

# Decision making guidance

November 2020

# About this guidance

Every Local Healthwatch must have a published decision making process. This guidance helps you to assess whether your current process is fit for purpose, or in need of a refresh. This guidance is for Lead Officers, Chairs and Board Members and includes a template policy for you to use.

# Why you need a decision making policy

Having a decision making policy is an essential part of running a local Healthwatch:

* You have a **legal requirement** to demonstrate independence in the way you operate and make decisions. Without a published policy, your trademark license to operate as a local Healthwatch may be at risk.
* You will have a **clear process** that will support your Board in building a robust evidence base and prioritising the many calls for your time and attention.
* You will demonstrate **transparency** and openness to all who have an interest in the work you do, enhancing your reputation as a trusted and credible partner.

Using a robust decision making policy has helped many teams make a difference in their communities. In addition to providing clarity to the public, some of the benefits people have highlighted are:

* **Commissioned work** - where work requests from health and care organisations fall outside chosen work priorities, local Healthwatch have used their decision making policy to help make the case for additional funding.This enabled themto accept the projects, clearly showing how and where funding will be allocated to deliver impactful outcomes.
* **Accountability to commissioners** - with such a large remit, deciding on priorities is an important task. It requires you to demonstrate independence while ensuring you make a difference and provide value to the health and care system. Your decision making policy sets out the rationale and process for reaching decisions about your priorities, providing transparency, helping reduce bias and creating a framework for your Board to come together in agreement.
* **External priorities** - as Healthwatch are well placed to carry out engagement, it’s all too easy to be buffeted into accepting requests from health and care providers to support engagement. A robust decision making policy and process gives a clear rationale for dealing with such requests.

If you don’t have a policy, and a decision is called into question, then you may find you have to spend your time on complaints processes, rather than delivery of your work plan. Use your policy to guide your decisions, as justifying decisions in retrospect without the support of a policy can be time consuming and unnecessary.

# What is your legal requirement?

For those of you who may want to delve deeper into the regulation upon which decision making within local Healthwatch is based, start at Regulation 40 of ‘The NHS Bodies and Local Authorities (Partnership Arrangements, Care Trusts, Public Health and Local Healthwatch) Regulations 2012**’**.

Being transparent is also a legal requirement under the Freedom of Information Act 2000, which provides public access to information held by public authorities, including local Healthwatch.

In addition, the Seven Principles of Public Life, also known as the Nolan Principles, outline the ethical standards those working in the public sector are expected to adhere to. For further information see here: <https://www.gov.uk/government/publications/the-7-principles-of-public-life>

“Holders of public office should act and take decisions in an open and transparent manner. Information should not be withheld from the public unless there are clear and lawful reasons for doing so.”

# What does this mean for your local Healthwatch?

Regulation 40 states that each local Healthwatch must establish and publish procedures for decision making in relation to “**relevant decisions**”. The procedures must include:

* Who can make decisions - this will likely be your Board but does not have to be. For example, you may delegate your decision making to a group of community representatives. If so, your policy should be clear where this is the case.
* How lay persons or volunteers can be involved in these decisions.
* How to deal with breaches of any procedure, including the circumstance in which a breach would be referred to the local authority.

Each local Healthwatch, regardless of size, needs a clear decision making policy and procedures that support your structure, whether you are hosted or stand alone. Healthwatch England provides a suggested template that you can adapt and agree with your Governing or Advisory Board.

If you are a hosted model of local Healthwatch, you also need to ensure transparency of decision making between yourselves and your host organisation and include those arrangements in your policy and procedure document.

# What is a relevant decision?

Regulation 40 provides details of what constitutes relevant decisions, and these are bulleted in the policy template below.

# How do I ensure our policy is relevant, regularly used and protects our brand and reputation?

Regulation 40requires that your decision making policy and procedures must be published to provide transparency for members of the public and organisations you work with. Your website therefore should be kept up to date with your working policy and procedures.

Your policy and procedures should be reviewed on a regular basis by your Board and noted in Board minutes; industry good practice suggests reviews should be no longer than three years apart. You can of course decide to review it more frequently.

Awareness and understanding of policies and procedures, including decision making, will be part of your staff induction process. It is good practice for staff to refresh their knowledge of the principles followed by your team following a review of the policy by your Board.

Depending on what areas your volunteers are involved with, you may wish to refresh their knowledge of how you make your decisions too. As a minimum it is good practice to share your policy and procedures with your volunteers as part of their induction.

# What does this mean in practice?

The decision making process can be broken down to three areas:

* Gather a robust evidence base
* Prioritise and choose what will go on your workplan
* Act

## Gather a robust evidence base

You can gather information from several sources and use that data to support well informed decision making. The list below is wide-ranging but not exhaustive:

* Engagement work within the community, including volunteer activity.
* Information from your Local Authority Joint Strategic Needs Assessment.
* Healthwatch led public meetings such as Annual Conferences.
* Surveys and questionnaires.
* Service user experience including that of staff and volunteers.
* Publicly available national and local data.
* Focus groups.
* Information from the Voluntary and Community Sector (VCS); including faith groups, community groups, charities, resident groups, patient groups etc.
* Views and experiences of local people.
* Providers of health and social care services.
* Commissioners of health and social care services.

You and your Board can use the data to identify which health and social care issues are of interest to investigate. Your Board will reflect on a range of subjects in their considerations including, but not limited to the amount of evidence available, the impact on individuals and community groups and the impact your Healthwatch may have in influencing change. The final decision of how the data will be used will rest with the Board.

## Prioritise and choose what will go on your workplan

The potential scope of the work of each Healthwatch is vast – health and social care services for all adults, children and young people, particularly those who are most vulnerable or may be excluded. In addition, each team is unique; size, structure, geography, public voice, board experience, local environment etc. This means we must prioritise the issues we focus on, there is no right and wrong way to do this – find your own way that supports your team’s uniqueness.

Some ideas to help you:

* The Healthwatch [Impact Tracker](https://network.healthwatch.co.uk/guidance/2020-09-25/demonstrating-impact) will help you prioritise your work and is a good source of information upon which decisions can be made.
* Some Local Healthwatch find a matrix useful and score their decisions. The [Making a Difference Toolkit](https://network.healthwatch.co.uk/guidance/2019-09-30/making-difference-toolkit) provides a helpful example matrix.
* The [research project planner](https://network.healthwatch.co.uk/how-to/2020-07-22/what-does-research-process-look-start-to-finish) has a checklist of questions for you to consider before starting a new piece of work.
* You may wish to use a template such as the one detailed below to help guide you. This will also help you record decisions as part of your Board minutes. Remember not every criterion will be used for every decision - each decision will be different.

### Example checklist for use by a board to ensure appropriate decision making criteria are considered and documented

|  |  |  |
| --- | --- | --- |
| **Criteria** | **Action** | **Date** |
| **Project objectives – What is the project seeking to achieve?** | | |
| Does this fit with our strategic objectives and statutory remit? |  |  |
| What is the evidence base for this work? |  |  |
| What is the proposed impact on individuals and the community? |  |  |
| Can we influence change, or is there an organisation better placed to do so who we can work with or approach? |  |  |
| How will we undertake our activities? |  |  |
| Which services will we cover? |  |  |
| What additional information will we need to request and who from? |  |  |
| Is an Enter and View required? What premises will be included? What is the timescale? |  |  |
| **Resource requirements (people and financial)** | | |
| Does this fit with our overall work plan? Do we have the staff and volunteers to deliver? |  |  |
| How much will we spend? Are there additional funding requirements to deliver this project? |  |  |
| **Project deliverables – What difference or impact will the project have?** | | |
| What will be the outcome of our work? How will we demonstrate impact? A report? Recommendations? |  |  |
| **Communication – Who will be interested in our outcomes and impact?** | | |
| Does this need to be referred to the local Overview and Scrutiny Committee? |  |  |
| Who will we share our planned work and our findings with? |  |  |
| Do we need to subcontract? |  |  |

## Act

Based on the evidence and your prioritisation process, your Board will approve your work and your team will then implement it. Remember to record your decisions in the minutes with the supporting evidence and report back to your Board on a regular basis.

## Do I have to use the template policy and procedures document?

The important thing is you have a decision making policy that conforms to Regulation 40. If you already have a policy that:

* advises the public who can make decisions;
* advises how lay persons or volunteers can be involved in those decisions;
* advises how to deal with breaches;

and you want to keep it, you can.

If your policy provides detailed process steps, take care to ensure that you adhere to them in every case, as this is your commitment to the public of your local authority area, and it may be used to hold you accountable.

## How does this fit in to the Quality Framework?

The [Quality Framework](https://network.healthwatch.co.uk/guidance/2020-06-04/quality-framework-how-can-it-help-you) aims to help local Healthwatch assess and improve the effectiveness of their work by looking at six domains of activity. Decision making is covered within the Leadership and Decision Making domain.

## How does this fit in with our commitment to Equality, Diversity and Inclusion?

Each of your decisions should be explored through an equalities, diversity and inclusion lens to ensure that you make a real impact in highlighting excluded communities experience of health and social care, challenging issues that may disproportionately affect people with protected characteristics and create or perpetuate inequality.

# Decision making: policy and procedures for all staff, board and volunteers

## Policy Statement

Healthwatch xxx makes its decisions in an open and transparent way and ensures the interests of the people of xxx 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.

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).

This policy applies to all relevant decisions made by Healthwatch xxx

## Relevant decisions

Regulation 40 requires Healthwatch xxx 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.
* 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.

## Who may make such decisions?

The Healthwatch xxx Board, (\*or delegated alternative body – insert the name and details for your structure here), will be responsible for making relevant decisions. The Board\* will have the power to delegate some of the relevant decision making to the Lead Officer of Healthwatch xxx, for example, small pieces of work which do not have a substantive impact on staff or financial resources.

All relevant decisions, including those delegated to the Lead Officer, will be recorded in the minutes of the Board meeting at which the decision was made. The minutes of all Board meetings are published on Healthwatch xxx’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 xxx 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.

### For a standalone local Healthwatch\*\*:

As a private company limited by guarantee / Community Interest Company / Charitable Incorporated Organisation, decision making within Healthwatch xxx is also covered in our Articles of Association / governing document.

### For hosted local Healthwatch\*\*:

Healthwatch xxx is delivered by name of host, who ultimately hold accountability for the delivery of the contract. Under the joint Healthwatch / Host Governance Framework, delegated authority for decision making is given to the Healthwatch xxx Advisory Board, whose membership comprises of volunteers who live in or have a vested interest in insert name of local authority area.

\*\*Delete as appropriate and adjust the wording to match your individual structure.

## Involving lay persons or volunteers in such decisions

Healthwatch xxx’s Board is composed [solely / partly] of lay persons (a person who is not a health or social care professional) and volunteers (a person who is not a paid employee of Healthwatch xxx). Healthwatch xxx intends to secure broad based views on its activities wherever possible, and involves others, particularly lay people and volunteers in its decision making.

## How are decisions made?

The potential scope of the work of Healthwatch xxx is vast – it has a responsibility for health and social care services for all adults, children and young people in xxx, 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 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 xxx Board (insert name of decision making authority here of different) 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, ensuring Healthwatch xxx 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 xxx can 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.
* Does the change need to come from Healthwatch xxx - so we aren’t focusing on things that others can do more easily and effectively?
* Finally, the Board of Healthwatch xxx will consider our work as a full set of priorities, as together they need to have the greatest impact for people using health and social care services.

Board meetings are open to the public, and minutes recording decisions will be available via Healthwatch xxx’s website.

## Dealing with breaches of any procedure referred to in this policy document, including circumstances in which a breach would be referred to the local authority.

If a decision is taken in the name of Healthwatch xxx without authorisation in the manner set out in this policy document, the 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 xxx and xxx Local Authority, it will be reported to the Local Authority and further action agreed between the Local Authority and Healthwatch xxx.

In each eventuality, actions will be minuted and published on Healthwatch xxx’s website.

## Equality, Diversity and Inclusion statement

Healthwatch xxx 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.

Healthwatch xxx will monitor this policy in order to identify whether it is having an adverse impact on any group of individuals and act accordingly.

## Review of policy document

The Board of Healthwatch xxx will review the effectiveness of the decision making policy and procedures set out in this document every year / two years / three years (delete as agreed for your Healthwatch). Any amendments to this policy and the procedures governing the making of relevant decisions will require a simple majority of board members voting in favour.

The amended policy document will be published on the website of Healthwatch xxx as soon as is practicable.

## Procedures

Reference to ‘Board’ throughout this document incorporates Advisory Boards where the Local Healthwatch is hosted and Governing Boards where the Local Healthwatch is standalone.

Healthwatch xxx undertakes to carry out the following procedures:

* Publish Healthwatch xxx’s most up to date policy document on Healthwatch xxx’s website.
* Review and obtain Board approval to Healthwatch xxx’s decision making policy every year / two years / three years (delete as appropriate).
* Ensure all Healthwatch xxx staff are familiar with the policy and refresh their understanding and awareness of the need for open and transparent decision making by reading the policy on a regular basis, at a minimum after review by the Board.
* Publish minutes from Board meetings where decisions are made in a timely manner on Healthwatch xxx’s website. Where decisions are made outside of board meetings, they will be ratified at the subsequent Board meeting.

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| **Decision making policy and procedures** | |
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