

HEALTHWATCH HILLINGDON UPDATE

Relevant Board Member(s)	Lynn Hill, Chair
Organisation	Healthwatch Hillingdon
Report author	Graham Hawkes, Chief Executive Officer, Healthwatch Hillingdon
Papers with report	Appendix A – Annual Report Appendix B – Musculoskeletal Review

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	External Services Select Committee
Ward(s) affected	N/A

RECOMMENDATION

That the Health and Wellbeing Board notes 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.
- 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://healthwatchhillington.org.uk/index.php/publications>)

3. GOVERNANCE

3.1. Healthwatch Hillingdon Board

We are pleased to advise that at the Healthwatch Hillingdon Board have appointed Beulah East and Joan Davis as a Trustee and Director of Healthwatch Hillingdon.

Beulah and Joan join the Board having served Hillingdon residents in different capacities for many years. Their extensive experience, knowledge and passion will bring an added dynamic to the organisation and the Board is looking forward to working with them.

Arlene Jobs has stepped down from her role as a Trustee and Director. We thank her for all her efforts during her tenure and wish her all the best for the future.

3.2. Healthwatch Hillingdon Annual Report 2017-18

Healthwatch Hillingdon published its Annual Report 2017-18 on 30 June 2018. As laid out in guidance, the report is formally submitted to the Hillingdon Health and Wellbeing Board as Appendix A.

3.3. Signposting Information and Advice Service

Our Signposting and Insight Co-ordinator started in May 2018. This new role incorporates the delivery of the Signposting Information and Advice Service. The core hours of the service are now from Monday to Friday, 10am to 2.30pm - available in person at our shop, or by telephone and email.

4. 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 of 2018-19.

4.1. Musculo-skeletal services report

As part of the review of musculoskeletal services, Healthwatch Hillingdon were commissioned by Hillingdon Clinical Commissioning Group to independently engage with current service users and residents. During late April and early May 2018, we spoke to 276 people at the Hillingdon and Mount Vernon Hospital sites, and at Central North West London's community settings, to capture their views of current services.

Overall, patients' experiences are positive. 91% were happy with the location of their treatment and found it easy to get to and 76% said the service has improved their health.

When asked how the service could be made better, patients asked for quicker access to treatment for their first appointment, for appointments to be more frequent and for their appointments to run on time.

Just over half of respondents said they would like a self-care guide to complement their treatment and help them manage their condition.

The full report is attached as Appendix B

4.2. Mental Health, Wellbeing and Life Skills Programme

We have been successful in securing a Partners for Health grant of £6,581 from London Catalyst and the Hospital Saturday Fund, to deliver 3 Life Skills and 5 Peer Support programmes in secondary schools. We will now be running 4 Mental Health, Wellbeing and Life Skills programmes concurrently between September 2018 and May 2019, starting at the Guru Nanak School in Hayes. Over the same period, we will be delivering a Peer Support programme in 5 secondary schools.

We are currently working with our partners in the Hillingdon Thrive Network to identify the appropriate schools to deliver these programmes.

4.3. Hillingdon Community Trust Award

Healthwatch Hillingdon is delighted to announce that Hillingdon Community Trust has voted us their Outstanding Small Project of the Year for our work in Barnhill School. We are really pleased to accept this award and for our Mental Health, Wellbeing and Life Skills programme to be recognised in this way.

4.4. National Healthwatch Award

We are also excited to be shortlisted for a National Healthwatch Award, in the 'Improving health and social care' category, for our work on discharge from hospital. Our submission will be judged on how we have used the experiences and views of people to help improve health and social care. If successful, we will be presented with the award at the Healthwatch England Awards Dinner in October 2018.

4.5. New low back pain and sciatica policy for North West London

Following the revision of the North West London Clinical Commissioning Group's policy for low back pain and sciatica, a decision was taken to no longer fund treatments such as some spinal injections and acupuncture because of limited evidence of clinical effectiveness. When this decision came into effect for Hillingdon patients in late June 2018, we were asked to work with the Hillingdon Clinical Commissioning Group and The Hillingdon Hospitals NHS Foundation Trust to support patients who were having their treatment plan changed.

Our contact details were included in the letter being sent to patients advising of the changes and we were delighted to be able to provide information and advice to patients and gather their views. We are currently continuing our interaction with these patients and would inform members of the Board at this early stage that we will be outlining a number of important learning points in our report, which we will provide for the next Health and Wellbeing Board.

4.6. Michael Sobell Hospice

The Board will be aware that the Michael Sobell Hospice site at Mount Vernon Hospital was recently closed at short notice and an interim measure has been put in place by the East and North Hertfordshire NHS Trust for inpatients of the hospice.

The closure of the hospice and uncertainty about future care had caused much public concern. Healthwatch Hillingdon want to ensure that the public are fully involved in the decisions taken on future hospice care in Hillingdon. We are therefore working with the public, Hillingdon Clinical Commissioning Group, East and North Hertfordshire and Hillingdon Hospitals NHS Trusts, The Hillingdon Hospitals NHS Foundation Trust and the Michael Sobell Hospice Charity, to ensure the public are involved in the design of services in a meaningful way and that hospice care in Hillingdon is co-produced with the public and meets the needs of the community.

4.7. Visual Impairment Reading Group

At the last Health and Wellbeing Board, we highlighted the issues raised by visually impaired residents of the difficulties they faced with signage at Hillingdon Hospital. As a result of this feedback, we contacted the hospital and are pleased to advise that the Facilities Department have invited us to carry out a signage audit in September 2018 with members of the reading group and other Healthwatch volunteers.

5. ENQUIRIES FROM THE PUBLIC

Healthwatch Hillingdon recorded 243 enquiries from the public this quarter. This resulted in 91 people's experiences being logged on our Customer Relationship Management database and 152 residents being the recipient of our information, advice and signposting service.

5.1. Experiences

Overview

During this first quarter, in addition to gathering feedback directly from individuals who contacted us, we have also captured people's experiences of the services that they have received via providers' websites and NHS Choices. It is interesting to note from this that the Minor Injuries Unit at Mount Vernon features largely in the overall figure for experiences and that all feedback received was positive. Feedback given on maternity services was also 100 per cent positive.

From the feedback we received this quarter on hospital services, the quality of care that patients received is still the largest category reported to us, although this quarter shows a higher number of positive feedback (n=18), compared with that for not positive/mixed (n=16). This is largely due to people's experiences of the Minor Injuries Unit, where residents have cited the quality of care, treatment, appointment and the organisation overall as favourable. In terms of residents' negative experiences, staff attitude features highly as an issue. Doctors and admin/receptionists represent the main staff categories that people have reported upon negatively for both hospital services and GP practices.

Although the number of experiences of GPs reported to us has decreased slightly this quarter, GPs still feature as the number one service residents report to us on after hospital

services. Of the 14 experiences captured, 10 of these were negative. People reported difficulties around patient choice, including issues with repeat prescriptions and where they were to be referred for treatment.

Table A

Hospital Services		Positive	Mixed	Neutral	Negative
Minor Injuries Unit	13	13	-	-	-
Maternity	4	4	-	-	-
Care of the Elderly	4	1	1	-	2
Phlebotomy	4	3	1	-	-
Ophthalmology	3	1	-	-	2
Orthopaedics	3	1	1	-	1
Accident & Emergency	3	1	-	-	2
Cancer Services	2	-	-	-	2
Radiography	2	-	-	-	2
Outpatients	2	1	-	1	0
Neurology	1	-	-	-	1
Nutrition & dietetics	1	-	1	-	
General Surgery	1	-	-	-	1
Haematology	1	1	-	-	-
Appointments	1	-	-	-	1
Continuing Care	1	-	-	-	1
Mental Health Services	2	-	1	-	1
Patient Transport	1	-	-	-	1
Breast screening	1	1	-	-	-
Cardiology	1	1	-	-	-
Sexual health	1	-	-	-	1
Physiotherapy	1	-	-	-	1
Renal Medicine	1	-	1	-	-
Urology	1	1	-	-	-
Social Services					
Care Home	2	-	-	-	2
Home Care	4	1	1	-	2
Primary Care Services					
GP	14	2	2	-	10
Dentist	4	-	1	1	2
Other Services					
Community Mental Health Team	3	-	-	-	3
Drug & Alcohol Services	1	-	-	-	1
CAMHS	1	1	-	-	-
Community other	2	-	-	-	2

Table B shows the categories of key staff that patients have indicated to us and Table C highlights the top 6 themes that people have reported to us. It should be noted that some patients name more than one member of staff and supply more than one theme in relation to their experience.

Table B

Key staff categories	Positive	Not positive
Doctors	3	13
Admin / Receptionist	4	12
All care professionals	21	11
Care/Support Workers	-	1
Nurses	7	3
Midwives	3	-
Service Manager	-	4
Allied care professionals	2	1

Table C

Key Themes	Number	Positive	Not positive	Mixed/ Neutral
Quality of care	34	18	15	1
Quality of organisation and staffing	25	15	10	-
Quality of treatment	21	12	5	4
Staff attitudes	18	2	10	4
Quality of appointment	16	12	3	1
Communication between staff and patients	11	6	3	2

Outcomes

We continue to provide support to residents in a variety of circumstances. One individual contacted us about concerns they had over a change in carers for their wife, who suffers from dementia. We were able to contact Social Services, who then ensured that the individual and his wife received the appropriate support during the change to new carers.

Another person enlisted our help following an appointment they'd had at the hospital, whereby a follow up letter was sent to their GP, the content of which the individual felt was inaccurate. We gave the individual the details of PALS at Hillingdon Hospital, along with a list of questions to ask. After this, the hospital wrote to the GP to correct the information in the letter and gave the person another longer appointment to discuss all their concerns about their condition and how they could manage it. The person came in to the Healthwatch Hillingdon office to thank us for our help.

Another individual needed help for their daughter who is disabled and in a nursing home and her only functions are her sight and hearing. They had been trying to get their daughter's ears syringed in the home but was told this was not possible. Healthwatch Hillingdon contacted the Clinical Commissioning Group (CCG) and CNWL Community Services. Under their contract, Community Services are unable to provide services in a nursing home but agreed that due to the situation they would go into the care home and syringe the person's ears if they received a referral from the GP. We also brought up the case at the CCG Care Home Group to raise the issue and look for a solution for residents in similar situations. This illustrates how the work that we do highlights areas where

improvements could be made to services. Similarly, in another case, we assisted a deaf and mute individual in contacting the DWP about their PIP claim because they were unable to do so themselves and could not find any other service able to help with this.

5.2. Signposting Service

During this quarter, we recorded a total of 152 enquiries from residents which resulted in us providing information, advice, signposting or referral. 103 of these we would categorise as universal and 49 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.

Outcomes

The following table illustrates the reasons for people contacting our service and the ways in which we can help them through signposting to appropriate organisations.

How did we assist?	Qty	%
Signpost to a health or care service	63	41%
Signpost to voluntary sector service	27	18%
Requesting information / advice	29	19%
Requesting help / assistance	1	1%
General Enquiry	32	21%
Unknown	0	0%
Total	152	

Signposted to?	Qty	%
Voluntary Sector other	22	18%
GP	12	10%
LBH - other	14	11%
NHS - other	7	6%
Hospital	8	9%
Age UK	24	19%

For example:

- An individual contacted us about their 94-year-old mother having a fall whilst in the hospital as a result of not receiving assistance when she called for it. We were able to give the individual the details of the PALS service, as well as informing them about how POHWER could support them in making a complaint.
- In another instance, an individual called to advise that their GP surgery could not provide an appointment for them to have their ears syringed for 3 weeks. The individual was having problems hearing and did not know where else to go. Healthwatch Hillingdon signposted them to a local private ear clinic. The individual visited the service on the same day and phoned us back to thank us for our help and stated they were "very happy and grateful".
- Another individual was unhappy with the dental treatment they were receiving and spoke to us about the options available to them. They decided they wanted to make a complaint, so we gave them details of NHS England's complaints service and the General Dental Council.

We have also started an in-house customer feedback box and can report so far that comments on the service we provide have been positive: "Very good customer service, help and support."

5.3. Referrals and Signposting to Advocacy

We continue to provide people with the information they need to make complaints about the services they have received, including signposting them to POhWER for advocacy support and to NHS England Complaints.

Advocacy Referrals & Signposting	Qty
POhWER	9
NHS England Complaints	12
Total	21

6. ENGAGEMENT

During this quarter, Healthwatch Hillingdon directly engaged with 444 people.

As previously referred to in 4.1, we spent the first part of the quarter surveying patients and raising awareness of Healthwatch Hillingdon as part of our engagement on MSK.

During the second half of this quarter, we took part in seven engagement events which included the Reap AGM, The Older People's Assembly, Disability Assembly and a Wellbeing Day at Hillingdon Leisure Complete. These engagement figures are presented in the table below.

Event	Attendance	Outcomes	Age Category				Communities of Interest
			Under 5s	6 - 21	22 - 65	Over 65	
Volunteers' Week stall - Pavilions Shopping Centre	300	45 people directly engaged			39	6	General Public
Volunteers' Week stall - Ruislip Manor Library	30	4 people directly engaged			4		General Public
Disability Assembly	110	11 people directly engaged			8	3	Disability
Reap AGM	80	20 people directly engaged		1	18	1	Refugees/ BAME
Hillingdon Carers Fair	300	32 people directly engaged		2	25	5	General Public and Carers
Older People's Assembly	90	8 people directly engaged			3	5	Older People
Health & Wellbeing Day - Hillingdon Sports & Leisure Complex	80	10 people directly engaged		8	2		General Public
Men's Health week - Hillingdon Sports & Leisure Complex	60	5 people directly engaged			5		General Public
Total	1050	135		11	104	20	

Highlights

Volunteers' Week

We celebrated Volunteers' Week (1st-7th June), by organising volunteer events at the Pavilions Shopping Centre in Uxbridge and Ruislip Manor Library. The events were a great way to raise awareness of the benefits of volunteering as well as to promote our current volunteering opportunities to the public. Our stall at the Pavilions Shopping Centre was particularly busy with at least a dozen shoppers expressing an interest in volunteering with Healthwatch.

As part of Volunteers' Week, we also invited our volunteers to join us for a thank you lunch in recognition of the volunteering efforts.

Hillingdon Carers Fair

We held a stand at the annual Hillingdon Carers Fair which took place on Tuesday 12 June at the Pavilions Shopping Centre. The event was attended by over 30 organisations and was visited by the Deputy Mayor of Hillingdon. We spoke to over 30 people during the event, some of whom were carers and we shared information about the services of Healthwatch Hillingdon. We also did lots of networking and connected with new services.

Volunteering

Our volunteers undertook 629 hours volunteering this quarter. They supported us at the Reap AGM, Hillingdon Carers Fair, The Older People's Assembly and helped to conduct surveys at Mount Vernon, Harefield, and The Hillingdon Hospital as part of our MSK engagement.

Our Young Healthwatch completed 127 hours; attending training sessions, representing Healthwatch Hillingdon in the community and being part of the PLACE Assessment programme outlined in Item 7 below.

Our volunteer recruitment is ongoing and we are currently recruiting a volunteer to edit our bi-monthly newsletter and are liaising with Mencap to look at possibly providing volunteer opportunities to some of their clients currently in further education.

Social Media

Our social networks have continued to grow and remain an effective way of sharing our work and news to a wider audience. Our recent tweets and Facebook posts included a link to our published annual report and MSK survey. Our most popular tweets included the Community Mental Health Survey, the 'NHS Go' app and our stand promotion at Hillingdon Carers Fair. We have increased our Facebook Likes this quarter from 417 to 421 and we have seen a significant increase in the number of people following us on Instagram, surpassing 200 followers. This is positive because it indicates to us that our followers like the content.

	April	May	June
Twitter Followers	1,219	1,223	1,227
Tweet Impressions (1000s)	6,862	8,471	5,171
Post Visits	217	141	120
Facebook likes	417	420	421
Facebook Engagement	69	4	46
Post Reach	147	8	29

7. ENTER AND VIEW ACTIVITY

Patient Led Assessments of Care Environments (PLACE)

PLACE is a national programme that is run between April and May each year. Public assessors are involved in the inspection of wards, outpatient areas, internal communal areas, external grounds and buildings and the assessment of patient's food. PLACE gives hospitals, hospices and day treatment centres a clear picture of how their environment is seen by those using it and how it can be improved.

In April and May 2018, 15 Healthwatch Hillingdon volunteer assessors carried out 116 hours of assessment over 7 separate days at the Woodlands and Riverside Centres for CNWL, and at both Hillingdon and Mount Vernon Hospitals. This included an overall assessment of 13 wards, 4 ward food assessments, 6 outpatient areas, the A&E, communal internal areas and external grounds.

The results of the assessments will be published later this year and will show how the organisations are performing locally and nationally against other NHS organisations.

8. FINANCIAL STATEMENT

To end of Quarter 1 - 2018-2019

Income	£
Funding received from local authority to deliver local Healthwatch statutory activities	39,500
Bought forward 2017/2018*	34,685
Additional income	-
Total income	74,185
Expenditure	
Operational costs	4,017
Staffing costs	28,014
Office costs	4,475
Total expenditure	36,506
Surplus to c/f	37,679

*Provisional, awaiting audited figure.

9. 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 during Quarter 1:

KPI no.	Description	Relevant Strategic Priority	Monthly Target 2018-19	Q1		
				2016-2017	2017-2018	2018-2019
1	Hours contributed by volunteers	SP4	525	637	540	629
2	People directly engaged	SP1 SP4	330	434	220	444
3	New enquiries from the public	SP1 SP5	200	177	208	243
4	Referrals to complaints or advocacy services	SP5	N/A*	12	24	21
5	Commissioner / Provider meetings	SP3 SP4 SP5 SP7	50	93	62	62
6	Consumer group meetings / events	SP1 SP7	15	16	26	19
7	Statutory reviews of service providers	SP5 SP4	N/A*	0	0	0
8	Non-statutory reviews of service providers	SP5 SP4	N/A*	3	5	3

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