

MINUTES

Meeting:	HWCB Board Meeting in Public
Date:	9 th September 2025
Time:	18.00 to 19.30
Venue:	The Warrenfield Room, The Rufus Centre, Flitwick, MK45 1AH

ATTENDEES:

First Name	Surname	Initials	Role
Diana	Blackmun	DB	CEO
Louise	Cole	LC	Director
Linda	Grant	LG	Director
Mandy	Haslam	MH	Director
Gill	Hiscox	GH	Chair, Director
Alan	Jackson	AJ	Director
Alison	Newnham	AN	Director
Joanna	Zaworska	JZ	Minute Taker

APOLOGIES:

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Also present:

- **Guest Speaker – Felicity Costello, VoiceAbility** – Provided an update on the new advocacy provision, outlining how VoiceAbility supports individuals to be heard, ensures their rights are upheld, and enables access to appropriate health and social care services.

	ITEM	ACTION
1.	Welcome and apologies	
	<ul style="list-style-type: none"> ▪ Meeting started at 6pm ▪ No apologies received 	
2.	Matters Arising	
	Matters arising <ul style="list-style-type: none"> ▪ None 	
3.	Mins of previous Board Meeting in public – 10.09.2024	
	<ul style="list-style-type: none"> ▪ All actions identified from the minutes were completed. 	
4.	<ul style="list-style-type: none"> ▪ Guest Speaker: Felicity Costello - VoiceAbility – Provided an update on the new advocacy provision, outlining how VoiceAbility enables individuals to be heard, safeguards their rights, and supports access to appropriate health and social care services. The presentation highlighted opportunities for closer collaboration with HWCB, ensuring that local insights on patient and carer experience can inform and strengthen advocacy delivery. 	
	<p>Felicity added the following:</p> <p>Mission & Reach:</p> <ul style="list-style-type: none"> ▪ Supporting people to be heard in decisions about health, care and wellbeing for over 40 years. ▪ Working with more than 30,000 people annually in local communities. ▪ influence national policy to ensure people’s voices are recognised. <p>Core Principles:</p>	

	<ul style="list-style-type: none"> ▪ Everyone, regardless of situation, illness, or disability, has the right to: <ul style="list-style-type: none"> ▪ Be heard and respected. ▪ Have choice, control, and freedom. ▪ Be safe from violence, discrimination, harm, or abuse. <p>Who is supported:</p> <ul style="list-style-type: none"> ▪ Adults with learning difficulties. ▪ Older people. ▪ People experiencing mental health challenges, including those detained under the Mental Health Act. ▪ Individuals with substantial communication difficulties or lacking capacity. <p>Role of an Advocate:</p> <ul style="list-style-type: none"> ▪ Support individuals to express views and wishes. ▪ Provide information to help them make informed choices. ▪ Speak to professionals on their behalf when requested. ▪ Enable self-advocacy wherever possible. <p>Advocacy is not:</p> <ul style="list-style-type: none"> ▪ A replacement for services. ▪ Counselling or befriending. ▪ Decision-making about people’s care or treatment. ▪ Financial or form-filling support. ▪ Mediation. <p>Types of Advocacy:</p> <ul style="list-style-type: none"> ▪ Instructed Advocacy: User-led, based on the client’s consent and instruction. ▪ Non-instructed Advocacy: For people lacking capacity; ensures rights are upheld and fair treatment considered. ▪ Statutory Advocacy: Legal entitlement under the Mental Capacity Act, Care Act, or Mental Health Act (IMCA, IMHA, Care Act Advocacy, RPRs). 	
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	<ul style="list-style-type: none"> ▪ Non-statutory Advocacy: Short-term, issue-based support to promote self-advocacy. ▪ NHS Advocacy: Support for making complaints about NHS treatment or care. <p>Access to Support:</p> <ul style="list-style-type: none"> ▪ Via helpline (0300 303 1666, helpline@voiceability.org). ▪ Online resources and downloadable guides. ▪ Referral by professionals, self-referral, or family members. 	
	<p>Q & A:</p> <ul style="list-style-type: none"> ▪ LG: Commended the website, but noted people with mental health issues often need help with practical issues like covering gas or electricity bills. <ul style="list-style-type: none"> ○ Felicity: Will provide clarification and send a follow-up response to JZ. ▪ DB: Asked whether advocates are employed or volunteers, and what is meant by “general advocacy.” <ul style="list-style-type: none"> ○ Felicity: Advocates are employed; general advocacy supports people with additional needs to understand options and make decisions when facing challenges. It applies to those accessing adult care or mental health services but not eligible for statutory advocacy. The helpline is the main referral route. ▪ LC: Asked who typically refers clients. <ul style="list-style-type: none"> ○ Felicity: Primarily local authorities, but also self-referrals and family. ▪ LG: Reiterated query about the classification of general advocacy. <ul style="list-style-type: none"> ○ Felicity: Confirmed it is broad, covering support for people with additional needs who require help to navigate services. 	

	<ul style="list-style-type: none"> ▪ MH: Asked about the most common reason for referrals. <ul style="list-style-type: none"> ○ Felicity: General advocacy relating to capacity. ▪ DB: Asked about referral numbers. <ul style="list-style-type: none"> ○ Felicity: Did not have exact figures but will provide follow-up. ▪ LG: Asked about the most common referral sources. <ul style="list-style-type: none"> ○ Felicity: PALS, general public, and family members. ▪ DB: Asked about Felicity’s tenure at VoiceAbility. <ul style="list-style-type: none"> ○ Felicity: Confirmed she has been in post for six weeks. 	
<p>5.</p>	<p>CEO Update inc. activities</p>	
	<p>DB highlighted key items from the report:</p> <p>Staffing Update</p> <ul style="list-style-type: none"> ▪ The Project Lead (fixed-term until March 2026) resigned effective 05.08.25, having secured a permanent post with a GP practice. This role will not be replaced as it was time-limited. ▪ The Youth Engagement Officer left at end of September 2025 to take up a political role with her local MP. A former Youth Engagement volunteer, Ellie, has been appointed on a 12-month fixed-term basis to ensure continuity and started today. <p>System and Structural Changes</p> <ul style="list-style-type: none"> ▪ Government directives require ICBs to reduce running costs by 50% by the end of 2025. This has triggered major restructuring across BLMK ICB, which is merging with Hertfordshire & West Essex and Cambridgeshire & Peterborough to form Central East ICB – the largest in England. ▪ Senior management has already been reduced from 49 to 19 posts, though names have not been confirmed. 	

	<ul style="list-style-type: none"> ▪ Concerns were raised about the lack of bounce-back emails when staff leave. Members agreed it would be useful if automatic replies included updated contact information. ▪ DB to raise the issue with ICB regarding bounce-back communication when staff are made redundant or leave. ACTION DB <p>National Healthwatch Developments</p> <ul style="list-style-type: none"> ▪ There is concern regarding the centralisation of patient feedback and the potential impact on Healthwatch independence. ▪ An open letter signed by 131 local Healthwatch (representing ~86% of the network) has been sent to NHS England opposing this centralisation. ▪ Discussion took place about the appointment of the CEO of Healthwatch England as an NHS Executive Director, and uncertainty remains about how this aligns with the abolition of NHS England and changes to Healthwatch structures. <p>Future Projects & Events</p> <ul style="list-style-type: none"> ▪ Men’s Health Event (early 2026): Planned in collaboration with the Mayor of Ampt Hill and local Men’s Talk group. Funding is not yet confirmed; project viability remains uncertain. ▪ Just Ask Programme: Final event held in September 2025 was well received. VB will compile a final report including all six events. ▪ Veterans Report: Published with input from AJ. Recommendations are under discussion with CBC, BLMK ICB, and Public Health. <p>Community Partnership Boards (CPGs)</p> <ul style="list-style-type: none"> ▪ HWCB continues to lead on the Carers, Autism, and Learning Disabilities CPGs on behalf of CBC. <p>Dates confirmed:</p> <ul style="list-style-type: none"> ▪ Carers – 29.10.25 ▪ Autism – 05.11.25 	
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	<ul style="list-style-type: none"> ▪ Learning Disabilities – 12.11.25 <p>Venue: Rufus Centre. Times to be confirmed.</p> <ul style="list-style-type: none"> ▪ Aim is to strengthen co-production, embed lived experience, and drive service improvements. Promotion will be coordinated through CBC, Healthwatch, VCSE partners, and community networks. ▪ Flyers and promotional materials are being prepared. ▪ Distribute flyers to GP surgeries and local venues in Leighton Buzzard. ACTION AJ ▪ Circulate promotional messages via surgery text messages. LG to ask LC to send texts from Priory Gardens Surgery. ACTION LG ▪ Discussion noted delays in responses from Autism Bedfordshire regarding timings; interim plan is to maintain original schedule. <p>Festival of Older People (FOP)</p> <ul style="list-style-type: none"> ▪ Scheduled for 3 October 2025. VB leading on organisation with DB’s support. Everyone was encouraged to attend and promote the event. <p>ACTION ALL</p>	<p style="text-align: center;">AJ</p> <p style="text-align: center;">LG</p> <p style="text-align: center;">ALL</p>
6.	Young HW Update inc. activities	
	<p>DB highlighted key items from the report:</p> <ul style="list-style-type: none"> ▪ DB advised that AB is currently on annual leave and will return next week to ensure Ellie, the newly appointed Youth Engagement Officer, is fully briefed on projects. ▪ Ellie’s main initial responsibility will be the Dogs on Duty Project. ▪ Dogs on Duty Project - HWCB has engaged with Healthwatch North Yorkshire to learn from their Dogs on Duty campaign. ▪ Opportunities for shared awareness work were identified. 	

	<ul style="list-style-type: none"> ▪ HWCB will deliver its own Dogs on Duty campaign on 22 September 2025 in Leighton Buzzard. 	
7.	Financial Update	
	<ul style="list-style-type: none"> ▪ HWCB F&GP Committee – The F&GP Committee continues to meet regularly in person to oversee financial planning and governance. To strengthen the committee’s expertise, Director Mandy Haslam has been invited to join, bringing valuable financial experience and strategic insight to the group. ▪ Accounts – both main and reserve account within budget. ▪ No issues raised 	
8.	Director Update	
	<ul style="list-style-type: none"> ▪ MH: No update. ▪ AN: No update ▪ AJ: Provided an update on his role in dementia service assessments: Significant provider interest (10 companies applied; 6 already excluded). Decision on contracts expected by late September. ▪ LC: Queried whether HWCB will engage as a Central Bedfordshire presence or across all neighbourhoods. Highlighted that new neighbourhood structures are emerging, similar to Primary Care Networks (PCNs). Raised the question of how HWCB should engage with these neighbourhoods, as they will hold increasing influence over contracts and service delivery ▪ LG: Requested clarification on who the PLACE Officer is, noting ongoing confusion about roles and accountability within the new system. <p>Discussion:</p>	

	<p>Members agreed HWCB needs to ensure visibility and involvement in neighbourhood-level planning, as contracts and funding are likely to be directed there. Concerns were expressed that large organisations may dominate, potentially diverting resources away from primary care.</p> <p>DB Confirmed she attends relevant meetings and will prepare a briefing note with a bullet-point summary of:</p> <ul style="list-style-type: none"> ○ Current PLACE and neighbourhood structures. ○ Key contacts. ○ Healthwatch involvement opportunities. <p>ACTION DB</p>	DB
9.	Any Other Business	
	<ul style="list-style-type: none"> ▪ DB reported that the updated GP Patient Charter now signposts patients to local Healthwatch. Concern was raised that visibility may be limited as the link only appears on practice websites, not within full publications. ▪ Board Members discussed the need for a standardised message to encourage consistent visibility across all practices. ▪ Suggested approach: draft a template message for practices to copy onto their websites, followed by a later review to check compliance. <p>National News: DB updated the Board on developments relating to Healthwatch:</p> <ul style="list-style-type: none"> ▪ HW Eng CEO, Louise Ansari appointed as Non-Executive Director at NHS England. <ul style="list-style-type: none"> ○ No new primary legislation will be introduced until at least 2026 (no King’s Speech planned before then). ○ An Early Day Motion has been submitted calling on the government to halt plans to 	

	<p>abolish local Healthwatch. MPs have also been asked to sign supporting motions.</p> <ul style="list-style-type: none"> ○ A written ministerial response stated that an impact assessment will only be published when legislation is introduced, leaving timescales unclear. ○ Likely timeframe for legislation is October 2026 at the earliest. <p>Companies House Filings: DB reminded Directors that all must register for Companies House access (via GOV.UK) to complete digital ID verification.</p> <ul style="list-style-type: none"> ▪ This is required to file confirmation statements ahead of the AGM on 18 November 2025. ▪ DB encouraged all Directors to complete registration by the end of October 2025. ACTION ALL ▪ Some members noted technical difficulties when attempting registration, which may have been due to system overload. 	ALL
10.	Close	
	<ul style="list-style-type: none"> ▪ GH expressed thanks to all attendees and contributors. ▪ The meeting closed at 18:58. 	
	<ul style="list-style-type: none"> ▪ Date of Next Working Board Meeting: 7th October 2025, Room 111, Capability House Wrest Park, MK45 4 HR 	



Actions arising from the

