

HEALTHWATCH HILLINGDON UPDATE

Relevant Board Member(s)	Jeff Maslen
Organisation	Healthwatch Hillingdon
Report author	Graham Hawkes, Chief Executive Officer, Healthwatch Hillingdon
Papers with report	Appendix 1

HEADLINE INFORMATION

Summary	To receive a report from Healthwatch Hillingdon on the delivery of its statutory functions for this period
Contribution to plans and strategies	Joint Health & Wellbeing Strategy
Financial Cost	None
Relevant Policy Overview & Scrutiny Committee	N/A
Ward(s) affected	N/A

RECOMMENDATION

That the Health and Wellbeing Board note the report received.

1. INFORMATION

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.

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://healthwatchhillington.org.uk/index.php/publications>)

- 2.2. Healthwatch Hillingdon also submits ‘Seen & Heard – Why not now?’ (Appendix A) This report, published on 31st July 2015, gives further insight into the mental health and wellbeing of children and young people in Hillingdon.

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 first quarter.

3.1 **Information, Advice and Support**

Healthwatch England have published further information on the annual reporting requirements for local Healthwatch. We would advise that Healthwatch Hillingdon have aligned our quarterly reporting for 2015 -16 with this guidance and the data presented differs from previous reports, to reflect these changes.

Enquires

During this quarter we received 232 enquires relevant to our function. Table A shows the source of the enquiries we have received. It emphasises the value of securing an extension on our shop lease, with nearly half of our enquiries being directly attributed to our prime location in Uxbridge.

Table A

Source of enquires	Number	% of source
Healthwatch Hillingdon shop	109	47%
Engagement and outreach activity	58	25%
Telephone or email	28	12%
Voluntary or health sector referral	16	7%
Website	8	3.5%
Known/existing clients	7	3%
Advertising	6	2.5%

The enquiries received are recorded in two separate categories; General and signposting enquiries; and Concerns and complaints.

General and Signposting

Of the 136 enquiries received this quarter, 55 were from people seeking generic information. General enquiries included asking about the functions of Healthwatch and things like, health conditions, fitness, accessibility, healthy eating etc.

81 people were signposted to other organisations. Table B, gives an overview of these areas.

Table B

Signposting	Number	% of all enquiries
Voluntary sector and support groups	42	31%
Health/NHS service	30	22%
Accessibility / adaptations	7	5%
Events and activities	2	2%

Concerns and complaints

Healthwatch Hillingdon recorded 96 concerns and complaints in the first quarter. Of these, 76 identified the type of organisation involved and these are shown in Table C.

Table C

Concern/complaint Category	Number	% of recorded
Primary care: GP	24	32%
The Hillingdon Hospitals NHS FT	19	25%
Social care	15	20%
Mental health services	4	5%

9 referrals were made to VoiceAbility (independent NHS Complaints Advocacy) during this period to help residents raise their complaints.

Overview

The following is to note from the analysis of the recorded data this quarter.

Primary Care

We have seen a rise in calls received relating to GPs. This increase in activity has been due to a number of residents contacting us because they have been unable to register at a GP surgery without a passport, which for some had resulted in them attending A&E.

On investigation we found that the majority of these residents had been registered for a number of years with other GP surgeries in Hillingdon, but as a result of the relocation of the Shakespeare Avenue Practice, or them moving themselves, they were now looking to move surgery.

On contacting the surgeries, all confirmed that their policy was to only register a patient who had photographic identification, without exception.

Healthwatch Hillingdon has challenged this policy, as it is contrary to current legislation and NHS England guidance, GP practices can request identification documents, but should not prevent people from registering for primary care if they are unable to provide this.

We have facilitated the GP registration of all local residents who contacted us and are working with Hillingdon CCG and NHS England to ensure local residents without photographic identification are not disadvantaged.

We will be reporting further on the progress of this work in quarter 2.

The Hillingdon Hospitals NHS FT

Residents have shared a number of different concerns with us about services received at Hillingdon and Mount Vernon. The majority of these were dissatisfaction with the outpatient department, especially inconveniences caused by multiple rescheduling of appointments. 3 referral's where made to VoiceAbility, one for maternity and two for audiology.

Social Care

There has been a steady reduction in the number of concerns received from residents in receipt of domiciliary care services. The majority of the concerns raised were for carers either turning up late, or not at all. We have continued to work closely with LBH to highlight these concerns and improve service provision for residents.

Update From Previous Report

In our last report to the Health and Wellbeing Board we highlighted the case of a 51 years old lady with Multiple Sclerosis (MS) who had been in the nursing home for 3 years. We are pleased to say that due to Healthwatch Hillingdon's intervention the lady has now undergone appropriate Continuing Health Care (CHC) assessment and will soon be moving into a purpose build Multiple Sclerosis Society flat, who will support her to live independently. Currently the patient and her family are awaiting final funding decision/agreement on the package of care to be agreed by the CCG and Hillingdon Council. The family have report that the patient's mood has "really improved since finding out about the proposed move to new accommodation which will make a big difference to her quality of life".

With Hillingdon CCG procuring a new CHC Brokerage, to start later this year, and our work with Healthwatch England to secure advocacy support for patients being assessed, CHC remains an area that we will continue to concentrate upon, and will be incorporated into our work looking at unsafe discharge during 2016.

3.2 Children's and Adolescent Mental Health Services (CAMHS)

On 31st July 2015 we published our second report 'Seen & Heard – Why not now?' (See Appendix A)

The report gives further insight into Hillingdon's mental health and wellbeing services from the people that really know what they are talking about; the children, young people and their families who have faced the struggles of emotional and mental health.

As a result of listening to their experiences and talking with professionals, we outline in our report 10 key principles that form a 'blueprint' to provide better support and services in Hillingdon.

As we work together with all partners, on implementation of new strategies for care, we will be using the evidence we have gathered to influence how future care and support are provided in Hillingdon and ensure that the views and experiences of children and young people are heard.

We will also test, through future engagement, that the changes being made are having positive outcomes for the children and young people of Hillingdon.

3.3 Engagement Overview

This quarter we attended 13 events and directly engaged with 354 residents. Of these 67 people gave us information on their experiences of care, 28 being positive and 39 negative. We advised, or signposted 31 people and supported 13 people who had issues with a service, or wished to complain.

Some of the key issues raised were at June's Disability Assembly, where residents spoke about concerns with non-emergency transport and assessments for direct payments.

The non-emergency transport service for Hillingdon will be re-tendered this year and we are currently carrying out a survey in conjunction with Hillingdon CCG and Hillingdon Hospital, to reflect the views of current service users in the evaluation of the service specification.

Our website continues to be accessed regularly with an average of over 5000 different addresses visiting the site over 44,000 times during the first 3 months. Our social media coverage also remains good with 765 people following us on Twitter and 373 on Facebook.

4. PROJECT UPDATES

4.1. Shaping a Healthier Future (SaHF) Reconfiguration

Healthwatch Hillingdon continues to actively monitor the SaHF reconfiguration programme. Following the closure of Ealing Hospital's maternity department this summer Healthwatch Hillingdon has set Maternity as a Level 1 Priority for this year. We are currently working up an engagement programme which will measure the experience of women who choose to give birth at Hillingdon Hospital. The progress of this programme will be periodically reported to the Health and Wellbeing Board.

4.2. Patient Led Assessments of Care Environment (PLACE Assessments)

During April and May 2015, we recruited and trained a further 5 PLACE assessors for the annual assessment process. In total, 10 Healthwatch Hillingdon assessors carried out PLACE Assessments at Hillingdon Hospital, Mount Vernon Hospital and Central North West London Trust's, Riverside and Woodlands Centres, over a period of 6 days. The results of these assessments are due to be announced by the Health and Social Care Information Centre in October 2015.

5. KEY PERFORMANCE INDICATORS (KPIs)

To enable Healthwatch Hillingdon to measure organisational performance, 8 quantifiable Key Performance Indicators (KPIs), aligned to Healthwatch Hillingdon's strategic priorities and objectives, have been set for 2015-2017.

The following table provides a summary of our performance against these targets:

Key Performance Indicators

KPI no.	Description	2015/16					Impact this quarter	Relevant Strategic Priority
		Q1	Q2	Q3	Q4	Annual Totals		
1	Hours contributed by volunteers	550				550	<ul style="list-style-type: none"> 10 members of our Enter & view team carried out PLACE Assessments 	SP4
2	People directly engaged	354				354	<ul style="list-style-type: none"> signposted 31 people to appropriate services and supported 13 people who had issues with a service 	SP1, SP4
3	New enquiries from the public	232				232	<ul style="list-style-type: none"> Enabled patients to register at a GP surgery who had previously been refused 	SP1, SP5
4	Referrals to complaints or advocacy services	9				9	<ul style="list-style-type: none"> 9 People now in receipt of help to make a complaint, including 1 negligence claim 	SP5
5	Commissioner / Provider meetings	49				49	<ul style="list-style-type: none"> Continued to champion for children in the improvement of CAMHS and mental wellbeing services 	SP3, SP4, SP5, SP7
6	Consumer group meetings	22				22	<ul style="list-style-type: none"> Non-emergency transport to be reviewed and service specifications influenced 	SP1, SP7
7	Statutory reviews of service providers	0				0	<ul style="list-style-type: none"> None 	SP5, SP4
8	Non-statutory reviews of service providers	7				7	<ul style="list-style-type: none"> Harmondsworth Detention Centre 10 members of our Enter & view team joined staff from the Trust to carry out PLACE 	SP5, SP4