

# Healthwatch Wandsworth Governance Framework

## Introduction

1.1 The purpose of this document is to explain in more detail the basis for the arrangements the Wandsworth Care Alliance (WCA) has put in place for the governance and delivery of its responsibilities as the body corporate of Healthwatch Wandsworth (HWW), focusing on the HWW Committee and also referring to the other HWW forums.

1.2 The WCA Board will keep its arrangements under review and develop or adapt the Governance Framework as appropriate and in the light of experience.

## Healthwatch Wandsworth Committee (“The Committee”)

2.1 Wandsworth Borough Council has a duty under the Health and Social Care Act 2012 (the Act) to ensure there is a “Local Healthwatch” service to represent the views of users of health and social care within the Borough of Wandsworth. Following a competitive tender exercise, the Council has contracted with Wandsworth Care Alliance to provide the service which it has set out in a Specification statement. WCA is therefore the contracted party and, as set out in the Act, also the corporate body embodying the Local Healthwatch. This is known as Healthwatch Wandsworth.

2.2 Wandsworth Care Alliance (WCA) has developed arrangements for the governance and delivery of its responsibilities as Healthwatch Wandsworth (HWW). These responsibilities reflect the activities set out in section 221 (2) of The Local Government and Public Involvement in Health Act 2007, and include:

- promoting and supporting the involvement of local people in the commissioning, the provision and the scrutiny of local care services;
- enabling local people to monitor the commissioning and provision of local care services, standards of provision of local care services and whether and how local care services could and ought to be improved;
- obtaining the views of local people regarding their needs for, and experiences of, local care services - and importantly,
- making such views and reports and recommendations about how local care services could or ought to be improved known, to direct commissioners and providers of care services, and people responsible for managing or scrutinising local care services, and shared with Healthwatch England.
- providing advice and information about access to local care services so choices can be made about local care service;

- formulating views on the standard of provision and whether and how the local care services could and ought to be improved; and sharing these views with Healthwatch England;
- making recommendations to Healthwatch England to advise the Care Quality Commission to conduct special reviews or investigations (or, where the circumstances justify doing so, making such recommendations direct to the CCQ); and making recommendations to Healthwatch England to publish reports about particular issues;
- providing Healthwatch England with the intelligence and insight it needs to enable it to perform effectively.

2.3 As a Local Healthwatch, Healthwatch Wandsworth must produce a report in relation to its activities at the end of each financial year (section 227 of the 2007 Act). This must address such matters as the Secretary of State may direct and will include details of expenditure.

2.4 The Regulations<sup>1</sup> for Local Healthwatch state that each Local Healthwatch must have a procedure for making relevant decisions, including provisions as to who may make such decisions, provision for involving local lay persons or volunteers in such decisions and for dealing with breaches of the procedures.

2.5 WCA's arrangements are based around the establishment of the Healthwatch Wandsworth Committee ("the Committee") and a number of forums associated with it. Together, these arrangements provide for delivery of WCA's responsibilities for the overall governance and strategic direction of Healthwatch Wandsworth. The Committee will be both locally accountable and sufficiently robust for WCA to meet its corporate responsibilities and contractual duties and to act lawfully at all times. The Committee's role in decision-making for Healthwatch Wandsworth within the framework of the WCA's overall corporate responsibility is described further in the remainder of this document.

2.6 Healthwatch Wandsworth has developed decision-making criteria to guide its decisions and the use of the available resources, in the form of a policy (Decision Making) which is published on the HWW website.

2.7 WCA has a governing document and complies with statutory requirements as a registered charity, for example in respect of submitting its annual report and accounts, and with the legislation applicable to it as a charitable company and an employer. WCA has therefore developed and keeps under review a range of policies and procedures to provide a supportive and above all practical framework for staff covering, for example but not exclusively, Safeguarding, Data protection, Fair processing, Complaints, Whistle-blowing, Health and safety, measures to combat Fraud, business continuity and Equal Opportunities. All these WCA policies are incorporated in its Staff Handbook. The policies are relevant and apply appropriately to all those involved in and contributing to the delivery of HWW activities, including staff, WCA trustees and volunteers.

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<sup>1</sup> Regulation 40, The NHS Bodies and Local Authorities (Partnership Arrangements, Care Trusts, Public Health and Local Healthwatch) Regulations 2012

# Role and Responsibilities of the Healthwatch Wandsworth Committee

3.1 The role and responsibilities of the Committee are to:

- ensure that Healthwatch Wandsworth is able to achieve the aims and objectives set out in the Healthwatch Specification document under the contract between Wandsworth Borough Council and WCA - and thus meet the statutory responsibilities of a Local Healthwatch;
- recognise and contribute to the meeting of the relevant financial responsibilities of WCA, thus, to maintain assurance in the delivery and probity of HWW activities and to retain public confidence and trust in local Healthwatch and the WCA;
- maintain an assessment of the operational and strategic risks bearing on delivery of the HWW contract and of the appropriate mitigations, and advise WCA accordingly; and
- support the work of Healthwatch Wandsworth staff and volunteers by:
  - agreeing the priorities of HWW over the planning period, taking into account in their discussions the views of service users and local people and the views expressed in HWW forums including the Assembly;
  - agreeing operational objectives and workplans to deliver the priorities and making recommendations about the appropriate allocation of available resources proposed by the HWW manager;
  - considering possible additional funding and sources of funding;
  - taking into consideration feedback and intelligence from HW volunteers including representatives and the views of HWW's enter and view forum and the outreach team; and
  - monitoring performance and impact, on the basis of reports and other evidence from the HWW manager.

3.2 The Committee will maintain the independence of HWW's role and support the political neutrality of WCA at all times. In that way it will seek to act in the best interests of the residents of Wandsworth and to achieve balance in respect of any potential tensions or conflicts arising in the fulfilment of HWW's purpose and role.

3.3 Through its work, the Committee will keep itself informed by views of the Healthwatch Wandsworth membership, the Healthwatch Wandsworth Assembly and other HWW forums, and the wider voluntary sector in Wandsworth. Its work will thus give effect to the obligation to involve volunteers and lay people in HWW decisions on:

- how HWW's activities will be undertaken;
- which health and care services will be looked at as part of the activities;
- the resources allocated to activities;
- whether or not to seek information;
- whether to make a report or recommendation;
- which premises to enter and view and the timing;
- the referral of an issue to the Wandsworth Borough Council's Overview and Scrutiny Committee;
- reporting a matter to another person;
- the subcontracting of services.

3.4 WCA will give notice of HW Committee meetings, and those parts of the Committee meetings at which decisions on the issues set out in 2.3 above are to be discussed will be open to the public to observe and the relevant sections of the minutes published on the HWW website.

## **Constitution of the Healthwatch Wandsworth Committee**

4.1 The HWW Committee will consist of voting, and potentially some non-voting, members. There will be eight voting members made up of (i) four Healthwatch Wandsworth members elected by the HWW membership at a Healthwatch Wandsworth Assembly or otherwise co-opted and (ii) four WCA Trustees.

4.2 These will be the only voting participant members of the Committee. They provide for the Committee to remain accountable to the HWW membership, within the context of WCA being the legally accountable body corporate and responsible for ensuring that due processes and legal, corporate and contractual responsibilities are observed.

4.3 Elected HWW members of the Committee will serve a term of appointment of up to four years. A term may be varied, or it may be extended by up to one year, to facilitate succession planning.

4.4 A term of elected appointment will normally last until the Committee meeting following the election at which the member stood down, when the newly constituted Committee will meet.

4.5 A member may stand for re-election by the HWW Assembly for a second term. Following a second term, for a period of one year a member will not be eligible to stand again for election.

4.6 The Chair may invite other individuals to participate in one or more Committee meetings for a specific purpose (e.g. because of their particular knowledge, experience or skills). Such individuals will not have voting rights.

4.7 If a voting member leaves during the year, a replacement may be appointed (if the vacancy is for a WCA Trustee) or co-opted (if the vacancy is for a member elected by Healthwatch members). In the first case, the WCA Board will decide whom to appoint to the vacancy. In the second case, the decision whom to co-opt will be taken by the voting members and the appointment will last until the next election (at which point, he or she will be eligible to stand).

4.8 In exceptional circumstances, the voting members of the Committee may decide to co-opt additional member(s) for an agreed period, e.g. to ensure that the Committee is able to draw on individuals with particularly valuable skills or experience. Such co-optees will not have voting rights.

4.9 The appointment of the Chair of the Committee is a matter for the WCA Board. The Board may decide to advertise the appointment, or it may otherwise identify an exceptionally qualified candidate for the role. The expectation is that on appointment, the

Chair of the HWW Committee will (continue to) serve as a WCA Trustee or otherwise be appointed to the WCA Board.

4.10 The Chair will have the casting vote should the Committee be evenly divided in a formal vote.

4.11 The Committee will agree the appointment of a vice-Chair or vice-Chairs from among the Committee membership.

4.12 Committee meetings will be attended by the Chief Executive of WCA and the Healthwatch Wandsworth Manager or deputies nominated by them, as non-voting members.

## **Healthwatch Committee Meetings: Frequency and Attendance**

5.1 Committee members are expected to attend its scheduled meetings and to have familiarised themselves with the agenda and papers in advance of each meeting so as to be able to participate fully. A member who is unable to attend a particular meeting should send their apology to the Chair and the HWW manager in advance, together with any input into the business and comments on the papers they can provide. If a member misses two consecutive meetings without contacting the Chair to explain the circumstances, there will be a presumption that the member has resigned, and steps will be taken to replace them.

5.2 The Committee will be expected to meet no less than five times a year. The Chair may call additional meetings.

5.3 Committee Quorum: in addition to the Chair (or vice-Chair) there must be four voting Committee members present: two WCA Trustees and two elected (or co-opted, pending election) members. If there was an uneven attendance and the need for a vote, the Chair would decide on the procedure.

5.4 Meetings of the HWW Committee will normally be held in public, with the minutes published on the website.

5.5 Notice of the time and place of Committee meetings to be held in public will be advertised on the website; as will the agenda. Members of the public intending to be present at the meeting will be invited to let the organiser know, to facilitate the practical arrangements.

5.6 The Committee may hold other meetings not in public. Sub-committee meetings will not be in public.

## **Duties of Healthwatch Committee Members**

6.1 Members of the Committee will meet the highest ethical and governance standards, as embodied in the ‘Seven Principles of Public Life’ and associated guidance.

6.2 The main duties of Committee members will be to:

- contribute actively to the Committee’s role in providing strategic direction to Healthwatch Wandsworth within the framework of WCA’s corporate responsibility, including:
  - formulating overall policy,
  - defining strategic objectives and evaluating performance,
  - assessing risks and proposing mitigation, and
  - monitoring performance and impact against agreed targets and delivery of the statutory responsibilities of a Local Healthwatch.
- Support HWW staff and volunteers, participating in HWW business with them.
- safeguard the good name and values of Healthwatch and to act as Healthwatch ambassadors.
- support the effective and efficient management, processes and administration of HWW and its forums, including participating in them.
- act at all times to maintain the financial stability of Healthwatch.
- use specific skills, knowledge or experience to help the Committee to reach sound decisions. This will involve, variously:
  - Scrutinising board papers.
  - Contributing to and leading discussions.
  - Focusing on key issues.
  - Providing guidance on new initiatives.
  - Participating in working groups.
  - Evaluating initiatives.
  - maintain confidentiality about any sensitive information received in the course of their responsibilities and
  - to comply with WCA policies.

## **Committee Relationships and Accountability**

7.1 WCA is accountable to Wandsworth Borough Council for meeting the terms and conditions of its Healthwatch contract.

7.2 As a part of the arrangements made by WCA as the contractor and corporate body of HWW, the Committee has an accountability to the community of Wandsworth, including:

- local service users and carers
- the Healthwatch Assembly and membership
- the wider voluntary sector in the Borough
- those living and working in the Borough.

7.3 The Committee will take account of requirements, guidance or advice from Healthwatch England.

7.4 The Committee will encourage the development of productive relationships with a range of statutory (NHS and Local Authority) and voluntary organisations in the Borough.

7.5 The Committee Chair as a member of the WCA Board, see 4.9 above, will keep Board colleagues informed and consulted about Healthwatch Wandsworth and the work of the HWW Committee and seek endorsement of decisions as appropriate.

The minutes of the HWW Committee will be included in papers for the WCA Board.

## **Healthwatch Wandsworth forums and volunteer groups**

### **Healthwatch Wandsworth Assembly**

#### Introduction

8.1 The development and business of an active and influential Healthwatch Wandsworth Assembly (HWWA) is a key responsibility of the HWW Committee. The Committee's aim will be for participation in Assembly meetings to be widely representative of the local community within the Healthwatch remit, and to engage key stakeholder groups and organisations as well as individuals from across the Borough demographic.

8.2 The Committee will take into account the views of the HW Assembly when setting its strategic priorities and work plans.

8.3 The aims of having the Assembly include providing the opportunity for:

- Health and social care decision-makers to inform and hear views of local people on important issues and topics or changes to services;
- Local people to hear from and speak to decision-makers;
- Information to be shared to help people find support and make decisions about their care;
- People's views on services and any improvements they think are needed to be shared;
- Letting people know about HWW's work and make their input into dialogue on what HWW's priorities should be.

### **How the Healthwatch Assembly fits into Healthwatch Wandsworth governance**

9.1 The Assembly exists as the main forum for HWW members and other stakeholders to convene at scale. As such it is a foundation of the governance structure and it is the forum where HWW members elect those to serve on the Healthwatch Wandsworth Committee. The Assembly does not make formal decisions, but it has a role in informing and facilitating decision-making.

9.2 The Assembly is open to members and the public and convenes quarterly. It serves as an information sharing and discussion forum, providing

- a direct interface between HWW members, the general public and health and care partners;
- the opportunity for an information exchange and networking focused on the work of HWW and developments within the local health economy;
- facilitated discussions to gather grassroots feed-in, feedback and points of view on relevant and topical issues.
- scope to review and express views about the priorities for HWW activities and major issues of concern.

9.3 The Assembly takes the form of a public meeting chaired by the HW Committee Chair (though this may be delegated as required) and facilitated by HWW staff team, Committee members and volunteers. All its meetings are held in public and details of the date, time and location of each meeting are published in advance on the HWW website and displayed at its office.

## **HWW representatives**

10.1 The purpose and role of HWW representatives is to represent Healthwatch Wandsworth on specified committees, boards and working groups hosted by another organisation, to make sure the collective voice of local people is heard and that their needs and interests are considered.

10.2 HWW representatives are accountable for making a written meeting report to the HWW Manager and for reporting also to the HWW Representatives meeting, either through their written report or in person.

10.3 Each HWW representative must be an HWW member. The expectation is that they are Wandsworth residents, but exceptions are made, for example for those working in the borough. Representatives should have an interest in health and social care and some experience of using services. However, the experiences and views they express as representatives at meetings must be based on HWW knowledge and a perspective of collective public views, and not solely on personal experiences or opinions.

10.4 HWW representatives carry out their role by:

- familiarising themselves with issues about the delivery and quality and transparency of local health and social care services;
- sharing HWW's understanding of the experiences of local people and intelligence about local health and social care services and the improvements needed;
- feeding back important relevant information to Healthwatch Wandsworth staff and volunteers;
- promoting the work of HWW and building up awareness of how more people can get involved.

10.5 The responsibilities and functions of HWW representatives attending meetings of other organisations are to:

- record relevant information during the meeting in order to be able to feed back a useful summary of the information, issues and outcomes;
- represent the knowledge Healthwatch Wandsworth has gained about the views of local people and their experiences: to present the voice of local people and encourage commissioners and providers of services to address issues of concern.
- support or promote quality improvement and engagement activities of other organisations, making sure local people's priorities and concerns have been considered or highlighting when it is important to hear what local people think.
- share information about Healthwatch Wandsworth's work, including encouraging people to sign up as a member and take part in HWW surveys; and to
- provide a report to the Healthwatch Manager (copying in relevant staff or fellow volunteers who might also need the information) which
- records the attendance at the meeting;
- highlights any information that HWW may need to act on or investigate further;
- highlights any important information about a health or social care service or how it is commissioned.

10.6 HWW representatives should attend (or provide a written highlights report to) the HWW representatives team meeting, scheduled five times each year to:

- share intelligence and information;
- keep up to date with health and social care issues as shared by HWW and other representatives;
- hear about HWW work, including current priorities and the activities and allocation of resources to deliver them and progress towards goals; and
- help inform the HWW Committee about important issues - and thus in turn help steer the work of HWW.

## HWW Enter and View Team

11.1 Local Healthwatch has a statutory power to enter and view any premises where health or social care services are delivered (with the exception of premises providing social care to children). This “Enter and View” power provides the opportunity for authorised HWW representatives to:

- go into health and social care premises to hear and see how the service user experiences the service;
- collect the views of service users (patients and residents) at the point of service delivery;
- collect the views of carers and relatives of service users
- observe the nature and quality of services
- collate evidence-based feedback;
- report to providers, the CQC, the local authority and NHS commissioners and quality assurers, Healthwatch England and any other relevant partners;
- develop insights and recommendations across multiple visits to inform strategic decision-making at local and national levels.

It follows that the Enter and View activity provides a significant resource to inform HWW prioritisation and planning.

11.2 HWW has a core Enter and View team which is made up of volunteers with a well-based commitment to HWW.

11.3 Each HWW Enter and View volunteer receives formal training and undergoes criminal records checks to allow them to enter premises.

11.4 HWW Enter and View volunteers are responsible to the Healthwatch Manager who chairs an Enter and View team meeting quarterly and ensures that proposals for visits are guided by HWW’s priorities and discussed by the team. The HWW manager reports the team discussion to the HWW Committee for endorsement and decision. The process of deciding on services to be the subject of Enter and View visits and a report is thus a dialogue within HWW.

11.5 The HWW Enter and View team produces a formal report of each visit on behalf of HWW. Each report is the product of consultative discussions within HWW and with the managers responsible for commissioning and delivering the services visited. This is an important element in how HWW operates. HWW’s Enter and View reports are normally sent to the Overview and Scrutiny Committee and to Healthwatch England and published on the website.

11.6 In common with other HWW forums, the Enter and View team meeting provides the opportunity to be updated on HWW work, including current priorities and the activities and allocation of resources to deliver them and progress towards goals - as well as contributing to the development of HWW strategy.

## **HWW Outreach team**

12. HWW staff and volunteers undertake a range of outreach activities to support HWW priorities and as coordinated by the Healthwatch Manager. Meetings, feedback and review are integral to the processes.

## **Voluntary sector meetings/Voluntary Sector Coordination Service**

13. HWW will hold quarterly liaison meetings with voluntary sector organisations to share intelligence; and discuss issues faced by the groups the organisations work with, their priorities and work plans. These meetings provide opportunities for networking, sharing of resources and mutual learning.

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