

Minutes of the Board Meeting

Date / time: 26th March 2025, 5.00pm
Venue: Via Zoom
Present: Acting Chair: Jonathan Jelley (JJ)
Non-Executive Directors: Frances Dewhurst (FD), Chris Palmer (CP), Laura Beer (LB), Ann Green (AG), Philippa Brice (PB) and Jess Slater (JS)
Apologies: Stewart Francis (SF), Saqib Rehman (SR), Johnny Hebron (JH) and Chelsia Lake (CL),
In Attendance: Carole Rose (CR) and Caroline Tyrrell-Jones (CTJ)

Introduction and apologies

1. JJ welcomed all Directors and staff to the meeting, there were four apologies. He confirmed that he is to continue in the role of acting Chair for a further two months as agreed by all members of the Board, JJ thanked everyone for their support.

Declarations of interest

2. There were no declarations of interest in regards to this meeting agenda.

Minutes of the previous meeting

3. The minutes of meeting on 29th January 2025 (attached) were agreed with one a correction to the wording of the timing of bank account renewals which are currently just one month apart. FD had suggested that this should be a period of six months in the future.
4. JJ asked for any matters arising from the minutes. AG referred to item 13 regarding NHS priorities and whether JJ has an opinion on how Healthwatch is viewed by other organisations. JJ expressed his view that Healthwatch is hugely respected within the system, he attributes this to JS and the team's hard work and engagement. From his work with the ICB JJ sees that Healthwatch is involved and seen as a partner. He emphasised the importance of maintaining a constructive and collaborative approach, especially during this time of stress and anxiety across the system. JJ has no concerns about our reputation but is mindful that our task is to challenge on behalf of patients and we seem to have struck the right balance.
5. JJ also highlighted the need for ongoing relationships with local authorities and suggested a more regular and proactive engagement to build stronger relationships. He referred to a recent meeting with Peterborough City Council which was very locally centred and had no consideration of any wider elements

which he found surprising since devolution had already been announced. JS commented that she understands the local stance but was pleased to have been able to respond to their query about engagement with a long list of events we had attended in Peterborough.

6. AG thanked JJ and JS for the update as this is important for NEDs to know, not just for the relationship with ICB but also with the local authorities as a general impression they have of Healthwatch. JJ confirmed that he and JS intend to have regular meetings throughout the contract to build on the relationship with these new commissioners.

Action – CR to amend January minutes

Action log

7. JJ thanked JS for reviewing the action log which is mostly completed. JS confirmed that the only outstanding action regarding hospital boards will be covered by the communications strategy at the next meeting.

Strategy 2025 - 2030

8. JJ introduced the strategy document which has been discussed at the board development session. The full document goes into detail of the five priorities and also has a one page version for ease.
9. JS confirmed that the strategy was developed through extensive stakeholder engagement and reflects the priorities and concerns of the community. The priorities also align with other organisations and the bigger picture even though this comes from the public and the engagement we have undertaken.
10. The Board expressed appreciation for the collaborative effort and the inclusion of patient feedback in the strategy. They agreed that it was well presented and pleased that it is a good balance between covering a range of things but not seeming to be impossible.
11. The strategy will serve as a guide for the organisation's activities and will be regularly reviewed and updated. The Board also discussed the importance of flexibility and responsiveness in adapting to changing circumstances and priorities. JS confirmed that although the focus is on mental health this year, other priorities are cross cutting such as joined up care so throughout all our work the five themes will be kept in mind so that we can pick up on things as they occur and adapt when needed.
12. JS commented that the strategy assists in giving a sense of direction and aligning our activities, such as aligning the summit to the priority and conducting focussed surveys.

Action – JS to send the printable strategy on one page to all NEDs

The Board approved the new 5-year strategy.

Acting Chair's report

13. JJ introduced his report (attached) and commented that the NHS England announcement was made at the time of writing the report. At a recent ICB meeting JJ noted that the ICB is under significant pressure to submit an updated operational plan to NHS England, focusing on finance, quality and operational performance, and some workforce issues. The plan aims for a break-even financial position in 2025-26, while also meeting all quality expectations, delivering productivity improvements, reducing agency costs. CP raised concerns about how individual trusts will achieve the required 20% reduction in corporate costs, particularly in mental health services, and whether the ICB will effectively monitor and enforce these reductions. JJ acknowledged the challenges and the need for more detailed planning at provider level for each individual Trust.
14. At the same time as working to improve the system there are also continuing reviews including the Dash Review and the 10 year plan and the ICB have been tasked with updating an operation plan within tighter parameters even before the NHS England announcement so they are under very real pressure.
15. CP raised concerns about the potential impact of the Dash report on Healthwatch's strategy. JS responded that the Chair of Healthwatch England, Louise Ansari, is on the Dash reporting Board representing the 153 Healthwatch and one scenario raised is that they could become the commissioners rather than funding being via local authorities and local Healthwatch's may reduce to match the 42 ICB areas or the activities may change or even cease to exist. Although JS is mindful of this but until we know for certain of any changes we should just carry on and continue to represent the patient voice.
16. JJ commented that as he represents Healthwatch on the ICB Board and it is a time of change and uncertainty, the offer of receiving a summary of the ICB papers which he is sent so the Non-Executive Directors can keep abreast of what is happening. PB suggested just the top 3-5 bullet points to note may be easier for JJ to achieve. All agreed this would be a good idea.
17. JS also discussed the possibility of changes to Healthwatch's activities or objectives, but emphasised the need to continue operations until more information is available. JS provided an update on some impact that the Learning Disability Partnership Board have achieved recently which would not have happened without their constant work we do to put the people first and not the finances.
18. JJ advised changes to his email address for conducting Healthwatch business and he will be reaching out to stakeholders in the system to meet Chair to Chair peers. JJ commented that the governments intent of reform to direct money to frontline services is something we would support and he will remain focussed on our mission and provide updates from ICB when they have the detail needed.

Action: JJ to send ICB summary or highlights to NEDs

The Board noted the Chair's report.

Chief Executive's report

19. JJ introduced the CEO report (attached) which she took the report as read and highlighted that she is concentrating on bringing out some of our impact within the reports.
20. JS provided an update on the organisation's activities and partnerships. She reported on closer collaboration with CQC inspectors including quarterly operational meetings. She also noted a shift in focus towards engaging more young people by asking the engagement team to spend 20% of their time on this.
21. FD and PB referenced the list of activities requested by Peterborough City Council and inquired whether additional funding would be made available to support this work, or if Healthwatch is expected to absorb these tasks within existing resources. JS explained that while some of the activities can be integrated into our ongoing schedule solely because they align with our own objectives this year, and we are currently able to accommodate a small amount of additional project work, our capacity is limited. As such, any further project requests, particularly from Cambridgeshire County Council, would need to be deferred until capacity allows. The project work requested would normally be funded separately and not provided from our core funding. The Board discussed the importance of maintaining our independence while also being responsive to the needs of individual commissioners, which has reinforced JS's view that Healthwatch England commissioning might offer a more balanced approach.
22. JS advised that the Dementia panel Peterborough City Council have requested will be set up and facilitated by us but there will be an elected Chair. The costs will be around venues, administration and minute taking mainly and we are expected to cover this within the current funding. JJ commented that in future he will remind commissioners that we are independent and they should be mindful of that and we need to be seen to be independent because people trust us for that. The local authority are commissioners of Healthwatch so we remain independent from Health.
23. CP raised concerns about potential burnout of staff due to increasing demand and pressures. JJ assured the Board of his willingness to have difficult conversations with stakeholders when necessary to protect the organisation's interests and staff well-being

No further questions were raised in relation to the CEOs report.

The Board noted the report and thanked JS.

General Purposes Group (GPG) report

24. JJ introduced the report from GPG held on 12th March which include the minutes of the meeting and the draft budget. AG commented on the new policies review process as being more useable and user friendly than before.
25. The board discussed the improved financial position giving a surplus and the proposed budget which includes additional spending on raising the

organisation's profile on radio adverts and supporting youth engagement initiatives while maintaining the reserves.

26. JS advised that a presentation that JH had done about the vaping project to the Involvement and Participation Network in Ely when he explained the process and the challenges, the presentation was very well received and there have been many good comments from it.
27. JJ discussed the addition of PB to the bank accounts and the process of sending forms to the board for approval. FD suggested that PB and she should get together to sign the forms instead of sending them through the mail.
28. AG raised the point that we don't have NED representation from the south of the county and we need local knowledge on the Board. CP emphasised the importance of recruiting the right people for the organisation, regardless of their location. JS agreed and suggested recruiting people based on their skills and on our own priorities.

The Board approved the budget for 2025/26

The Board approved PB as an additional signatory on the bank accounts.

The Board noted the report with thanks.

Any other business

29. JJ proposed that the next Board development session be moved from April to May to avoid purdah. He proposed a plan to invite a guest from CPFT to discuss mental health in addition to addressing board recruitment. CP suggested preparing specific questions for CPFT in advance of their presentation to ensure a productive discussion focused on mental health services
30. JJ advised that the annual summit has been booked for October 8th at the Delta Marriott Hotel in Huntingdon. A working group will be meeting shortly to begin the planning.

The Board agreed to move the development session to May instead.

Action: JS to send doodle poll for a date for the development session in May.

No questions had been submitted by the public in advance of the meeting.

JJ thanked everyone for attending and reminded them that the next Board meeting will be on 25th June.

Meeting closed at 18:27 hrs.