HEALTHWATCH HILLINGDON UPDATE

Relevant Board Member(s)	Turkay Mahmoud, Acting Chair
Organisation	Healthwatch Hillingdon
Report author	Graham Hawkes, Chief Executive Officer, Healthwatch Hillingdon
Papers with report	None

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 and 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

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.

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. <u>SUMMARY</u>

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. <u>GOVERNANCE</u>

Following Stephen Otter's departure as Chair at the end of December 2017 Healthwatch Hillingdon would advise that Turkay Mahmoud will be acting as Chair whilst we undergo a recruitment process. A nomination for a substitute to attend the Health and Wellbeing Board will be submitted following the next Healthwatch Hillingdon Board meeting at the end of March 2018.

4. ACCOUNTS 2016-2017

The Healthwatch Hillingdon Accounts for 2016-17 were agreed by the Healthwatch Hillingdon Board in October 2017 and submitted to the Charities Commission and Companies House in December 2017.

A copy of the accounts verified by accountants Wilkins Kennedy are available at: <u>http://bit.ly/2CpWbLC</u>

5. 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 of 2017-18.

5.1. GP "extended hours appointments" survey

Our engagement on the views of residents on the 'extended hours appointments' being provided in primary care in the evenings and at weekends has finished. In total we had over 1000 responses. We are working to publish a full report of the results and if completed in time will provide copies for members of the Health and Wellbeing Board at this meeting.

5.2. Healthwatch Hillingdon 'Bridging the Gap'

The Local Government Association have published a best practice case study, which looks at how Healthwatch Hillingdon and the Health and Wellbeing Board have worked closely together to bring a focus to children and young people's emotional and mental wellbeing. The case study is taken from their forthcoming publication *'Lessons in local leadership and accountability for children's mental health services'*. http://bit.ly/2BmMGjs

5.3. Children and young people's emotional and mental wellbeing services

It is extremely pleasing to see recent performance data, which has shown a significant reduction in the number of young people from Hillingdon in NHS mental health inpatient beds. This is really good news, and a culmination of a great effort from Central North West London (CNWL) following additional funding by the Hillingdon Clinical Commissioning Group. CNWL have also been working hard to reduce waiting lists and treatment times in main stream children and adolescent mental health service and data also shows that targets are now being met.

We have also seen a renewed focus by Hillingdon Council and Hillingdon CCG on children and young people's emotional and mental wellbeing, and a real impetus to better

coordinate and improve prevention and early intervention services, and the support provided for children in schools.

After all the hard work that has gone into reducing waiting lists and the need for inpatient beds, Healthwatch Hillingdon would hope that this impetus marks a step change in the speed in which prevention and early intervention work is progressed.

As we have evidenced, this is a real opportunity to improve the health and wellbeing of the Borough's young people and not only further reduce the need for acute children and adolescent mental health services, but the adult services of the future.

5.4. Mental Health, Wellbeing and Life Skills Programme

Barnhill Community High School Pilot

We are over halfway through our delivery of the Mental Health, Wellbeing and Life Skills programme at Barnhill. To date the students have shared their mental health awareness campaign and delivered a mental health survey to the whole school. Early results of the survey have provided some very interesting insights into students' views and experiences of mental health. We are currently working with the school to help students who have expressed a support need. The next step for the students involved in this work will be to write a report on the survey's findings and present their work to the whole school and a delegation of professionals from the Council, Clinical Commissioning Group and NHS providers.

Northwood School

The learning taken from the pilot programme at Barnhill has already enable us to enhance the programme for future delivery.

This will be tested from late February when we begin the delivery a shortened version of the Mental Health, Wellbeing and Life Skills Programme with Year 10 students at Northwood School as part of their PSHE curriculum.

Global Academy

We would advise that Healthwatch Hillingdon have been selected by Global Academy in Hayes as the charity it's Year 12s will work with on their Enterprise Assignment Project. This project involves Year 12 students receiving a brief from different organisations and creating a multiplatform advertising and promotion content to fit this brief. We have given them the task to raise awareness of mental health with a particular focus on stigma and discrimination, encouraging young people to talk about mental health and to reach out for help when they need it. Students will pitch their ideas to us on Tuesday 20 March 2018. The media produced will then be used in a campaign to promote and widen the awareness of emotional and mental wellbeing across the borough.

5.5. Young Healthwatch Hillingdon (YHwH)

We have now recruited 17 young volunteers between the ages of 11 and 20 to our YHwH Programme. In partnership with the Council we delivered a welcome and training event during February half term. At the event our young volunteers received training to help build their knowledge, skills and confidence to begin their role with YHwH.

The programme is now accredited through the Council's Hillingdon Young Volunteer Awards project and we already have interest from organisations about involving YHwH in a variety of projects, which will see them engage with their peers to give children and young people in Hillingdon a voice.

6. ENQUIRIES FROM THE PUBLIC

Healthwatch Hillingdon recorded 247 enquiries from the public this quarter. This resulted in 118 people's experiences being logged on our Customer Relationship Management database and 129 residents being the recipient of our information, advice and signposting service.

6.1. Experiences

At the last Health and Wellbeing Board, members asked Healthwatch if we could provide overall trends and themes for the feedback we receive. The reasons for people contacting us is varied and therefore although there are trends and themes, as the next table shows, these are generally across different organisations and specialities.

Hospital Service	Social Care S	vs	Primary Care / Community Sv		Other Services	\$	
Accident & Emergency	6	Assisted Living		Community Nursing Service	2	Community Stroke Support	1
Acute services with overnight 1 beds		Care of the Elderly		Community Mental Health Team (CMHT)	4	Continuing Health Care	2
Audiology 1		Children Services	1	Community services for people with a learning disability	3	Equipment Service	1
General surgery	eneral surgery 1 Day Care		2	Community Transport	2	NHS 111	2
Maternity 2		Domiciliary Care/Care at home	1	Dentist	2	Other (Community services)	2
Ophthalmology 3		Nursing Care Home	1	GP Practice	16		
Orthopaedics	3	Occupational Therapy	1	Pharmacy	3		
Physiotherapy	1	Residential Care Home	2				
Acute Mental Health/ Psychiatry	5						
Renal Medicine	1						
Respiratory Medicine	1						

We do not feel that reporting these in this way would be beneficial to the Board, however, as we continue to monitor the experience data we receive, we do see exceptions and it is these that we have highlighted to the Board in the past and will continue to report.

<u>Overview</u>

Due to the nature of our service the majority of the 118 people who contact us to feedback on the service they had received, did so because they are unhappy with an element of their care. This quarter almost 70% of the experiences we recorded were negative, with 35 people listing their feedback as a complaint.

The top 5 reasons for negative feedback listed by people are:

Service delivery by organisation or staff	41	20%
Staff attitude	35	17%
Quality of care	23	11%
Other	20	10%
Quality of treatment	12	6%

These were as a result of a number of issues, the top 5 being:

Access to services	40	21%
Information provided	21	11%
Diagnosis	17	9%
Booking appointments	16	8%
Waiting times for treatment	14	7%

The top 5 professionals mentioned by people involved in their negative experience are:

Doctors	28	28%
All my care professionals	20	20%
Receptionists	12	12%
Nurses	11	11%
Administration	10	10%

Report by exception

This month there is a particular area we would bring to the Boards attention which we have identified, which although primary relates to the recommissioning of community dental services by NHS England it raises a wider question around the oversight of service procurement within the borough.

One of the complaints we received this quarter was from an individual who advised us they had been receiving the community dental service in Uxbridge provided by Central and North West London NHS FT for many years and they had now been told they would have to go to the Whittington Health NHS Trust, in Archway, North London.

On investigation we found that NHS England had undergone a pan-London procurement exercise to recommission all community dental services. NHS England advised that the contract in Hillingdon was awarded to the Whittington Health NHS Trust and although it was due to commence in April 2017, to date, this had not happened. They advised that this was because CNWL did not want to make their premises available to the successful bidder and the Whittington have been looking to secure alternative premises in Hillingdon to deliver the service. CNWL have advised that there are other reasons why they could not make the premises available and that they had informed NHS England from the outset of the procurement. In the interim NHS England have continued to provide a service to

Hillingdon patients by extending the contract they had with CNWL until such time as the new premises are found.

There was a similar outcome experienced when London Borough of Hillingdon Public Health carried out procurement of sexual health services in 2016/2017. Not only did the winning bidder have to find alternative premises, but the award of the contract had a destabilising effect upon the sustainability of the sexual wellbeing service at Hillingdon Hospital, provided for people living with HIV.

Regardless of the reasons behind the difficulties following these procurements, it does raise a general question for Healthwatch Hillingdon about the oversight of procurement in the Borough. Especially when run by external commissioners, such as NHS England.

We feel that mechanisms need to be put in place to give the Health and Wellbeing Board and External Services Scrutiny Committee, knowledge and oversight of such procurements. This should include receiving adequate assurances of how the residents of Hillingdon have informed the procurement. And how Hillingdon's wider health and social care economy are to be engaged in completing thorough impact assessments. Such a mechanism should ensure issues are foreseen during the procurement process and safeguard both the public and providers from the adverse effects to services we have highlighted in this report.

6.2. Signposting Service

During this quarter we recorded a total of 129 enquiries from residents which resulted in us providing information, advice, signposting or referral. 78 of these we would categorise as universal and 51, as a result of advising individuals following a complaint, or concern.

We continue to signpost to a wide range of statutory and voluntary organisations across health and social care. There is no pattern or major themes that have arisen this quarter, and when aggregating with previous quarters it shows the same varied picture.

How did we assist?	Qty	%
Signpost to a health or care service	45	38%
Signpost to voluntary sector service	42	36%
Requesting information / advice	22	19%
Requesting help / assistance	2	2%
General Enquiry	18	15%
Unknown	0	0%
Total	129	

Signposted to?	Qty	%
GP	15	13%
Voluntary - other	13	11%
Citizens Advice	12	10%
NHS - Other	11	9%
LBH - Social Services	8	7%
Mental Health	8	7%
DASH	8	7%

6.3. Referring to Advocacy

We have referred several individuals this quarter to make sure residents were supported with their issues. The majority of these where to POhWER for NHS complaints advocacy and Action against Medical Accidents (AvMA), for support following harm suffered during medical care.

Advocacy Referrals	Qty
POhWER	9
AvMA	4
LBH Safeguarding	2
NHS England GP Complaints	2
Total	17

7. ENGAGEMENT OVERVIEW

This quarter we directly engaged with over 2000 people through our targeted approach at a wide variety of community events. Our attendance enabled us to speak to residents of all ages, backgrounds and borough localities.

GP Access Project

Engagement activities for this quarter focused on gathering residents' views on the recently launched 'extended hours GP service', as part of our Access to GP Services project.

Between early November and late December; we spoke to over 1000 residents at various locations and events across Hillingdon and invited them to complete our survey to obtain their views on this service.

An online version of the survey was also available and extensively promoted throughout Hillingdon including; Hillingdon Council, Brunel University, the CCG, libraries and to many of the community groups we currently work in partnership with. This resulted in an additional 300 surveys being completed online.

Some of the events we attended this quarter as part of our engagement for this project included; Afternoon Tea at Hillingdon Fire station, Christmas Jumper Day at Hillingdon Sports and Leisure Complex and a Health & Wellbeing Day at Uxbridge College. We also hosted a stall in the waiting area of Mount Vernon Hospital and spoke to patients while they waited to be called for their appointments.

Our engagement for the GP Access Project also enabled us to raise awareness of the work of Healthwatch Hillingdon as we handed out Healthwatch literature to many of the residents we spoke to.

Young Peoples Projects

Our work in schools and with youth organisations to recruit our Young Healthwatch volunteers has enabled us to reach 766 young people and staff. As these projects become established the profile of Healthwatch and the individuals we can inform and help, is going to increase exponentially.

Hillingdon Carers Reading Group

At the Hillingdon Carers Reading Group which is held weekly at Yeading Library, we spoke with carers about their views on local services from a carers perspective. The group expressed their dissatisfaction at not being prioritised for GP appointments which was a

real issue for these carers because they have far less flexibility to see a GP because of their caring responsibilities

Afternoon tea at Hillingdon Fire Station

A highlight of our engagement this quarter was an invitation to host a stall at an afternoon tea event held at Hillingdon Fire Station before Christmas. Hillingdon Fire Station had opened its doors to 20 older residents who enjoyed tea, cakes and a lively Christmas Choir with the Borough Commander and his team.

We were one of only two stall holders invited to the event and the team at Hillingdon Fire Station were happy for us to speak to all the residents about our work and hand out literature.

Volunteering

This quarter our volunteers have continued to represent Healthwatch Hillingdon at meetings, at engagement events and in the office by editing our newsletter and entering data onto our CRM database.

However, due to the absence of our volunteer coordinator during September and October, some volunteers were unable to continue their role until their return. As a result, volunteers logged a total of 363 hours this quarter, which was significantly lower than the previous period.

We are confident that these figures will pick again during the next quarter as existing volunteers settle back into their roles and we recruit volunteers to fill new and vacant roles.

Social Media

Twitter followers have remained relatively unchanged over the current quarter with only a small increase between October – December 2017. However, figures for tweet impressions - which tell us how many times a tweet has been seen; almost doubled in October and November compared to the previous three quarters.

This this tells us that although we did not gain many followers over the last few months; there has been a significant increase in the number people who have seen our tweets. And interestingly, our most viewed tweet this quarter and in fact for the last 12 months was for our Access to GP services survey which gained over 11,000 impressions.

Post engagement figures for Facebook peaked in December with an engagement reach of 29. This figure reflects an increase in activity during December for instance we uploaded posts for Young Healthwatch, our GP survey and Healthwatch Christmas closure.

We continue to use Instagram as a visual platform for showcasing our work and although we do not report on the figures, we continue to build our followers. More recently we posted an image of our GP Access leaflets which generated likes and comments.

	October	November	December
Twitter Followers	1182	1187	1187
Tweet Impressions			
(1000s)	26,800	26700	15600
Post Visits	470	794	611
Facebook likes	415	416	412
Facebook Post			
Engagement	18	10	29

8. ENTER AND VIEW ACTIVITY

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Patient Led Assessments of Care Environments (PLACE)
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Healthwatch Hillingdon assessors continued to support The Hillingdon Hospitals NHS Foundation Trust by assisting in PLACE at both Hillingdon and Mount Vernon Hospitals. There were only 2 assessments scheduled for this quarter, in November, and 2 assessors joined the Trust on both days.

9. FINANCIAL STATEMENT

To end of Quarter 3 - 2017-2018

Income	£
Funding received from local authority to deliver local Healthwatch statutory activities	124,686
Bought forward 2016/2017*	5,886
Additional income	12,694
Total income	143,266
Expenditure	
Operational costs	9,763
Staffing costs	105,629
Office costs**	7,793
Total expenditure	123,185
Surplus to c/f	20,081

*Audited figure

**Rates and Insurance paid in month 1 for whole year

10. KEY PERFORMANCE INDICATORS

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 2017-2019.

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

KPI	Description	Relevant	Monthly		Q1			Q2			Q3			Q4		Accumula Totals	
no.	Priorit	Strategic Priority	Target 2017-18	2015- 2016	2016- 2017	2017- 2018	2015- 2016	2016- 2017	2017- 2018	2015- 2016	2016- 2017	2017- 2018	2015- 2016	2015- 2016	2017- 2018	Target	Actual
1	Hours contributed by volunteers	SP4	525	550	637	540	625	522	504	462	491	363	729	516		1575	1407
2	People directly engaged	SP1 SP4	300	354	434	220	333	270	675	250	634	2027	354	347		900	2922
3	New enquiries from the public	SP1 SP5	125	232	177	208	402	296	286	241	173	247	227	248		375	741
4	Referrals to complaints or advocacy services	SP5	N/A*	9	12	24	14	8	23	7	1	17	7	18		N/A*	64
5	Commissioner / Provider meetings	SP3 SP4 SP5 SP7	50	49	93	62	60	69	70	54	69	52	72	58		150	184
6	Consumer group meetings / events	SP1 SP7	10	22	16	26	25	15	23	10	15	13	22	22		30	62
7	Statutory reviews of service providers	SP5 SP4	N/A*	0	0	0	0	0	0	1	1	0	0	0		N/A*	0
8	Non-statutory reviews of service providers	SP5 SP4	N/A*	7	3	5	4	3	2	3	3	2	7	7		N/A*	9

*Targets are not set for these KPIs as measure is determined by reactive factors.