<p><b>Agenda Item 1.2 - Declaration of Interests</b></p> <p>There were no declarations of interest.</p>	
1.3	<p><b>Agenda Item 1.3 - Minutes and actions from 9<sup>th</sup> December 2020 Committee Meeting</b></p> <p>The minutes from the meeting held 9<sup>th</sup> December 2020 were accepted without amendment.</p> <p><b>The action log was noted - <a href="#">action log</a></b></p> <p>IR reported that Item. 20191113-1.4 regarding how local Healthwatch deal with people treated far from their home and in closed environments continues to be suspended and we continue to liaise with CQC, but this work may not commence.</p> <p>The committee asked that the issue is kept in view to ensure that people get their voices heard.</p>	

<p>1.4</p>	<p><b>Agenda Item 1.4 - Chair's Report</b></p> <p>The Chair gave a verbal update in which he reported that we have seen an increase in the number of people accessing the information and services Healthwatch England (HWE) and Local Healthwatch (LHW) provide and highlighted some of these such as patients discharge from hospital, COVID 19, DNR, access to GPs and dentistry.</p> <p>He informed the committee that he had met with Jonathon Ashworth MP (Shadow Secretary of State for Health and Social Care) as a follow up to a letter that he had written about the White Paper and draw his attention to what people were telling us and to discuss Healthwatch's role in the Government White paper and ICS. He told that HWE was active in promoting a place for HWE and LHW in the new environment that the legislation will produce.</p> <p>The chair referred to the Assessment of NHS England (the NHS Commissioning Board) 2019 to 2020 report and the importance given to Healthwatch in the report. He also told of his interview on Radio 4 about dental care which appeared across news bulletins locally and nationally.</p> <p>The Chair mentioned that he remains proud to be the Chairman of Healthwatch England.</p> <p><b>The Committee noted the report.</b></p>	
<p>1.5</p>	<p><b>Agenda item 1.5 - National Director's Report</b></p> <p>IR presented the National Director's report updating the committee on some of the main activities that have been worked on since the meeting in December 2020 and asked the committee to note the report.</p> <p>IR reflected that it had been a year since the last face to face committee meeting and thanked the committee for their support and her staff team for making this the most successful year ever for Healthwatch, despite the challenges created by the COVID pandemic.</p> <p>IR reported that we continue to provide regular updates on what we are hearing on COVID-19 and that the focus has been on issues around inequalities which will be embedded in our strategy. She informed the committee that over the next year we will be looking at issues around racism and the seldom heard from voices and she gave an overview of some of the activities Healthwatch has been engaged in over the past quarter. The following activities and issues were highlighted:</p> <ul style="list-style-type: none"> <li>• The findings of a poll conducted around the vaccination rollout including confusion around information on how to obtain the vaccine and that Black people were more hesitant of transport needed to get to a vaccine centre, than having the vaccination. Research is ongoing to explore the reasons for other vaccine hesitancy in the Black, Caribbean, Black African, Bangladeshi and Pakistani communities.</li> <li>• The findings of the Rapid Hospital Discharge report have been shared with a series of stakeholders including MPs and peers and HWE are pleased to note the inclusion of "Discharge to Access" in the Government's white paper. Discussions with DHSC continues to ensure this element of the bill draws on our findings.</li> <li>• Support provided to NHSE and the Elective Care Task Force on how best to deal with the backlog of elective care and to consider inequalities and priorities when building back post pandemic.</li> <li>• In partnership with the Association of Directors of Adult Social Services (ADASS) and the Care and Support Alliance, raised concerns about the care homes guidance published in December 2020 with Matt Hancock, Secretary of State for Health and Social Care, and Helen Whately the Minister for Care.</li> <li>• The work with the committee and the network around our brand values</li> <li>• The Digital Transformation project of which 10 Local Healthwatch are piloting, with results expected in September 2021.</li> </ul> <p><b>The Committee noted the report was impressed by the work of Healthwatch in this fast-moving environment.</b></p>	
<p>1.6</p>	<p><b>Agenda Item 1.6 - Committee Members Update</b></p> <p>The Committee members had nothing to report.</p>	

1.7	<p><b>Agenda Item 1.7 - Reviewed Strategy</b></p> <p>IR sought approval from the committee for the record that the Chair and National Director had agreed sign-off of the Reviewed Strategy in January 2021. The formal document will be produced at the end of the month.</p> <p><b>The Committee approved the Reviewed Strategy.</b></p>	
1.8	<p><b><u>Agenda Item 1.8 (a) - Annual Plan &amp; KPIs 2021/22</u></b></p> <p>IR presented the draft business plan for 2021/22 which outlined the top line deliverables HWE aim to deliver in YR1 of our reviewed strategy. The committee were asked to approve the plan.</p> <p>IR explained the contents of each section of the document as follows:</p> <ol style="list-style-type: none"> <li>1. High level outcomes and KPIs against our strategy objectives</li> <li>2. What needs to be done to achieve the outcomes</li> <li>3. The budget</li> </ol> <p><b>Section 1</b> The committee asked for the KPIs under section 1 to be reviewed as they considered some to be milestones and other to be targets.</p> <p>IR explained that Q3 would see the result of the pilot and when a decision would be made if to press ahead with the investment in the following financial year.</p> <p>Regarding <b>Section 1, No 3</b>, whilst the committee understood the barriers in the first year around Black and Asian people, they considered this to be a target, rather than a KPI. They sought clarification of how HW intend to achieve this target. CM responded the focus of a network wide campaign had not yet been decided and the network will be involved in the design of the campaign. The committee saw an opportunity to strengthen Joy Beishon’s work in this area.</p> <p>Relating to <b>Section 1, No 4</b>, the committee suggested that given the changing landscape, a review of the process of who is defined as a stakeholder is needed to define the percentages and some adjustment to questions and gradings may be required.</p> <p><b>Section 1, No 5</b> was not considered to be a KPI by the committee, but a measure of other’s perceptions of how we are seen. They stated that a definition of milestones is relevant and asked for this to be reviewed.</p> <p><b>Section 2</b> <b>Objective 6, No 24</b> - IR confirmed that there will be a skills review of the committee members to identify the competencies we are trying to attract for committee member recruitment in the next financial year.</p> <p><b>Objective 6, No 25</b> - The committee requested the wording be changed from “<i>Will we reduce our management costs by at least 10%</i>” to “<b><i>We will reduce our management costs by at least 10%</i></b>”.</p> <p>The committee suggested that there is a need to focus on language throughout and when referring to equality, diversity and inclusion and the need for the rationale behind any changes in language.</p> <p><b>The Committee approved the plan.</b></p> <p><b><u>Agenda Item 1.8 (b) - Draft Budget 2021/2022</u></b></p> <p>IR presented the draft budget for 2021/22 for approval based on the following assumptions:</p> <ol style="list-style-type: none"> <li>1. That the end of year projected outturn for this year will be carried forward for next year.</li> <li>2. We are assuming a similar pattern of working in the coming year as this year, mostly working online, no face-to-face conference.</li> </ol>	

	<ol style="list-style-type: none"> <li>3. That we will have 14 desks at Stratford, but this may be too many and we are negotiating a reduction. Over-head costs will be reduced.</li> <li>4. That there will be a full complement of staff for the full year. This won't be the case, there is bound to be staff turnover during the year and so we will have additional funds to reallocate at a later date</li> <li>5. Staff pay rise @ 2.5%</li> <li>6. We will have a 2% cut to our budget</li> <li>7. That for the coming year we will double run our Computer contracts whilst we pilot the new ways of working</li> </ol> <p>IR explained the expenditure in detail and that there could be a change in grant expenditure. The Chair of the Audit, Finance and Risk sub-Committee (AFRSC) confirmed that they had scrutinised the budget and looked at the likely mitigations at a recent meeting and were happy to recommend it to the committee for approval.</p> <p>The committee questioned whether the proposed expenditure for staff travel and subsistence was enough. IR responded that it was unlikely that much travel will commence before Q3 and that there will probably be a reduction on pre-pandemic travel thereafter, but this will be kept under review and monies can be shifted if travel costs need to be re-forecasted.</p> <p>The committee noted that there may be a possibility of underspend in this year's budget and asked for an update on grant funding and any adjustments made since the AFRSC meeting. IR informed the committee that the agreed increase to the Digital transformation funding from £153K to £200k, was not yet reflected in the figures.</p> <p>IR confirmed that the current year's risk register had been reviewed by the sub-committee on Friday and it was recommended that the risk register and risk appetite that relates to the new year's strategy and business plan is reviewed at the next committee workshop.</p> <p><b>The Committee noted that Non-Pay would be flexible in the 1<sup>st</sup> quarter and approved the budget</b></p>	
1.9	<p><b>Agenda Item 1.9 Network Development Plan</b></p> <p>GM presented an early draft of the full support offer available to local Healthwatch to help them assess what help would best support them, how to access it and help HWE improve how we support them based on the needs identified by them, incorporating work relating to delivery of Healthwatch England's Strategy and Business Plan 2021-2022. The committee were asked to note the draft plan.</p> <p>GM explained that in developing the plan, we have listened to feedback from the network and that they require as much notice as possible to build activities into their plans and need to see the totality of the plan in order to see which areas of their organisation can benefit from our support. The approach we take with support is sometimes delivered by HWE but is more often by giving a small grant to an organisation such as local Healthwatch and drawing on their expertise to deliver it to the network. Examples are the secondment of Joy Beishon for the work around inequalities and Margaret Curtis on policies and processes. The support offer is based around the Quality Framework and what LHW have told us they want help with. The intention is for it to be published and be available to the network on the refreshed Healthwatch website. In order to engage in continual improvement, we will encourage the network to feedback on an ongoing basis and will formally obtain feedback through a satisfaction survey from the network in April.</p> <p>The committee thought that it was a well written report and a reflection of the great work that has been done and the position that Healthwatch is in and what we can offer. They suggested that this is an opportunity for specific asks from the network and the payback we would expect on our investment, i.e the sharing of data through our digital transformation investment. They asked how HWE felt about the progress made around the work and what areas needed addressing.</p> <p>GM responded that there was a clear sense of direction, but at different speeds. There is appetite around the effectiveness of the Quality Framework and impact but obtaining focus due to other pressures is an element of getting change for the future, particularly for smaller organisations. HWE doesn't yet have a full picture of where the network is on EDI, but this is being addressed. If HWE can show the difference we are making, it will make our case for support stronger, but this will depend on funding, commissioning and geographical locations. Healthwatch like the interaction with the committee and welcome it.</p>	

	<b>The committee noted the draft plan and offered their help in any way in support of the plan.</b>	
2.0	<p><b><u>Agenda Item 2.0 (a) - Equalities Diversity and Inclusion (EDI) Action report Q3</u></b></p> <p>CM presented the EDI report to the committee updating them on the activity on Equalities Diversity and Inclusion up to mid-February 2021. The committee were asked to note the report.</p> <p>CM stated that this work is the theme that runs throughout for all the work that we do and we continue to have burgeoning partnerships with organisations around the issue of race giving particular attention to NHS Observatory on Race, who have been receptive of our approach to them. CM highlighted the policy and influencing work that has taken place around inequalities and the work that has taken place around the vaccinations with the focus on attitudes and views shared by the Black, Asian and Ethnic Minority communities, which has been fed back to stakeholders including NHSE. As a result, NHSE are now capturing demographic data at vaccine centres.</p> <p>CM gave an overview of the work that is being done with the network to support them and ensure that they understand their duties relating to EDI. This included a series of workshops, action learning tools and focus groups to name but a few. He explained how the message is communicated to the network through the website, reports, information that can be translated by the user into 50 different languages and through campaigns. He informed the committee that an Equalities Impact Assessment is being used on all our projects and we are beginning to see where the gaps are due to the work that Joy Beishon is doing.</p> <p>The committee expressed concerns that the window of opportunity to be impactful in this area could run out, but CM assured them that this would not be the case as it is written into the workplan for the coming year that we are committed to make equality, diversity and inclusion front and foremost in everything we do and this will be on a permanent basis and Joy is helping to inform the course that we take.</p> <p>The committee requested greater understanding of the work being done around the lack of trust regarding the vaccine rollout and the contribution Healthwatch can make to it, particularly in terms of access. CM responded that HW are working with Traverse, who they worked in partnership with on the Dr Zoom campaign. 100 interviews with representative groups are being conducted to establish what the issues are. It is hoped that the results will be published within the next couple of months, but the work on vaccinations will continue to be monitored.</p> <p>Whilst the committee welcomed the focus on the work being undertaken, they were not assured by what was presented relating to HWE as an employer and wanted to see the outcomes. They did not feel that unconscious bias training would have any positive benefit.</p> <p><b>The committee noted the report.</b></p> <p><b><u>Agenda Item 2.0 (b) - Delivery and performance Report Q3/Q4 (Dec 20 - Feb 21)</u></b></p> <p>IR presented the Delivery and Performance Report summarising the delivery and performance against HWE Business Plan and KPIs as at the end of February (2021) for discussion by the committee. The report included the progress of HWE business plan activities for 2020/21, February highlights and what to expect at year end. The committee was asked to note the report.</p> <p><b>The committee noted the report without comment.</b></p>	
2.1	<p><b><u>Agenda Item 2.1 - Audit, Finance and Risk Sub Committee Meeting Minutes</u></b></p> <p>Referring to the minutes of the AFRSC meeting held on 5<sup>th</sup> March 2021, DO (Chair of HWE Audit, Finance &amp; Risk Sub-committee (AFRSC)) reported the following and asked the committee to note the minutes:</p> <ul style="list-style-type: none"> <li>• Chair's Action was taken between meetings for the digital contribution from CQC.</li> <li>• £75% of the 2020/21 budget had been spent, but there was a possible underspend of £130k of which it was agreed that £50k of this could be used to increase the digital spend.</li> </ul>	

	<ul style="list-style-type: none"> <li>• Draft budget for 2021/22 had been reviewed.</li> <li>• The risk review for the last quarter had been noted and they are looking forward to the new risk register where the total risk facing the organisation will be reviewed. The sub-committee had asked for the COVID Risk register to be integrated into the main risk register and the committee will be looking at risk appetite at the next workshop.</li> </ul> <p><b>The committee noted the minutes.</b></p>	
2.2	<p><b>Agenda Item 2.2 - Forward Plan</b></p> <p>The Chair presented the Forward Plan for the next 12 months containing the standard agenda items. The committee asked for the following items to be included:</p> <p>June - Impact of the Bill following the White paper  Sept - Digital Transformation progress</p> <p>The committee asked for the LHW presentation to be put back as the first item on the agenda so they can showcase some of the work that they do. The chair also asked IR to consider as part of the ND Report for one of her teams to be given the opportunity to showcase the work they do for Healthwatch England.</p> <p>IR agreed to include key milestones against the revised strategy and a look back on the current year.</p> <p><b>The committee noted the plan</b></p>	
	<p><b>AOB</b></p> <p>Please see agenda item 2.0(a) above.</p>	
	<p><b>Comments from the public</b></p> <p>There were no comments from the public.</p>	
	<p>The Chair thanked everyone for attending</p> <p>The chair closed the meeting at 15:50 pm.</p>	
	<p>Due to COVID-19 the next meeting will be held via Teams Meeting 9<sup>th</sup> June 2021. Further details to follow.</p>	