

HEALTHWATCH HILLINGDON UPDATE

Relevant Board Member(s)	Lynn Hill, Chair
Organisation	Healthwatch Hillingdon
Report author	Turkay Mahmoud, Interim Chief Executive Officer, Healthwatch Hillingdon
Papers with report	Appendix 1: Wayfinding and Signage Report - The Hillingdon Hospital

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 the website: (<http://healthwatchhillingdon.org.uk/index.php/publications>).

3. GOVERNANCE

3.1. Chief Executive Officer

Chief Executive Officer (CEO), Graham Hawkes, left Healthwatch Hillingdon on 30 November 2018. The interim CEO, Turkay Mahmoud, has commenced the recruitment process for a new CEO. Following an unsuccessful recruitment in December, a further advert has gone out to recruit. Shortlisting was planned for 11 February 2019 with interviews taking place on 16 February 2019.

4. OUTCOMES

Healthwatch Hillingdon wishes to draw the Health and Wellbeing Board's attention to some of the outcomes highlighted by its work during the third quarter of 2018-19.

4.1. Young Healthwatch Hillingdon (YHwH)

In this quarter, YHwH took part in a workshop about body image and self-esteem by Brook - the national sexual health charity for under 25s. We took part in the workshop and then gave our feedback to help ensure that it is relevant to young people and is up to date as well as interesting! We suggested new videos and campaigns on this topic to be added to the workshop and Brook took the feedback on board and found it useful. We also took part in another one of Brook's workshops, about Healthy Relationships. These workshops were another way for YHwH to make the voices of young people heard about health services provided for them.

YHwH wanted to find out how decisions made by Hillingdon Clinical Commissioning Group (HCCG) affected young people in our community. We asked for a tour and question and answer session with the heads of departments within the organisation to get a picture of what it does, how they choose which areas to invest in and how they could improve services provided for young people. The CCG voiced how important it is for the views of young people to have equal representation and how much they would benefit from receiving feedback from YHwH, on behalf of young people, about services they provide for young people already. YHwH received an insight into the world of the CCG and were happy to discover the immense amount of hard work and determination that the organisation puts in, in order to contribute to Hillingdon and, ultimately, improve services for young people.

4.2 Young Healthwatch Hillingdon Presentation

Due to the expansion and excellent work of our YHwH, we have been invited to present at a London event organised by London Funders for their Children and Young People Network Group. The event will focus on, 'How funders can ensure that they support organisations to consult and involve C&YP in a meaningful way'.

4.3 Implementation of new low back pain and sciatica policy in Hillingdon

Following the implementation of the decision to decommission some spinal injections and acupuncture in June 2018, we have been working with the Hillingdon Clinical Commissioning Group and The Hillingdon Hospitals NHS Foundation Trust to support patients who were having their treatment plan changed. The draft report is still being agreed with stakeholders to give them an opportunity to check the document for factual accuracy before publication.

4.4 Local Elective Access Policy

Healthwatch volunteers have been reviewing the Hillingdon Hospital Trust's patient friendly version of their Local Elective Access Policy. Volunteers (also patients of THH) considered the document and fed back their comments to Healthwatch. The Hillingdon Hospital said they will make changes to the document accordingly and produce an updated version.

5. ENQUIRIES FROM THE PUBLIC

Healthwatch Hillingdon recorded 215 enquiries from the public this quarter. This saw 45 people's experiences being logged on our Customer Relationship Management database and 170 residents being the recipients of our information, advice and signposting service.

5.1. Experiences

Overview

Table A illustrates that feedback for hospital services this quarter was fairly balanced between positive and negative experiences, although slightly more negative (52%). The hospital service that people reported most on was Accident and Emergency, with people's experiences overall in terms of the Quality of Care; Quality of Staffing; Quality of treatment; Service delivery, organisation and staffing being more positive (12%) than negative (10%).

Outside of hospital services, GPs were again the number one service residents gave feedback on. Seven experiences were captured this quarter, all being negative. The reasons cited for these were: residents feeling their GP is not listening to their concerns, nor providing them with information; issues around prescriptions; and waiting times to get an appointment. People also reported on negative experiences with dental surgeries. In terms of 'Other Services' (Community Mental Health Team, Drug & Alcohol Services, CAMHS), we recorded five experiences, all of which were negative. Issues here were around access to services, with waiting times for referrals/appointments being cited.

Table A

Hospital Services	Positive	Mixed	Neutral	Negative
Pain Management Clinics	0	1	0	1
Minor Injuries Unit	0	0	0	1
Accident & Emergency	4	0	0	3
Maternity	1	0	0	1
Care of the Elderly	0	1	0	1

Hospital Services		Positive	Mixed	Neutral	Negative
Paramedics		1	0	0	0
Ophthalmology		1	0	0	0
Interpreters		0	0	0	1
Cancer Services		1	0	0	1
Radiography		0	0	0	1
Neurology		0	0	1	1
Acute Services		0	0	0	1
General Surgery		2	0	0	0
Orthopaedics		0	0	0	1
Gastroenterology		0	0	0	1
Cardiology		1	0	0	0
Outpatients		1	0	0	0
Social Services					
Care Home		0	0	0	1
Home Care		0	0	0	1
Primary Care Services					
GP		0	0	0	7
Dentist		0	0	0	2
Other Services					
Community Mental Health Team		0	0	0	3
Drug & Alcohol Services		0	0	0	1
CAMHS		0	0	0	1

Table B indicates the categories of key staff that patients have listed in their feedback to us and Table C highlights the top 5 themes that people have reported upon. It should be noted that some patients name more than one member of staff and supply more than one reason for the disappointment with their experience. Doctors still received the highest negative feedback.

Table B

Key staff categories	Positive	Not positive	Mixed/Neutral
Doctors	2	6	1
Admin / Receptionist	-	3	1
All care professionals	2	1	-
Care/Support Workers	-	1	-
Nurses	3	2	-
Allied Care Professionals	1	-	1
Paramedics	1	-	-
Maternity	1	-	-

In terms of themes, the main concerns this quarter were the quality of care and treatment people received, and the delivery of the service itself. Staff attitudes featured highly in residents' negative experiences, relating to communication and information provided.

Table C

Key Themes	Positive	Not positive	Mixed/Neutral
Access to services	1	3	1
Quality of care	6	5	-
Service delivery, organisation and staffing	1	3	1
Staff attitudes	-	4	1
Quality of treatment	-	6	1
Quality of appointment	1	1	-
Communication between staff and patients	-	5	-

5.2 Healthwatch Support

Residents continue to seek support from us in a variety of circumstances.

- One individual contacted us for advice when the care home where their father resides told the family that their father needed a hospital bed, and that the family had to provide it. The individual wanted to know whether they should have to do this; particularly given the fact that the care home already had a spare hospital bed in another room but said they would not be able to move it to their father's room. We gave the individual information on how a local authority needs assessment works, and how individuals can be assessed if their needs change, including whilst in a care home, plus what happens if someone is assessed as needing nursing care. We also gave them information on what you can expect from a good care home, and details of how to complain should they wish to. Healthwatch was able to advise the individual that if their father's needs have been deemed to have changed, social services should be contacted about carrying out a new care needs assessment. We informed the individual that we would make some enquiries regarding the hospital bed issue. The individual subsequently called back to say that social services had contacted them to inform them that they would be supplying a bed for their father to use in the home. The social worker also suggested that it might be more appropriate for their father to be moved to a nursing home. The individual was grateful to Healthwatch Hillingdon for making them aware of the needs assessment process.
- In another case, we were contacted by a worker at the charity organisation DeafPLUS, that provides support to dumb/deaf and hard of hearing individuals, to raise concerns on behalf of a resident of Hillingdon who has had bad experiences on several occasions with the hospital's interpreter agency which, they say, isn't acceptable or appropriate for deaf/hard of hearing individuals, due to the fact they aren't specialised in those areas. We contacted the CCG, who advised us that they will follow it up through their quality route with the Hillingdon Hospitals NHS Foundation Trust and request assurance on any actions that have been taken as a result of the feedback and complaints received, along with how the hospital ensure they fulfil their equality duties with particular respect to deaf and hard of hearing patients.
- Our service continues to point residents towards organisations that can provide them with information, advice and appropriate assistance for their needs. For example, we were contacted by an 88-year-old individual who had been told by their GP that they had been referred to the community matron service and therefore "cannot contact the GP again, or speak to a doctor". The individual was concerned by this, as they did not understand the reasons why they are now under the care of the community matron particularly if it meant they were no longer able to see a GP. Healthwatch was able to explain to the individual that community matrons are part of the Care Connection Team to help manage patients' long-term health conditions, but the individual is still able to

contact a GP when necessary. To help them further understand how this works, we gave the individual contact details for the Care Connection Team and some printed information about the service.

- We also helped an individual in their late 80s who underwent knee replacement surgery at Nuffield Orthopaedic Hospital. Their GP said they cannot authorise hospital transport to take them to their follow up appointment because the hospital is too far and outside the GP's catchment. The individual has had to book a taxi for the appointment which will cost £160. We were able to help by signposting the patient to the Healthcare Travel Cost Scheme, to see if the individual might be able to recoup the cost.

5.3 Signposting Service

During this quarter, we recorded a total of 170 enquiries from residents which resulted in us providing information, advice, signposting or referral. 128 of these we would categorise as universal and 42 as a result of advising individuals following a complaint, or concern.

We signpost individuals to a wide range of statutory and voluntary organisations across health and social care. 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	%	Signposted to?	Qty	%
Signpost to a health or care service	58	34%	Voluntary Sector other	24	18%
Signpost to voluntary sector service	42	25%	NHS - other	14	9%
Requesting information / advice	44	26%	Mental Health	11	8%
Requesting help / assistance	1	1%	NHSE	10	8%
General Enquiry	25	15%	Hospital	10	7%
Unknown	0	0%	Social Services	9	6%
Total	170		CAB	9	6%

6. REFERRING 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 and AVMA for advocacy support (see table below).

Advocacy Referrals	Qty
POhWER	16
AVMA	2
Total	18

7. ENGAGEMENT

During this quarter, Healthwatch Hillingdon directly engaged with 427 people through the course of its activities. Our Outreach and Volunteer Officer directly engaged with 248 members of the public at 10 engagement events across Hillingdon. We held information stalls at the Older People's Assembly, Yiewsley Library, Hillingdon Carers AGM and Hayes Muslim Centre. We also listened to residents' views and experiences of health and care services at the Amigos Visual Impairment Group, Each counselling group and Yiewsley Library.

In addition to the above, we engaged with approximately 1,906 C&YP at three schools with our Mental Health and Well Being Life Skills programme. Many of these were involved through surveys and campaigns led by students of the schools and supported by our Community Engagement Officer (C&YP).

Event	Attendance	Outcomes	Age Category				Communities of Interest
			Under 5s	6 - 21	22 - 65	Over 65	
Hillingdon Leisure Centre	14	X 14 people spoken to			11	3	General Public
Information stall – Ruislip Manor Library	27	X 27 people spoken to X 2 feedback forms collected			1	26	General Public
Each counselling group	7	X 7 people spoken to			7		General Public
Hillingdon Carers AGM	90	X 15 people spoken to			8	7	General Public
Assembly for older people	80	X 6 people spoken to			1	5	General Public
Information Stall – Yiewsley Library	15	X 3 people spoken to			3		General Public
Amigo's Visual Impairment Group	9	Group feedback (9 people)			7	2	General Public
Yiewsley Library Conversational English Group	15	X 3 spoken to			1	2	General Public
Hayes Muslim Centre	700	X 150 people spoken to X 2 feedback forms collected			120	30	General Public
Hillingdon Carers Leisure Complex	100	X 14 people spoken to			12	2	General Public
Total	1057	248			171	77	

Key highlights:

Hayes Muslim Centre

In November 2018, we were invited to the Hayes Muslim Centre in Hayes Town to engage with worshippers attending the Mosque. After several attempts to make contact the Centre, we were delighted to have the opportunity to connect with them. We set up a stand in the foyer area and spoke to worshippers after they had finished prayers. We spoke to approximately 150 people and handed out dozens of Healthwatch Hillingdon leaflets. We also signposted individuals to other services, including a gentleman who sought advice on making a complaint against his daughter's orthodontist. The day proved extremely productive for us and the founder of the Centre has asked us to return and speak at their women's coffee morning.

Amigos Visual Impairment Group

We previously visited the Amigos Visual Impairment Group in September to gauge their interest in taking part in a 'Wayfinding' and signage review at The Hillingdon Hospital. We revisited the group in November by invitation to listen to their experiences of accessing health and care services.

The group were very open and willingly shared views and experiences. One individual in the group recounted an experience he had at his dentist. He told us that when he arrived for an appointment, the receptionist directed him to the treatment room but forgot to mention that there was a step ahead of him. As a result, he tripped and hurt himself.

Overall, it was felt by the group that where frontline staff had an awareness of their disability, the experience they received was positive. They suggested that all frontline staff undertake disability awareness training as part of their role.

Wayfinding and Signage Review at Hillingdon Hospital

As a result of the feedback shared with us by the above group regarding the challenges they faced when navigating their way around the hospital, a wayfinding/signage review was carried out at Hillingdon Hospital on 22 October 2018.

The review was undertaken by a group of 7 acute sighted/impaired and blind volunteers from Hillingdon Visual Impairment Reading Group and the Amigos Visual Impairment Group. The volunteers were split into 3 groups, two led by Healthwatch Hillingdon staff members and the third by a representative of The Hillingdon Hospital. The volunteers were then asked to find their way around the hospital using the signs located around the hospital as a guide.

The findings were welcomed by the Assistant Director of the Hillingdon Hospital NHS Foundation Trust, who has taken action to get the signage improved. However, there have been technical issues which have prevented the replacement of signage, but we are assured it will be done as soon as these issues are resolved.

Assistance is key for visitors with very little or no sight and this will be supported going forward by volunteers in the Trust's volunteer service, which is being re-launched. Volunteer roles are being advertised, one role being a 'Meet, Greet and Guide' role.

With the support of three students from the Globe Academy, we are creating audio files so that the report can be accessible to the wider community through our website.

8. VOLUNTEERING

Volunteers contributed 729 volunteering hours this quarter. It is pleasing to note that this is the third consecutive increase in volunteer hours.

Over the coming months we plan to focus more of our efforts on recruiting volunteers to our engagement roles and will be holding a series of recruitment events across the Borough to recruit volunteers to fill these roles.

Social Media

We have seen a steady increase in twitter followers between October and December which is really positive when you compare it to the previous quarter. Facebook Likes have risen to 435, the largest increase we have had in any previous quarter. This tells us that people are interacting positively to our Facebook posts.

	October	November	December
Twitter Followers	1225	1234	1238
Twitter Impressions	3837	3499	2166
Profile Visits	177	98	433
Facebook Likes	425	433	435
Facebook Post Reach	1536	939	990
Facebook Post Engagement	115	28	78

9. FINANCIAL STATEMENT

To end of Quarter 3 (2018-2019)

Income	£
Funding received from local authority to deliver local Healthwatch statutory activities	118, 500
Bought forward 2017/2018*	34, 685
Additional income	-
Total income	153,185
Expenditure	
Operational costs	7, 850
Staffing costs	88, 913
Office costs	14, 895
Total expenditure	111, 658
Surplus to c/f	*41, 527

*Provisional, awaiting audited figure. The figure also includes contingencies (£20,000 for office rent and staff redundancies)

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 during Quarter 3.

KPI no.	Description	Relevant Strategic Priority	Monthly Target 2018-19	Q1			Q2			Q3			Q4			Accumulative Totals	
				2016-2017	2017-2018	2018-2019	2016-2017	2017-2018	2018-2019	2016-2017	2017-2018	2018-2019	2016-2017	2017-2018	2018-2019	Target	Actual
1	Hours contributed by volunteers	SP4	525	637	540	629	522	504	689	491	363	729	516	564		1050	1218
2	People directly engaged	SP1	330	434	220	444	270	675	713	634	2027	427	347	440		660	1157
		SP4															
3	New enquiries from the public	SP1	200	177	208	243	296	286	267	173	247	215	248	235		400	510
		SP5															
4	Referrals to complaints or advocacy services	SP5	N/A*	12	24	21	8	23	13	1	17	18	18	6		N/A*	34
5	Commissioner / provider meetings	SP3	50	93	62	62	69	70	52	69	52	52	58	49		100	114
		SP4															
		SP5															
		SP7															
6	Consumer group meetings / events	SP1	15	16	26	19	15	23	18	15	13	14	22	31		30	37
		SP7															
7	Statutory reviews of service providers	SP5	N/A*	0	0	0	0	0	0	1	0	0	0	0		N/A*	0
		SP4															
8	Non-statutory reviews of service providers	SP5	N/A*	3	5	3	3	2	2	3	2	2	7	1		N/A*	5
		SP4															

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