

HW Kingston Decision Making Policy and Procedures

1. Scope

This policy applies to

Employees	X
Contractors	X
Volunteers	X
Partners	X
Suppliers	X
Consultants	X

Unless otherwise stated, this policy and procedure is non-contractual, does not form part of any contract of employment, and may be adapted or amended at any time by the Board of Trustees.

2. Policy Statement

Healthwatch Kingston makes its decisions in an open and transparent way and ensures the interests of the people of RB Kingston are always put first. This policy and associated procedures outline the steps taken to ensure decisions are evidence based and lead to substantive impact in the community.

This policy applies to all relevant decisions made by Healthwatch Kingston.

3. Definitions

The governing regulations and standards are:

- [The NHS Bodies and Local Authorities \(Partnership Arrangements, Care Trusts, Public Health and Local Healthwatch\) Regulations 2012](#) – referred to as Regulation 40 throughout this document.
- [Freedom of Information Act 2000](#).
- [Seven Principles of Public Life \(Nolan Principles\)](#).

Regulation 40 requires Healthwatch Kingston to have in place and publish procedures for making relevant decisions. Relevant decisions include:

- How to undertake our activities.
- Which health and care services we are looking at covering with our activities.
- The amounts we will spend on our activities.
- Whether to request information.
- Whether to make a report or a recommendation (or both).
- Which premises to Enter and View and when those premises are to be visited.
- Whether to refer a matter to Overview and Scrutiny Committee.
- Whether to report a matter concerning our activities to another person.
- Any decisions about sub-contracting.

Relevant decisions do not include day-to-day activity that may be required to carry out exploratory work prior to making a relevant decision.

4. Procedures

4.1 Who may make such decisions?

The Healthwatch Kingston Board is responsible for making relevant decisions. The Board has the power to delegate some of the relevant decision making to the Chief Executive Officer or designated members of the Board with the Chief Executive Officer, for example, to approve small pieces of work or funding which do not have a substantive impact on staff or financial resources.

All relevant decisions, including those delegated to the Chief Executive Officer or designated members of the Board, will be recorded in the minutes of the Board meeting at which the decision was made. The minutes of all Board meetings held in public are published on Healthwatch Kingston's website once they have been agreed by the Board as being a correct record of the meeting concerned.

Once a decision has been made, the staff team is responsible for implementation and delivery, with an agreed reporting process to Board.

The Board of Healthwatch Kingston will reconsider a decision where new data has become available, or if circumstances change, which might prompt it to reach a different decision, or where there is evidence that this decision-making process was not followed.

As a Charitable Company, decision making within Healthwatch Kingston is also covered in our Articles of Association. The key sections in this document are as follows:

37. Meetings of the Board

- The Board may meet, adjourn, and run its meetings as it wishes, subject to the rest of these Articles.
- Questions arising at any meeting must be decided by a majority of votes. Every Trustee has one vote including the Chair. If the votes are equal, the Chair has a second or casting vote.
- The Charity, if requested by the Chair or any two Trustees, must summon a meeting of the Board.
- Notice of a Board Meeting need not be given to any Trustee who is out of the United Kingdom.
- Meetings may be held in person, by telephone, or by suitable electronic means agreed by the Board in which all participants may communicate with all other participants.

38. The Keeping of Minutes

The Board must have a record of minutes: -

- of all appointments of officers by the Board.
- of the names of the Trustees present at each of its meetings and of any committee of the Board; and
- of all resolutions and proceedings....

41. A Resolution may be Approved by Signature Without a Meeting

A resolution in Writing Signed by all the Trustees or any committee is as valid as if it had been passed at a properly held meeting of the Board or committee. The resolution may consist of several documents in the same form Signed by one or more members of the Board or committee.

43. Delegation by the Board

The Board may delegate the administration of any of its powers to individual Trustees or committees of Trustees and any such Trustee or committee must conform to any rules that the Board imposes on it.

4.2 Involving lay persons or volunteers in such decisions

Healthwatch Kingston's Board is composed of lay persons (a person who has insight into using health or care services in RB Kingston or SW London) who are also volunteers (a person who is not a paid employee of Healthwatch Kingston). Healthwatch Kingston intends to secure broad based views on its activities wherever possible, and involves others, particularly lay people and volunteers in its decision making.

To facilitate the involvement of other interested people, the Healthwatch Kingston Board has also committed itself to the following ways of working:

- To hold all Board meetings in public. The exception to this is when confidential matters, which it would be prejudicial to the public interest to consider in public, need to be considered. For these items, the board will go into private session or hold a separate private meeting. Such matters will include, for example, staff terms and conditions, recruitment arrangements, commercially confidential matters, preliminary discussion of issues on which decisions are not being taken, any complaints about Healthwatch Kingston or people involved in the organisation and information that has been provided to the HWK on a confidential basis.
- As far as practicable, to publish all Board papers (other than confidential items) on the Healthwatch Kingston website a week before each meeting.
- As far as practicable, to invite members of the public attending to contribute their views on the matters being considered by the Board.

4.3 How are decisions made?

The potential scope of the work of Healthwatch Kingston is vast – it has a responsibility for health and social care services for all adults, children (except children's social care) and young people in RB Kingston, including those who are most vulnerable or may be excluded. This means we must prioritise the issues we focus on. The main sources to inform our work programme are likely to come from:

- People's experiences of health and social care services that they share with us.
- Evidence we proactively collect about specific areas of concern through the stories and enquiries we hear directly, including deliberative research, public surveys and polls.
- National, regional and local data sets that evidence issues affecting large numbers of the local population and the most excluded.

This list is not exhaustive and other relevant sources of data will be considered.

In order to prioritise, Healthwatch Kingston Board will carefully consider all sources of information and decide where it can add most value. Areas to be considered include but are not limited to:

- That the issues fit with our organisational role and responsibilities and our agreed Mission, ensuring Healthwatch Kingston delivers to its statutory remit.
- How much the issue matters to local people – it must be something they care about as we are here to be the voice of people in health and social care.
- How much change Healthwatch Kingston can potentially bring about. This enables us to make sure we are choosing areas where we can have the greatest impact. This is important to deliver the greatest return for our budget, maintain our independence and ensure we bring issues to the attention of the health and care system.
- Whether the case for change needs to come from Healthwatch Kingston (e.g. benefiting from our independence) – to ensure we aren't focusing on things that others can do more easily and effectively.
- Finally, the Board of Healthwatch Kingston will consider its work as a full set of priorities, as together they need to have the greatest impact for people using health and social care services.
- In addition, the NHS reforms, together with other widespread changes to services such as the increased use of digital or the changes in delivery required by the pandemic, may sometimes

require a response from HWK at short notice. Some flexibility therefore needs to be built into our work programme.

Minutes recording decisions will be available via Healthwatch Kingston's website.

4.4 Dealing with breaches of these procedures

If a decision is taken in the name of Healthwatch Kingston without authorisation in the manner set out in this policy document, the Healthwatch Kingston Board will determine what action is needed. This may be to either approve the decision retrospectively, or to reverse the decision.

If the breach of the agreed procedure is considered to have also breached the contract between Healthwatch Kingston and RB Kingston, it will be reported to RB Kingston and further action agreed between the Local Authority and Healthwatch Kingston.

In each eventuality, actions will be minuted and published on Healthwatch Kingston's website.

4.5 Equality, Diversity and Inclusion statement

Healthwatch Kingston is committed to ensuring all decisions made are free from any form of discrimination on the grounds of age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation, in accordance with the [Equality Act 2010](#). For further details see Healthwatch Kingston's Equality, Diversity and Inclusion Policy and Procedures.

