

Contract Monitoring Projects & Activity Qtr 3 (October - December 2019)

1. Website & Social media (data broken down by media type/nr over the quarter)	
a. Number of web visits	5,563
b. Facebook reach	1,106
c. Twitter followers	2,160
d. Instagram followers	80

2. Number of groups HwH is represented on	
a. Total number:	43
Staff	12
Board	28
Representative volunteers	3

3. Service Watch Groups / Stakeholder Panel (Purpose, nr of attendees, composition of attendees, achievements/outcomes/impact)

Following the development of the County Council's new Co-Production Model, approaches to engaging key groups are being explored; we will take account of this in our activity in this area.

Further detail is provided in section 4 (below).

4. Projects (Objectives/aims, Who benefits from the project (e.g. HwH, External organisations, a particular sector of the population), outcomes/potential impact)

Carers' needs and involvement in psychiatric inpatient discharge

Objective

To ensure carers of people being discharged from Hertfordshire Partnership Foundation Trust's mental health inpatient services are involved in the decision making process and are having their own support needs met in line with the Triangle of Care and the Trust's policies, during the service user's transition from inpatient to community setting.

Project Aims

- To co-produce information resources for carers supporting loved ones through inpatient discharge.

Target Population

Carers of mental health patients that have been discharged from a mental health inpatient setting within the last two years.

Activity

- Delivery and facilitation of Advisory Group Session Two (October)
- Planning, delivery and facilitation of Advisory Group Session Three (November)
- Planning, delivery and facilitation of Advisory Group Session Four (December)
- First stage of planning for Advisory Group Session Five (December)
- Working with the advisory group and the Trust to develop the resources intended to support carers when their loved one is first admitted to inpatient services, and when their loved one is discharged into the community (October - December)
- Working with the advisory group and the Trust to review the carers information available on their website (November)
- Working with Carers in Hertfordshire to understand how their Carers' Training can complement our project (November - December)

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- Working with Viewpoint and the Trust to ensure the service user voice is represented in our project (November - December)
- Working with Carers in Hertfordshire to ensure young carers are represented in our project (November-December)
- First stage of planning for the clinicians' focus group (December)

Outcomes/potential Impact

To improve the way carers are communicated with and supported through inpatient discharge.

Annual Health Checks

Objective

To work with Hertfordshire County Council, and the statutory and voluntary sector to co-design and coproduce research that aims to understand the experience and barriers of annual health checks.

Target population

People who are 14 years and above with a learning disability.

Project Aims

- To understand from the patient's perspective, the experience of receiving an annual health check
- To evaluate how patients with learning disabilities are supported to attend, receive and feedback on annual health checks
- To assess the barriers of annual health checks and identify how these could be addressed
- To identify and share good practice relating to annual health checks, communication and support

Activity

- Created a cover letter for service users and a guidance document for their carers/support workers to be distributed with the questionnaire (October)
- Created flyers promoting the questionnaire for distribution and to be inserted with Hertfordshire County Council's survey (November)
- Created a social media plan for the distribution of the questionnaire (October)
- Created an online version of the questionnaire (October)
- Working with stakeholders to organise and plan the distribution/promotion of the questionnaire and promotional materials (October - December)
- Arranged attendance at Learning Disability forums to promote and facilitate completion of the questionnaire (October - November)
- Created presentations for the Learning Disability Forums (November)
- Created and delivered briefings for the Healthwatch Hertfordshire team (October)
- Launched the questionnaire and promotion materials with key stakeholders (November)
- Attended 9 Learning Disability Forums across the county to promote and complete the questionnaire. As part of this, conducted one focus group. (November - December)
- First stage of thematic analysis (December)

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- Stakeholder and communications management (October - December)
- Data entry (November - December)

Outcomes/potential Impact

To improve the experience and uptake of annual health checks for the target population of this work.

Social Prescribing Training Programme for GP Patient Participation Groups

Objective

Following discussion with the social prescribing lead at Herts Valley Clinical Commissioning group (HVCCG), Healthwatch Hertfordshire is creating a social prescribing signposting service that is scalable and replicable across all GP practices within Hertfordshire, starting with a pilot in the west of the county.

Project Aims

- Deliver train the trainer sessions for primary care network link workers

Target population

Hertfordshire residents requiring social support and/or advice.

Activity

- Update and planning meeting with social prescribing lead at Herts Valleys Clinical Commissioning Group (December)
- Review and update of project proposal - model and costing (December)
- Proposal sent to social prescribing lead for agreement (December)
- Review of training programme and materials in light of updated project proposal and model (December)
- Creation of supporting training materials - exercises, facilitation notes, plans (November - December)

Outcomes/potential Impact

To aid the GPs/GP practice by providing a volunteer led triaging, signposting and referral service, thus reducing time and cost currently with GPs.

East of England Strategic Review of the Mount Vernon Cancer Centre

NHS England East of England Specialised Commissioning Team and NHS London are undertaking a review of the Mount Vernon Cancer Centre (run by East and North Hertfordshire NHS Trust at the Hillingdon Trust in north Middlesex).

A key recommendation from the clinical review panel (fully supported by East and North Hertfordshire NHS Trust) was that the leadership, governance, management and strategic development of the specialised oncology service at Mount Vernon Cancer Centre moves to an existing tertiary cancer service provider.

During December, tertiary cancer trusts were invited to submit Expressions of Interest to run Mount Vernon supported by a NHS England Transitional Support Team and East and North Hertfordshire NHS Trust from April 2020. Due diligence would take place during 2020/21 with the new provider taking complete control in April 2021.

Bids were received by the 17th December deadline which were then scored by members of the Programme Board ready for a panel event in January.

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Enter and View visit to St Albans City Hospital

West Hertfordshire Hospitals NHS Trust asked for an Enter and View visit to St Albans Hospital similar to what we did previously, prior to their Care Quality Commission inspection in early 2020 to collect patient experience. This took place on 5th December and covered the following areas:

- Minor Injuries Unit
- Beckett Ward
- Blood Testing
- Outpatients

The report has been drafted and has been sent to the Director of Nursing for factual correctness and a written response to the recommendations.

Hertfordshire Veterans Healthcare Access Research

Objective

To engage with veterans and health professionals in Hertfordshire, on behalf of the Hertfordshire Armed Forces Covenant Board (HAFCB), to find out about the health and social care needs of this community so they can be addressed by commissioners and service providers and help highlight potential projects.

Target population

Veterans & healthcare professionals.

Activity

- Presentation of the project aims and proposed methodology to Hertfordshire Armed Forces Covenant Board Health Sub Group (December)
- Working with partners around costing and funding (December)
- First stage of writing the associated project initiation document (December)
- Working with Public Health to arrange a meeting for the purpose of agreeing roles and discussing methodology (December)
- First draft of professional and service user questionnaires (October - December)
- First draft of report structure (December)

Outcomes/potential Impact

To understand and address the healthcare access barriers potentially faced by veterans.

ConnectedLives Gateway Programme (CGL) Advisory Coproduction Group

Objective

To provide advice and guidance on the principles and practice of coproduction.

Aims

- To provide guidance and advice on coproduction and co-design
- To support with the development and programme management of the advisory coproduction group
- To be an independent facilitator of the group

Activity

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- Meetings with partners to plan and design first coproduction meeting (October-November)
- Creation of materials for Training Session (October-November)
- Facilitation of Training session (November)
- Write up from Training Session (December)
- Meeting with partners to discuss outcomes of the Training Session (December)
- Planning and design of second coproduction session (December)

Testing of the new Lasting Power of Attorney Software

The Office of the Public Guardian is developing a new digital service for attorneys and donors to give organisations, such as hospitals, banks and care homes, access to view an online summary of a Lasting Power of Attorney (LPA) to make the process easier for the public.

The Office of the Public Guardian has been working with Hertfordshire Community NHS Trust who recommended Healthwatch Hertfordshire to work with them to gather public feedback on the new system.

We recruited a small group of volunteers, some of whom already had Lasting Power of Attorney in place and some who didn't. We were also joined by two members of staff from Age UK Hertfordshire who lead on this area of work within their organisation.

Over three hour-long sessions on 1st October, volunteers were able to go through the process of proving LPA to an organisation online as if they were doing it in reality, see how easy it was and to make suggestions about what could be improved in either the initial letter of Lasting Power of Attorney confirmation or about the system itself.

Non-Emergency Patient Transport Experience Survey

Objective

To engage with users of non-emergency patient transport and collect views of experiences.

Activity

- Created paper survey to be sent out with the newsletter (November)
- Created online survey (November)
- Launch of survey and promotional materials (December)
- Data entry (December)

West Herts Hospital Patient Involvement

Aim

To work with West Herts Hospital Trust to evaluate current patient involvement models and help to develop a new approach.

Target population

Patients & staff of West Herts Hospital Trust.

Activity - Planning and Proposal Phase

- Two update and reviewing meetings with Deputy Director of Nursing (November - December)
- Review and update of paper (November)

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- New public involvement co-production approach agreed by the Trust and public launch planned (December)

Quality Mark visit - Lister Hospital, Stevenage

The final walk round and feedback visit of the elderly care wards 9a and 9b at the Lister Hospital took place in December. This completes the work by the nursing staff on their year-long 'Quality Mark' quality improvement programme with the Royal College of Psychiatry. The Healthwatch Hertfordshire Quality Manager and a non-executive East and North Herts Trust board member have been supporting them with independent feedback at the beginning and end of this journey.

Volunteering

We held Equality & Diversity Training for volunteers in October and promoted three more sessions for the new year.

We also sent out Season's Greetings cards to thank all of our volunteers for their help in 2019 and wish them well for 2020.

5. Does your service meet the needs of all priority groups? Equalities mapping info. Accessible information standard info

The 2019/20 Equalities spreadsheet mapping projects and groups across the protected characteristics is available on the Healthwatch Hertfordshire shared drive and is being populated.

Further detail is provided in section 6 (below).

6. Holding commissioners and providers to account and partnership working

East and North Herts Clinical Commissioning Group - We have been significantly involved in a serious complaint issue which is being managed by the Commissioning Group on behalf of Health and Care Services. This included Healthwatch providing the independent chairing role for an event about the matter. In addition, we continue to attend the Patient Network Quality Meeting, which includes East & North Herts Clinical Commissioning Group Public Engagement Manager, Director of Nursing and patient representatives from GP Locality Groups. Issues raised included: the closure of a number of GP surgeries, and shortages of some types of medication.

Herts Valleys Clinical Commissioning Group - We held our regular meeting with the Chief Executive and the matters discussed included: the strategic outline case for West Herts Hospitals Trust, Community Services' transfer to Central London Community Health, patient transport, wheelchair services, and the development of Primary Care Networks. We also had a meeting with the Strategic Lead on Social Prescribing to show our plans for implementing the cascade training programme for Social Prescribing volunteers.

Sustainability and Transformation Partnership (STP) - Our significant work during the quarter focused again on the development of a patient focus within the partnership. This included attending an event representing patients to help make the Integrated Care Partnership plans accessible to the wider community, ongoing work on personalised care co-production, and our involvement around Primary and Planned Care. We also had a discussion with the joint CEO about our role in developing effective

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governance for the Partnership. We met with West Essex Clinical Commissioning Group to share perspectives on patient and community involvement.

West Hertfordshire Hospitals Trust - Healthwatch has again had good opportunities to ensure patient voices are being heard in the discussions around transformation at the Trust. We have also been working closely with the Trust to develop a coproduction model (see section 4).

East & North Hertfordshire Hospital Trust - The report on our Enter and View visits to the Trust was published on our website and shared with commissioners in October.

Princess Alexandra Hospital Trust - We held our regular meeting with the Director of Strategy at the Trust. Main areas of discussion included the redevelopment of the hospital, the Care Quality Commission report, and work being put in place to address concerns regarding maternity services. We also discussed patient involvement and the role of Healthwatch, as well as hearing the Trust's perspective on the Integrated Care System.

Hertfordshire Partnership University Foundation Trust (HPFT) - Unfortunately the quarterly meeting with the Trust had to be postponed so key business was addressed on the phone. This included discussion about access to the Children and Adolescent Mental Health Service and carer support when patients are discharged from inpatient mental health services.

Central London Community Healthcare (CLCH) - We were asked to facilitate communication between the Hertfordshire Neurology Network and CLCH as they had a number of concerns following the change of provider from Hertfordshire Community Trust. CLCH had also not responded to invitations to attend a network meeting. CLCH responded immediately and positively following our request.

Hertfordshire Community Trust - We were involved as part of the Stakeholder Panel for the appointment of the Medical Director of the Trust. We also participate in various groups run by the Trust including Equality Delivery System where sub groups are set up including GATE (Gypsies and Travellers Empowerment).

Hertfordshire County Council - Social Care - We met with the Director of Adult Social Care to explore our role in supporting co-production to ensure a patient and service user perspective is taken into account in the development of new models. We had further meetings around co-production including with our commissioners, the Integrated Care lead and the staff supporting the Complex Conditions Group. This enabled us to explore the transition from the Drugs and Alcohol Network to a co-produced model with a wider remit. In addition, we attended the Hertfordshire Equalities Conference organised by the County Council in October.

Healthwatch England - We chair the Regional Network meeting of Healthwatch and held our quarterly meeting in December, which included in-depth discussion around support for the network, given changes to the Healthwatch England approach. As the regional chair, our role was to convey this sensitive discussion and the region's concerns to the national body.

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We had the opportunity to attend the Healthwatch Annual Conference held in October with sessions covering a broad range of items including the Long Term Plan engagement, supporting volunteers and an evaluation of the diverse range of services provided by local Healthwatch.

Our work with Healthwatch England also includes raising issues of national significance so that these can be taken forward in the wider context. An important issue around complaints management, which we have managed with a local MP, is now being taken up by the national body.

We continue to meet with neighbouring Healthwatch and we are working increasingly closely with our neighbours in Healthwatch Essex and met with them to explore joint working.

Hertfordshire and South Midlands Quality Surveillance Group - We continue to attend this meeting, which includes regional health and social care leads in the NHS England, Public Health England, Health and Justice NHS England, NHS Improvement, Clinical Commissioning Groups and the Care Quality Commission.

The national Quality Strategy Team at NHS England-Improvement are doing some work for the National Quality Board to refresh the Shared Commitment to Quality and the national model of quality surveillance. The Herts & South Midlands group were asked to provide insights on managing quality surveillance to help develop the new model.

University of Hertfordshire - Building on regular involvement with the university and the associated National Institute for Health Research Applied Research Collaboration (ARC) East of England, we have been asked to join the Regional Board of the ARC East of England to represent patients and communities. We also attended the launch of the ARC and hosted a session for the ARC operational lead to explain the Healthwatch model both on a regional basis and localised approaches. Opportunities are now happening for Healthwatch involvement in this research work.

Viewpoint - We had our regular meeting with Viewpoint which focused on information sharing and ways we can work together, as well as new approaches at Viewpoint after staffing changes.

Quality - We continue to have regular meetings with quality leads across the Healthcare system including Managers at East and North Herts Clinical Commissioning Group and Herts Valleys Clinical Commissioning Group and the Care Quality Commission - re hospital, care homes and dental services, Herts Care Providers Association through the Strategic Quality Improvement Group to share knowledge.

Quality Managers at East and North Herts Clinical Commissioning Group and Herts Valleys Clinical Commissioning Group - Patient feedback and a summary of concerns on the provider for the musculoskeletal service - Connect Care - in the Herts Valleys area was provided to Herts Valleys Clinical Commissioning group for their Deep Dive on Connect in early December.

NHS England - Dental Services - We received more information from patients who were not able to obtain root canal treatment on the NHS and were being offered only private treatment. This was queried with the Contract Manager - Dental and Optometry, NHS

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England and NHS Improvement for the East of England, who confirmed that they are aware that there is a gap in dental services for restorative treatment and it is something they are working towards addressing in the future.

7. Budgets & Finance (Budget sheets; reasons for any significant under or overspend, as well as highlight any findings/issues which may impact on this contract)



Management
Accounts - 31.12.201