

HEALTHWATCH HILLINGDON UPDATE

Relevant Board Member(s)	Lynn Hill, Chair
Organisation	Healthwatch Hillingdon
Report author	Daniel West, Managing Director, Healthwatch Hillingdon
Papers with report	N/A

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 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 Managing Director to the Directors/Trustees at the Healthwatch Hillingdon Board meetings and is available to view on the website:

3. **GOVERNANCE**

3.1. **Signposting and Insight Coordinator**

From January 2020, Healthwatch Hillingdon (HwH) has appointed a second Signposting and Insight Coordinate, Vinaya Kulkarni. This now enables 5 day dedicated signposting and will facilitate increased scope for public feedback, information and advice and reporting capabilities.

Following the appointment of Daniel West to the position of Managing Director, Interim CEO Turkey Mahmoud has re-joined the board of trustees as Vice Chair.

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 2019-20.

4.1. **Access to dentistry for people with disabilities**

During 2019, a review of the accessibility of dentistry services in Hillingdon was undertaken. Initially envisioned as an exercise to evaluate access for people with mobility issues, during the research it was ascertained that a significant number of practices did not fully cater for patients with physical disabilities or sensory impairments.

Using a mystery shopper method, 19 face to face visits were performed by volunteers at NHS funded dentists, recording details on parking, toilet facilities, BSL services, induction loops, step free access, large print/easy read material, lighting and access via public transport.

The review found that, of the 19 practices visited, none were fully accessible to disabled people or people with limited mobility. 53% of the practices visited did not have step free access, 79% did not provide an induction loop, and only 5% had designated disabled parking bays. Whilst physical changes to premises are acknowledged to be costly and impractical in certain cases, lower-impact changes such as installation of hearing loops and braille services would improve access. During the research, it was also discovered that information on the NHS website for dentists was out of date, with several instances of information for practices not being updated since 2010. Given the disparity of the facilities' description on the website and what was available at the time of visit, patients may be dissuaded from attending a given practice if they have requirements that they do not believe will be met – despite the possibility that access may have since improved.

As a result of this review, HwH has recommended the following actions:

- All NHS dental practices should undertake an audit of their disabled facilities and aids and ensure their information is regularly updated on the NHS website (www.nhs.uk). This will provide patients who may use the site to look for an accessible dentist with current information.
- All practices should work towards the full implementation of the Accessibility Information Standard to ensure patients have access to the communication support

they need. This should include the provision of hearing loops, access to BSL interpreters and access to information in an alternative format. More information can be found at: <https://www.england.nhs.uk/ourwork/accessibleinfo/>.

- Where possible, new practices should be planned or adapted to ensure they are fully accessible for wheelchair users and people with mobility issues.

This report can be found on our website at: <https://healthwatchhillingdon.org.uk/news-and-reports>

4.2. Mental Health, Wellbeing and Life Skills (MHWB) Programme and Peer Support Training (PST) Programme for Schools

With the MHWB and PST programmes now complete, the final report has now been produced. Delivered across 8 schools in the Borough, the programmes were evaluated against the following key outcomes:

Mental Health, Wellbeing and Life Skills

1. An increase in the % of participants/students who agree that they know how to improve and protect their own mental health.
2. An increase in the % of participants/students who agree they know where to go for mental health information and support.

For both outcomes, an increase was recorded for both direct (students who participated in the learning sessions and delivered the campaign) and indirect (a sample of the whole school's students) beneficiaries in the 5 schools the programme was delivered in.

Peer Support Training

1. The knowledge and confidence of participants following the training.
2. If the peer support provided by the trained students had a positive impact on the emotional wellbeing of the students using the service.

Across the two schools in which we delivered the training, data shows that: **94.6%** of participants agreed to the statement "The Peer Support Training Programme has given me a better understanding of mental health and wellbeing", **94.6%** of participants agreed to the statement "The Peer Support Training Programme has prepared me for my role as a Peer Supporter", and **87.5%** of Peer Support Service users reported the service had a positive impact on their emotional health and wellbeing.

Additional outcomes as part of the MHWB and PST programmes include 3 schools continuing to hold assemblies and sessions beyond the completion of the HwH project, the reporting of safeguarding issues that may not have otherwise come to light, a request for further peer support training due to its success, and a number of direct beneficiaries joining Young HwH.

This report can be found on our website at: <https://healthwatchhillingdon.org.uk/news-and-reports>

4.3. Hillingdon Sexual Health Services Review – Mystery Shopping Report

NB: this report was originally due to be included as part of the cancelled December 2019 Health and Wellbeing Board meeting.

As part of the sexual and reproductive health services review initiated by Public Health Hillingdon, Young Healthwatch Hillingdon (YHwH) was invited to conduct a mystery shopper exercise to ensure the services met the needs of local young people (YP).

Carried out by 7 YHwH members, services were identified and mystery shopper scenarios were devised that would address diverse situation and barriers that CYP may face:

- Young person (YP) is in a new relationship, thinking of having sex but wanting advice and information.
- YP had sex with a partner and the condom split so looking for information and advice.
- YP had missed a contraceptive pill but continued to have sex. Nervous to go to regular GP (who provides prescription) for advice and information.
- MSM (men who have sex with men) YP with older partner who suggested trying chemsex. YP is uncertain and looking for information and advice.

Activities included 10 clinic and 8 pharmacy visits, telephone calls for appointment booking and advice and information and detailed reviews of online services. Findings and recommendations have been made based on the service types, with some key points being:

- Online Services - Clearer pathways to information, with a more complete range of services that can be accessed.
- Telephone Services – With inconsistent results and difficulty accessing the services, a digital route was preferred by YHwH.
- Pharmacies – Mixed experiences with information and advice provided being a positive point, but suitable spaces for confidentiality was raised as a concern.
- Clinics – With staff cited as being friendly helpful, certain pathways to booking appointments were less straightforward than expected. Discretion was another common theme, ranging from signage to where conversations could be conducted.

This report is attached, and can be found on our website at:

<https://healthwatchhillington.org.uk/news-and-reports>

4.4. Young Healthwatch Hillingdon (YHwH)

In Q3, YHwH members completed 77 volunteering hours across the following activities:

- 3 panel meetings to plan and discuss YHwH work;
- Hosting a stall at the annual LBH Care Leavers' Conference;
- Facilitating a workshop with young people with long term health conditions as part of the NHS Takeover Challenge Transitions Project;
- Provided feedback to representatives from Hillingdon Hospital about the THH Safeguarding Strategy; and
- Creating the annual YHwH newsletter.

Other engagement activity conducted by CYP Community Engagement Officer:

- Providing support to Healthwatch Central West London in the development of Young Healthwatch Westminster.

- Interviewing and training 5 new members of YHwH.
- Meeting with representatives from P3 to discuss the development of a peer mentoring programme linked to YHwH.
- Attending various strategic meetings including:
 - 2 CYP Task and Finish Group meetings (led by HCCG)
 - 1 CYP Wellbeing Early Intervention and Prevention Co-design Group
 - 1 Early Intervention, Self-care and Prevention Steering Group
 - 1 Local Safeguarding Children Board
 - 1 LBH Obesity Strategy Group

5. **ENQUIRIES FROM THE PUBLIC**

Healthwatch Hillingdon recorded 206 enquiries from the public this quarter. This saw 33 people's experiences being logged on our Customer Relationship Management database and 173 residents being the recipients of our information, advice and signposting service.

5.1. **Experiences**

Overview

Table A illustrates that the hospital service people reported most on this quarter was Accident and Emergency - feedback being more negative than positive - with issues around admission and communication among patients and staff. On the other hand, the departments with the next highest feedback received - the Minor Injuries Unit and Cancer Services, both at Mount Vernon Hospital - was 100% positive.

Outside of hospital services, GPs were again the number one service residents gave feedback on, with three negative experiences recorded and one positive. The reasons cited for these were: staff attitudes and communication; and waiting times to get an appointment. This quarter, there were also negative experiences recorded with dental surgeries. Following the report into accessibility in dentistry services, further investigation will be performed by HwH to understand challenges faced by the public, and the potential negative effects on oral health.

Table A

Hospital Services	Positive	Mixed	Neutral	Negative
Accident & Emergency	1	-	-	2
Outpatients	-	-	-	1
Pain management clinics	-	-	-	1
Minor injuries unit	2	-	-	-
Cancer Services	2	-	-	-
General Surgery	-	-	-	1
Patient Transport	-	-	-	1
Paediatrics	1	-	-	-
Care of the Elderly	1	-	-	-
Cardiology	1	-	-	1
Acute care	-	-	-	1
Obstetrics & gynae	1	-	-	-
Phlebotomy	1	-	-	-

Social Services	Positive	Mixed	Neutral	Negative
Care Home	-	-	-	-
Home Care	-	-	-	1
Primary Care Services	Positive	Mixed	Neutral	Negative
GP	1	1	-	3
Dentist	-	-	-	2
Other Services	Positive	Mixed	Neutral	Negative
Community Mental Health Team	-	-	-	-
CAMHS	-	-	-	-
Podiatry	-	-	-	1

Table B (below) indicates the categories of key staff that patients have listed in their feedback to us and *Table C* highlights the top 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, with this centring around communication, access to services and diagnosis. The next highest category was Administrative staff – all feedback received was negative. Booking appointments was the main issue patients reported having difficulties.

In terms of themes, the main concerns were staff attitudes and communication between staff and patients. Quality of care and treatment received the most positive feedback, along with the delivery of the service itself.

Table B

Key staff categories	Positive	Not positive	Mixed/Neutral
Doctors	2	5	-
Admin / Receptionist	-	6	-
All Care Professionals	4	-	-
Allied Care Professionals	-	1	-

Table C

Key Themes	Positive	Not positive	Mixed/Neutral
Health & safety	-	-	1
Quality of care	7	-	-
Service delivery, organisation and staffing	6	2	-
Staff attitudes	2	3	-
Quality of treatment	6	1	-
Communication between staff and patients	1	4	-

5.2 Healthwatch Support

Residents continue to seek support from HwH in a variety of circumstances, for example:

- We were contacted by an individual whose husband is using the services of Opcare. The husband had been having problems getting the right equipment for his wheelchair since the beginning of 2019. There had been a long wait for the seat and back rest, which, when finally received, were not comfortable or safe. The couple felt

that they had not been listened to and their needs were not being addressed. They came to HwH to seek advice on getting more help. HwH contacted Opcare about this and was assured by the regional services manager that they would get the situation looked into. We then heard back from the service user who told us: "I've had a call from Opcare, it's fantastic. Thank you for all your help. I'm so pleased I dropped into your service."

- We were contacted by a family member of a resident who was trying to re-register with their local GP practice, but were refused. The resident had recently been taken off the SAS (Special Allocation Scheme) and advised to return to their preferred practice following discharge. However, the local practice had not been informed that they were no longer part of the scheme. Due to medication needed for the resident, they were forced to attend Hillingdon Hospital in order to be prescribed the medication, which was not only impractical but also recognised by those affected as a 'waste of hospital time'. HwH liaised with the CCG to understand the process for refusing registration and informed the family member that 2 other local GPs had been advised as alternatives. The resident has since been registered with one of these practices.
- Phone call received from a person who helps a wheelchair user who has dementia and other issues. The person told us how the individual had waited so long for the hospital transport to take them to Hammersmith Hospital that they were marked down as a non-attender, and therefore could not be seen for their appointment. They managed to get the hospital to give the individual an emergency appointment. However, there were then issues with the hospital transport taking the patient back home: the journey took three hours, and they did not secure the individual's wheelchair, causing it to move about in the bus, hitting another elderly passenger twice. The caller said that they had made a complaint to the transport provider, Falks, following the incident on 18th November - but had not had any response. They wanted to know what to do to press this further. HWH informed the caller that they could contact PALS, but the caller said they had little confidence in PALS dealing with the complaint. HWH then discussed how Pohwer could help with making a formal complaint to the hospital. Also advised the caller to contact Healthwatch Central West London, to give them feedback on Hammersmith hospital and the transport service.

5.3 Signposting Service

During this quarter we recorded a total of 173 enquiries from residents which resulted in us providing information, advice, signposting or referral. 147 of these we would categorise as universal and 26 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	% of total
Signpost to a health or care service	48	28%
Signpost to voluntary sector service	56	32%
To other (CAB, Social services, LBH other)	8	5%
Requesting advice, information & assistance	23	13%
Other Enquiry	38	22%
Total	173	

Most signposted to?	Qty	% of total
Voluntary Sector other (excludes H4All partners)	24	14%
NHS - other	10	6%
Mental Health	2	1%
Hospital	4	2%
Social Services	4	2%
CAB	12	7%

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	13
AVMA	2
Total	15

7. ENGAGEMENT

7.1. Overview of engagement activity

During the current reporting period, our engagement team (including our volunteer community ambassadors) attended 16 community events and activities. This resulted in us directly engaging with 264 members of the public through surveys, signposting residents to other services and awareness raising.

Between October to December we attended the Assembly for Older People, Hillingdon Carers Health MOT Day, Christmas Jumper Day at Hillingdon Sports and Leisure Complex and Hillingdon Carers AGM. We also participated in Hillingdon CCG's Heathrow villages support week which was aimed at engaging with residents of the Heathrow villages who are under threat of the third runway.

7.2. Highlights

Hillingdon CCG dermatology service review

In the previous quarter it was reported that Hillingdon CCG were undertaking a review of local dermatology services and asked for our help to engage with dermatology patients at

The Hillingdon and Mount Vernon Hospitals and the community clinics. During a 6 week period of engagement we collected almost 100 responses from patients currently accessing these services. The feedback gathered through our engagement activity will help to inform decisions on how further dermatology services will be delivered.

Macular Society

The Macular Society is a national charity that supports those with macular degeneration, their families and their carers through offering counselling and other services as well as funding research into the group. There is a local group that meets regularly at Uxbridge Library. In November we were invited to speak to a group of 25 attendees and raise awareness of Healthwatch Hillingdon. Many of those who attended the group were unaware of the services of Healthwatch Hillingdon prior to our visit but told they would happily access our services in the future.

Heathrow Villages support week

As part of the My Health Education Programme, we were invited to participate in Hillingdon CCG's Heathrow villages support week. A series of events were held in October to offer information, advice and support to residents in Harmondsworth and Sipson some of whom were under threat of the third runway. Organisations including Kooth, Talking Therapies and P3 Charity, the Third Age Foundation were also present and although attendance was lower than anticipated, as a group, we discussed ways in which we could better engage with residents residing in that part of the borough.

7.3. Events

Event	Attendance	Direct Engagement	Age Category				Communities of Interest
			Under 5s	6 - 21	22 - 65	Over 65	
Health and wellbeing Day (Hillingdon Leisure Centre)	60	15			13	2	General Public
Dermatology engagement (Mountwood Surgery)	N/A	15			12	3	Patients
Dermatology engagement (THH)	N/A	17			17		Patient
Hillingdon Carers AGM	80	30			15	15	General Public
Dermatology engagement (THH)	N/A	25			15	10	Patients
Dermatology engagement (Mount Vernon Hospital)	N/A	30			20	10	Patients
3 x Heathrow villages events (MYHealth Programme)	10	7			7		General Public
Hillingdon Carers – Health MOT Day	35	20			5	15	General Public
Macular society – awareness raising	25	25				25	General Public

Event	Attendance	Direct Engagement	Age Category				Communities of Interest
			Under 5s	6 - 21	22 - 65	Over 65	
Assembly for people with disabilities	90	22			11	11	General Public
Dermatology engagement - Woodlands Surgery	N/A	16			16		Patients
Assembly for older people	100	30				30	General Public
Christmas Jumper Day – Hillingdon Sports & Leisure Centre	35	5			5		General Public
SEN event	60	7			7		General Public
THH Clinical Services Review	N/A	33			27	8	Patients
LBH Care Leavers Conference	60	25		25			General Public
Total		322					

7.4. Social Media

We have continued to see an increase in followers to our Instagram channel. Our followers typically engage with us through comments and likes. Since the last period, we have seen an 11% increase in followers who generally respond positively to any photos we post featuring our volunteers work and posts that raise awareness of health issues such as mental health.

Our twitter engagement has remained steady with little change in the last 6 months. We continue to remain active on Twitter as it is an effective way to share surveys, new stories and events. Our top tweet this quarter referred to International day of the older person which earned us 535 tweet impressions and two retweets.

		Q4 2018/19	Q1 2019/20	Q2 2019/20	Oct	Nov	Dec	Q3 2019/20
Twitter	Followers	1248	1257	1266	1268	1269	1266	1266
	Impressions	11962	12550	10832	4,113	3,703	2,444	10260
	Profile Visits	450	282	1636	142	316	20	478
Facebook	Likes	443	473	494	496	499	498	498
	Post Reach	11504	44602	18833	9540	1902	951	12393
	Post Engagement	445	2449	924	415	61	53	529
Instagram	Followers	344	374	450	476	500	535	535

8. VOLUNTEERING

Volunteers contributed 93 hours of their time to Healthwatch Hillingdon. They participated in engagement activities by staffing stalls at community events, they have undertaken

PLACE Inspections, mystery shopping assignments and have managed our social media channels.

Compared to this time last year we have seen a significant increase in the number of volunteer enquiries, some of which have come via our new website. During the current quarter we have recruited mystery shoppers who will be participating in a mystery shopping project with Hillingdon Public Health as well as a Newsletter Editor.

Brunel University Volunteers Fair

On the 3rd December we attended a volunteer recruitment event at Brunel University. The event coincided with Giving Tuesday and Plant-A-Tree day and was aimed at Brunel Staff and Student volunteers to raise awareness of the many volunteering opportunities available locally. Every year, Brunel university staff are gifted 36 hours a year to volunteer with a charity of their choice and so this event provided with a unique opportunity to recruit volunteers with specialist skills.

9. FINANCIAL STATEMENT

To end of Quarter 3 (2019-2020)

Income	
Funding received from local authority to deliver local Healthwatch statutory activities	39500
Bought forward 2018/2019	95391 *
Additional income	245
Total income	135136 *

Expenditure	
Operational	5100
Staffing	33929
Office	2939
Total expenditure	41969
Surplus to c/f	93167 *

*Provisional, awaiting audited figure. The figure also includes contingencies (£20,000 for office rent and staff redundancies). The carry forward is larger than usual due to the Managing Director, and Signposting and Insight Coordinator vacancies which have now been filled, as of December 2019 and January 2020 respectively.

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 2017-2020. The following table provides a summary of our performance against these targets during Q3 2019.

It is noted that for Q3, both KPI's 1 and 2 have not been met by a short margin. KPI 1 is however on tract to exceed the yearly target, and KPI 2 has already exceed the yearly target.

KPI no.	Description	Relevant Strategic Priority	Quarterly Target 2019-20	Q1			Q2			Q3			Q4			2018-2019 Total	
				2017-2018	2018-2019	2019-2020	2017-2018	2018-2019	2019-2020	2017-2018	2018-2019	2019-2020	2017-2018	2018-2019	2019-2020	Target	YTD Actual
1	Hours contributed by volunteers	SP4	525	540	629	644	504	689	731	363	729	508	564	669		2100	1883
2	People directly engaged	SP1 SP4	330	220	444	720	675	713	345	2027	427	322	440	317		1320	1387
3	New enquiries from the public	SP1 SP5	200	208	243	254	286	267	271	247	215	206	235	194		800	731
4	Referrals to complaints or advocacy services	SP5	N/A*	24	21	21	23	13	14	17	18	15	6	18		-	50
5	Commissioner / provider meetings	SP3 SP4 SP5 SP7	50	62	62	50	70	52	51	52	52	52	49	50		200	153
6	Consumer group meetings / events	SP1 SP7	15	26	19	27	23	18	16	16	14	16	31	17		60	59
7	Statutory reviews of service providers	SP4 SP5	N/A*	-	-	-	-	-	-	-	-	-	-	1			0
8	Non-statutory reviews of service providers	SP4 SP5	N/A*	5	3	1	2	2	3	2	2	1	1	1			5

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