APPENDIX 1



Healthwatch Hillingdon Report to the London Borough of Hillingdon Health and Wellbeing Board 2014-2015

Period: Quarter 3, October 2014 - December 2014

Date: 27th February 2015

1. INTRODUCTION

- 1.1. Healthwatch Hillingdon is contracted by the London Borough of Hillingdon, under the terms of the grant in aid funding agreement, to deliver the functions of a local Healthwatch, as defined in the Health and Social Care Act 2012.
- **1.2.** Healthwatch Hillingdon is required under the terms of the grant aid funding agreement to report to the London Borough of Hillingdon on its activities, achievements and finances on a quarterly basis throughout the duration of the agreement.

2. SUMMARY

2.1. The body of this report to The London Borough of Hillingdon's Health and Wellbeing Board summarises the outcomes, impacts and progress made by Healthwatch Hillingdon in the delivery of its functions and activities for this period. It should be noted that a comprehensive report is presented by the Chief Executive Officer to the Directors/Trustees at the Healthwatch Hillingdon Board Meetings and is available to view on our website: (http://healthwatchhillingdon.org.uk/index.php/publications/)

3. OUTCOMES

Healthwatch Hillingdon would wish to draw the Health and Wellbeing Board's attention to some of the outcomes highlighted by its work during the third quarter.

3.1. Children's and Adolescent Mental Health Services (CAMHS)

On 11 December 2014 Healthwatch Hillingdon launched the first phase of its engagement programme, Listen to Me! to professional and public audiences. The report was presented to members of the Health & Wellbeing Board and the Government's own CAMHs taskforce and Health Select Committee.

The report called on Hillingdon Council and the NHS Hillingdon Clinical Commissioning Group to establish a multi-agency 'task and finish' group to establish a long-term vision for young people's mental health services that meets needs more effectively across the whole system.

Healthwatch also asked for a stronger voice for young people to be developed and for a borough wide campaign to make it acceptable to talk about mental health problems, ensuring the widest possible early intervention to support young people, particularly in schools.

The report has been well received by statutory agencies and especially voluntary sector and parent facing audiences - resulting in more cases coming forward wanting to share their stories.

The local media supported the launch with an extensive mix of online and print coverage which helped to keep-up momentum over the Christmas and New Year period.



This work is now ongoing and we hope to publish a further report in March 2015 when the government's CAMHs taskforce is expected to report. Healthwatch hopes launching to coincide with the government's own drive will help us harness national momentum locally for change.

3.2 Enquiries

During this quarter we have received 96 direct enquiries from the general public on health and social care. We have assisted people in a number of different ways; from signposting to new GP or dental services, too complex cases which include safeguarding issues and potentially major complaints.

3.2.1 Complaints Processes

Healthwatch Hillingdon continue to hear from people about the shortcomings they face when trying to make a complaint. During this quarter nearly 15 people have told us of their experiences of making complaints to the NHS, their GP, or Adult Social Services. We hear about how health & social care complaints systems are often very fragmented and confusing for residents; where commonly in the opinion of the complainant responses do not always address the issues of the complaint, or provide confidence the service will change; where people are scared to complain, or are seeking help to complain.

As an illustration we would highlight to the Health and Wellbeing Board two enquires from December 2014.

In both incidences we were approached by members of the public who reported that the care they had received from an NHS provider was inadequate. They had both alleged quite serious shortcomings in the care provided and felt the need to strongly complain. They had lost confidence in the providers and not wanting to contact them directly, had tried many avenues before contacting Healthwatch Hillingdon. By this point they were very confused and distressed.

Due to the nature of the complaints both cases were urgently referred to VoiceAbility, Hillingdon's NHS Complaints Advocacy Service who are now assisting these residents through the complaints process.

Healthwatch England published a Complaints Report with recommendations which highlights some of the complexities the public face. Referencing the personal experience we are gathering Healthwatch Hillingdon are carrying out a review of complaints processes and speaking to providers such as Hillingdon Hospital and Hillingdon Council to look at how procedures can be changed to improve people's experiences. The results of this work will be reported back to the Health and Wellbeing Board later in 2015.

3.2.2 Domiciliary Care Services

This quarter has seen an increase in the volume of experiences recorded by Healthwatch Hillingdon that have covered domiciliary care. This has coincided with the commissioned changes and implementation of the new provider contracts. Many of the comments we have received related to either different care workers attending each appointment slot and wide variance in the times that care workers attend clients. One of the main issues is the new flexibility which allows care workers to attend up to an hour either side of the scheduled appointment. We have had a number of reports by people and their families, of care workers turning up for the morning call to serve breakfast and then a couple of hours later the lunch call arrives early. We are informing the London Borough of Hillingdon of the



information we are receiving during this transition period to help ensure these initial problems are rectified as the new services become settled.

3.3 Strategic Involvement

Through the large number of strategic meetings that Healthwatch attend we are able to feedback the information that we gather through our engagement programme, to commissioners and providers. This ensures that the quality of health and social care services in Hillingdon is monitored and challenged through the real experiences of patients and that change programmes can be influenced by Hillingdon's residents.

3.3.1 NHS Continuing Health Care

At the NHS Hillingdon CCG's Patient & Public Involvement Committee Healthwatch Hillingdon has continued to raise the issue that although the NHS Hillingdon CCG is still responsible for funding/assessment of NHS Continuing Health Care (NHS CHC); that there is no information on CHC and how people can apply for CHC assessments on the NHS Hillingdon CCG website.

The NHS Hillingdon CCG have agreed to publish CHC information on their website and have simplified and clarified the CHC appeals process at our request. Healthwatch England has also requested from local Healthwatch that they gather data on CHC referrals/funding/assessments and outcomes to help inform the national picture on CHC funding. Healthwatch Hillingdon will be writing to the NHS Hillingdon CCG to request detailed data on CHC funding/referrals for the current financial year as well as the past 2 years.

3.3.2 Carers Strategy Group

The Carers Strategy Group (CSG) is a steering/oversight group for unpaid carers in the London Borough of Hillingdon. Prior to April 2014 the CSG was provided with administrative and leadership support from the London Borough of Hillingdon. Since that date partner organisations of the CSG have chaired and providing administrative support on a rotating monthly basis.

Healthwatch Hillingdon made its view clear that this type of arrangement may not suffice to provide the necessary level of support, leadership and continuity required to support the remit of the CSG. As this became more evident we recommended to the London Borough of Hillingdon that the CSG is provided with the required level of support and leadership in order to fulfil its remit to oversee implementation of the Carers Strategy and the Care Act from April 2015. This has been agreed and the CSG will now be chaired by the Head of Service Safeguarding Quality & Partnerships.

3.4. Engagement and Promotion

During this quarter we have directly engaged with 14,058 people; 12,500 through our website and over 1500 through our other activities. This figure is down on previous quarters due to our Engagement Officer being absent due to illness for 6 weeks during this period and the Christmas break.

One of the highlights of our engagement was in our role on the Public Health task group which prepared the Pharmaceutical Needs Assessment for Hillingdon. As part of our involvement in this group we carried out a number of engagement events to meet the residents of the Heathrow Villages to discuss how they obtain pharmacy services, as there is



no chemist in the villages. The information gathered from the engagement has been fed into the Pharmaceutical Needs Assessment consultation process.

Our monthly presence at Hillingdon Hospital and ongoing engagement at the Urgent Care Centre are enabling us to gather evidence of resident's views of these services.

Our Twitter account has been popular during this period. We have increased our Followers by 28% to 619 and tweeted 100 times which is more than the rest of the year in total. The main focus was the CAMHS report which was retweeted over 1000 times.

We would also bring to the Boards attention a number of promotion initiatives which are taking place in conjunction with the Council:

- We are working jointly with the borough's library service to produce 20,000 bookmarks for distribution across Hillingdon Libraries
- The Youth Offending Team have been delivering 50,000 summaries of the Healthwatch Hillingdon annual report across addresses in UB3.
- We advertised in 10,000 copies of the London Borough of Hillingdon Direct Payments Guide

North West London's CCGs also produced a document "NHS Right Care" which was distributed to every household in Hillingdon which contained Healthwatch Hillingdon's contact details.

Healthwatch Hillingdon have also received extensive press coverage during this quarter. In addition to the publicity campaign surrounding the CAMHS "Listen to Me" report we have had further articles published on knee surgery, IVF and a story which invited readers to contact Healthwatch Hillingdon with their experiences of GP practices which resulted in a number of residents contacting us with their views.

4. PROJECT UPDATES

4.4. GP Networks

Healthwatch Hillingdon have started to engage with GP Networks. We presented to the Patient Participation Group Chairs of the Metro Network in the north of the borough and have agreed to meet these groups again to further influence and inform their public engagement plans.

Hillingdon CCG have invited Healthwatch Hillingdon to have a seat on their Transformation Board which will have oversight of the development of GP Networks.

GP Networks are developing plans to deliver services under the Prime Ministers Challenge Fund and Healthwatch Hillingdon are keen to ensure that these plans are consulted on with their patients and meet the needs of the local population.

4.5. Shaping a Healthier Future (SaHF) Reconfiguration

Healthwatch Hillingdon is actively engaged in monitoring the SaHF reconfiguration programme.



No final decisions has yet been made on the reconfiguration of maternity, paediatric and genealogical services at Ealing Hospital.

Both our Chairman, Jeff maslen, and Vice Chairman, Stephen Otter, sit on the Patient Participation Reference Group for SaHF and continue to be sighted on the reconfiguration programme and are able to be informed and challenge proposals.

4.6. Enter and View - Meal Time Assessments at Mount Vernon Hospital

The first phase of the meal assessment programme being carried out in conjunction with Hillingdon Hospitals NHS Foundation Trust was completed in December 2014.

Members of our Enter & view team joined staff from the Trust to carry out 3 unannounced visits at Mount Vernon Hospital.

On Wednesday 26th November 2014 assessors observed the breakfast service for patients on both Trinity and Edmunds wards; on Saturday 29th November the lunch time provision on Trinity and Edmunds wards and the evening service on Trinity, Edmunds and Daniel wards.

Initial reports from the team were very positive and a full report will be submitted to the Healthwatch Hillingdon Board with the outcomes of the meal assessment programme, after the completion of phase 2, which will take place in January 2015.

Key Performance Indicators (KPIs)

Nine Key Performance Indicators (KPIs) have been set to enable measurement of Healthwatch Hillingdon's organisational performance, in relation to the strategic priorities and objectives as set out in Healthwatch Hillingdon's Operational Work Plan 2014-15¹. This document reports on Healthwatch Hillingdon's performance against these KPI's and progress on the project based Operational Priorities set within the work plan.

¹ http://healthwatchhillingdon.org.uk/wp-content/uploads/downloads/2014/07/HWH-Work-Plan-2014-2015-FINAL1.pdf



Key Performance Indicators

KPI	Description		2014/15 Quarter 3			Impact this quarter	Relevant Strategic
no.	Descripcion			Q3 Totals	impact and quarter	Priority	
1	Hours contributed by volunteers	165	315	212	692	Following training a new engagement volunteer carried out maternity survey at Pinkwell Children's Centre in December	SP4
2	People directly engaged	4257	4232	5569	14058	 Directly engaged with 14,058 people; 12,500 through our website and over 1500 through our other activities Engaged with residents of the Heathrow Villages as part of the Pharmaceutical Needs Assessment for Hillingdon Twitter account: Followers increased by 28% to 619 and tweeted 100 times which is more than the rest of the year in total. The main focus was the CAMHS report which was retweeted over 1000 times. 	SP1, SP4
3	New enquiries from the public	38	30	28	96	 Received serious complaints about a provider which have been escalated to commissioners Increased volume of experiences recorded that have involved domiciliary care. Reported to LBH as newly commissioned providers of service Number of issues of new residents unable to register at a GP. All patients registered with our assistance 	SP1, SP5
4	Referrals to complaints or advocacy services	6	8	4	18	2 referrals to VoiceAbility to ensure families received expert support through serious complaints	SP5



5	Patient experience feedback and recommendati ons made to health and social care providers and commissioner	KPI not yet fully defined. Further work will need to be undertaken to explore how we can report on this KPI in a meaningful manner.			to be Wellbeing Board and the Government's own CAMHs ow we taskforce and Health Select Committee in a		SP3, SP6
6	Commissioner / Provider meetings	23	39	25	97	Carers Strategy Group now provided with the required level of support and leadership in order to fulfil its remit to oversee implementation of the Carers Strategy and the Care Act from April 2015	SP3, SP4, SP5, SP7
7	Consumer group meetings	14	17	11	42	 Worked with Hillingdon MIND to engage residents for CAMHS report Working with Age UK to coordinate response to LBH on experiences of new domiciliary care providers service 	SP1, SP7
8	Statutory reviews of service providers	0	0	0	0	• None	SP5, SP4
9	Non-statutory reviews of service providers	0	1	3	3	Members of our Enter & view team joined staff from the Trust to carry out 3 unannounced visits at Mount Vernon Hospital.	SP5, SP4



KPI Dash Board 2014-2015

K P I	Description	S P s	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	YTD Target	YTD Totals
1	Hours contributed by volunteers	SP4	165	315	212	285	151	296	159	243	181				1875	2007
2	People directly engaged	SP1 SP4	6876	7601	6715	14979	11691	10445	4257	4232	5569				56250	72365
3	New enquiries from the public	SP1 SP5	31	42	51	31	55	40	38	30	28				300	346
4	Referrals to complaints or advocacy services	SP5	7	4	8	5	6	3	6	8	4				N/A*	
5	Patient experience feedback and recommendations made to health and social care providers and commissioners	SP3 SP6	Furthe	KPI not yet fully defined. Further work will need to be undertaken to explore how we can report on this KPI in a meaningful manner. See also KPI-3, KPI-6, KPI-7												
6	Commissioner / Provider meetings	SP3 SP4 SP5 SP7	27	21	20	20	19	29	23	39	25				198	223
7	Consumer group meetings	SP1 SP7	26	18	18	15	16	17	14	17	11				132	152
8	Statutory reviews of service providers	SP5 SP4	0	0	0	0	0	0	0	0	0				N/A*	0
9	Non-statutory reviews of service providers	SP5 SP4	0	5	0	0	0	2	0	1	3				N/A*	7

^{*}Targets for these KPI's as not set as they are reactive to determining factors. They are included for measurement only.

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Work Plan Priorities 2014-15 (Projects)

Objectives	Strategic Priority	Tasks	Progress	Target Date & RAG
Operational Priorit	ty 6 (OF	P6): Primary Care		
OP6.1 GP networks	SP1 SP3 SP4 SP5 SP7	 Maintain oversight and scrutiny of evolving plans to develop Hillingdon GP networks that will be jointly commissioned by NHS HCCG and NHS England to deliver improved GP services and access. Contribute to ensuring conflicts of interest are appropriately managed. Contribute to ensuring that evolving GP networks improve the quality of care provided and meet the needs of the residents of Hillingdon. To communicate progress and issues to the residents of Hillingdon and provide them with a platform to share their views. 	 In dialogue with Hillingdon CCG on the development of GP Networks Report on GP Networks for Healthwatch Board being formulated CCG invited to September Board Seminar to present on GP Networks Seat on HCCG Transformation Group overseeing Network Delivery Meetings to be arranged with Networks to discuss PPI 	Mar 2015



			Hillingdon	
OP6.2 People's experience of Hillingdon GP services. Operational Priori	SP1 SP3 SP4 SP5 SP6 SP7 SP8	 To analyse existing data/information from the National GP Survey 2011-12 on people's experience of GP services. To conduct a survey of people's experiences of GP services in the London Borough of Hillingdon - including people who would not normally be asked as part of the National GP Survey. Prepare and publish a report, with recommendations, on the findings from the data analysis and Hillingdon GP Survey. 	 Existing data/information from the National GP Survey 2011-12 analysed Survey conducted plus additional workshops carried out with The Older Peoples Assembly and evidence gathered through complaints and issues Report currently being prepared 	March 2015
OP7.1 Children and Adolescent Mental Health Services (CAMHS)	SP1 SP3 SP4 SP5 SP7	 Maintain oversight and scrutiny of proposed changes to CAMHS services provided to the residents of Hillingdon. Undertake focused work on understanding the needs of people using CAMHS and their family/carers and how proposed changes can be shaped to best meet their needs. Work towards ensuring that the quality, safety and patient/carer experience of CAMHS services are improved. To communicate progress and issues to the residents of Hillingdon and provide them with a platform to share their views. Healthwatch Hillingdon to provide support and 	 Consultants RedQuadrant commissioned to carry out engagement program with children and families in July and September Engaging with Family Groups, commissioners and providers to arrange engagement Work being carried out in conjunction with Hillingdon MIND to gather evidence of general mental health wellbeing with children and young adults Children and Young Persons Engagement Officer being recruited on short term contract from October 2014 Interim report "Listen to Me!" published in Dec 2014 	Mar 2015



			Tilling a on	
		promote co-production of CAMHS services.		
OP7.2 Primary Care Plus model for Mental Health	SP1 SP3 SP4 SP5 SP7	 Maintain oversight and scrutiny of the NHS Hillingdon CCG's / NHS England's Shifting of Care programme of work on Mental Health. Seek improvements in the quality of patient and carer experience of Mental Health pathways. To communicate progress and issues to the residents of Hillingdon and provide them with a platform to share their views. 	 Attendance at monthly Mental Health Transformation Group to maintain a full understanding of progress of programmes at an early stage Monitoring implementation through the HCCG Transformation Board 	Mar 2015
OP7.3 Adult Mental Health services	SP1 SP3 SP4 SP5 SP7	 Provide oversight and external scrutiny of the NHS CNWL's mental health services. Overlaps with Shifting Settings of Care for Mental Health 	 Attend Improving Access to Psychological Therapies (IAPT) Programme and Mental Health Transformation Group Engagement programme highlighted a number of issues which have been escalated to senior management at CNWL 	Mar 2015
Operational Priori	ty 8 (O	P8): Domiciliary Care		
OP8.1 Oversight of LBH's procurement of new Domiciliary Care contract	SP3 SP4 SP5 SP7	 Maintain oversight and scrutiny of proposed changes to the provision of domiciliary care services in LBH. Work towards ensuring that the quality, safety and patient experience of domiciliary care services are improved. To communicate progress and issues to the residents of Hillingdon and provide them with a 	 Specification for new service has been shared with us by LBH and comments submitted HWH have had oversight of the procurement exercise 	Nov 2014



		platform to share their views.		
OP8.2 People's experience of domiciliary care.	SP1 SP3 SP4 SP5 SP7	 Undertake focused work on understanding the needs of people using domiciliary care services and how proposed changes can be shaped to best meet their needs. Maintain oversight and review quality of domiciliary care provided under the new contract To review the Barnet Model of delivery and share lesson learning with LBH. 	 Residents able to contact us with their concerns following HWH inclusion in letter sent to all residents currently provided with a service Resident experience will be gained in October 2014 when the new service goes'live' 	Jan 2015
Operational Priori	ty 9 (O	P9): Children & Young Adults		
OP9.1	SP1 SP3 SP4 SP5 SP7	 Children and Young Adults (CYA) identified as a seldom heard group with regards to health and care services provided in Hillingdon. Overlaps & integrates with the CAMHS work-stream (OP7.1) Gather views and experiences of care from children and young adults in the London Borough of Hillingdon. These views and experiences are used to improve the care services for CYA in London Borough of Hillingdon. 	 Seats on the Children and Families Trust Board, Children's Safeguarding Board and SEND Commissioning Board are enabling HWH to influence and monitor CYA services Close working relationship with CNWL Children's Development Centre Work on CAMHS under work-stream OP7.1 enabling experience of children and their families to also be gained on other health related issues 	Mar 2015