

Contract Monitoring Projects & Activity Qtr 3 (October - December 2021)

1. Website & Social media (data broken down by media type/nr over the quarter)

a. Number of web visits	3,887
b. Facebook reach	974
c. Twitter followers	2,348

2. Number of groups HwH is represented on

a. Total number:	65*
Staff	31
Board	32
Representative volunteers	9

***NB the figures will no longer add up as we have 8 full representatives on 1 group (Difference will be 7)**

3. Projects (Objectives/aims, Who benefits from the project (e.g. HwH, External organisations, a particular sector of the population), outcomes/potential impact) including groups where we have an ongoing leadership role**Making Local Healthcare Equal for All**Objective

- To understand how Black, Asian and Arab Hertfordshire residents view and experience, local healthcare services.

Project aims

- A better understanding of the healthcare experiences and perceptions of Black and Asian communities, in order to inform services and commissioning.
- Evidence relating to Black and Asian experiences of healthcare and how this might differ from the general population, to support the improvement of services.
- The opportunity to grow trust, confidence and engagement with Black and Asian communities to help communication and engagement work better.
- To help inform the equalities workstream of the Integrated Care System (ICS).

Target population

- Black, Asian and Arab adults living in Hertfordshire, who both use or do not use local NHS healthcare.

Activity

- Liaised with core stakeholders to discuss the project and request their support (October)
- Mapped stakeholders and created final list (October-December)
- Updated Project Initiation Document (October)
- Finalised survey questions (October)
- Worked with core stakeholders to gather feedback on the methodology, survey, and supporting communications (October)
- Reviewed and updated the methodology, survey and communications in response to stakeholder feedback (October)
- Prepared and sent surveys to professional translation service, for translation into nine different languages (October)
- Worked with professional translation service to assure translation quality (October)
- Attended NHS England and Improvement webinar on health inequalities and data (October)

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- Produced and finalised launch materials: social media, website article, external newsletter articles, stakeholder emails and flyers (October/November)
- Produced and presented internal briefing to team (October)
- Presentation to Council for Voluntary Services in Broxbourne and East Hertfordshire to introduce the project, before formal launch (October)
- Presented at East and North Hertfordshire Health and Wellbeing Partnership meeting to introduce the project, before launching (October)
- Presented at Broxbourne Coronavirus Community Partnership meeting to introduce the project (October)
- Contacted local community groups, community and faith leaders, voluntary sector organisations, NHS partners, district councils, county council, MPs to introduce the project (November)
- Reviewed and analysed local NHS policies on equality and diversity (October-December)
- Drafted interview questions for the NHS (October)
- Meeting with North Hertfordshire Diversity and Culture Group to discuss working together on the project (November)
- Preparation and uploading of nine translations to online survey (November)
- Contacted NHS Chief Executives and Directors of Nursing to introduce the work (November)
- Liaised with NHS representatives to organise 1:1 interviews (November-December)
- Meeting with Head of Equality, Diversity and Inclusion at Herts Community NHS Trust to discuss the project (November)
- Presented at Hertfordshire County Council Black, Asian & Minority Ethnic Scrutiny Topic Group (November)
- Meeting with Dacorum Borough Council to discuss the project (November)
- Attended iCane Foundation event (November)
- Meeting with iCane Foundation to discuss the project and explore working together (November)
- Drafted focus group and 1:1 interview questions (November)
- Reviewed and updated interview questions for the NHS (November)
- Meeting with One Vision to discuss the project and working together (November)
- Created, finalised and scheduled social media comms for the period (November)
- Attended Healthy Stevenage Partnership meeting to promote and discuss the project (December)
- Meeting with community member for advice and support on the focus groups and 1:1 interview questions (December)
- Meeting with The Redeemed Christian Church of God to discuss the project and how we can work together (December)
- Liaised with community groups about them supporting in facilitating focus groups and 1:1 interviews (December)
- Conducted survey analysis Nov-Dec (December)
- Internal meetings with research team to review findings (December)
- Meeting with Watford Football Club to discuss working together to promote their Shape Up event and our project (December)
- Meeting with North Hertfordshire Diversity and Culture Group to discuss recruiting participants and facilitating focus groups (December)
- Attended Black, Asian & Minority Ethnic Network meeting (December)
- Created, finalised and scheduled social media comms for the period (December)

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- Meeting with One Vision to discuss their support in recruiting and facilitating 1:1 discussions and focus groups (December)
- Meeting with Overcome Outreach to discuss the work and how we could work together (December)
- Meeting with Public Health to discuss NHS policies and the Herts County Council Black, Asian & Minority Ethnic strategy to inform our NHS questions (December)
- Meeting with Hertfordshire County Council to share learning from the projects with Black and Asian communities (December)
- Finalised interview questions for the NHS (December)

Black, Asian, Minority Ethnic (BAME) and COVID-19 Working Group Project**Objective**

- To work in collaboration with the University of Hertfordshire, Public Health Behavioural Change Unit, and other partners to increase confidence in the COVID-19 vaccine within ethnically diverse communities.

Project aims

- To work collaboratively to understand why vaccine confidence may be low in some ethnically diverse communities, with a particular focus on why parents and carers may not want their children to receive the vaccine.
- To work collaboratively to understand how vaccine confidence can be increased in ethnically diverse populations.
- To develop and pilot an intervention tool aimed at increasing vaccine confidence in ethnically diverse communities.
- To develop and publish a paper on vaccine confidence and how best to engage with ethnically diverse groups, based on Healthwatch Hertfordshire's previous stakeholder consultations.

Target population

- The pilot will be targeted at Black African and Black Caribbean communities in Watford.
- If the pilot is successful, the target population for the intervention tools will expand to all ethnically diverse groups in the county.

Activity

- Updated the literature review of stakeholder activity summary document (October-November)
- Meeting to discuss the initial protocol and target population (October)
- Reviewed and contributed to the draft protocol (November)
- Meetings to update the protocol and discuss plans for engagement (November-December)

Digitalisation of Services (Scoping)**Objective**

- To understand Hertfordshire residents' experiences and expectations of digital care services.

Aims

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- To explore Hertfordshire residents' experiences and expectations of accessing primary care services through digital means.
- To explore local medical professionals' experiences and expectations of accessing primary care services through digital means.

Target population

- All Hertfordshire residents who use local healthcare services, regardless of whether they have accessed digital services or not.

Activity

- Project scoping and background research (December)
- Draft Project Initiation Document created (December)

Carers' Needs and Involvement in Psychiatric Inpatient Discharge**Objective**

- To ensure Carers of people being discharged from Hertfordshire Partnership University NHS Foundation Trust (HPFT) mental health services are involved in the decision-making process and 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 settings.

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

- Discussions with the Trust to plan how the Action Plan will be monitored and when hard copies of the information resources will be available (November-December)
- Agreement with the Trust to assign accountability to the relevant members of staff and for quarterly monitoring reports to be produced and shared with Carer Council and Healthwatch Hertfordshire (December)
- Discussions with the Trust to arrange attendance at the next Carer Council meeting (December)

Staying Connected Programme - Hear Me Now**Objective/Project aims**

- To evaluate the potential impact and outcomes achieved through the utilisation of a digital health care app (Hear Me Now) to improve health outcomes for people with learning disabilities and improve independence.

Target population

- Children and young people with learning disabilities

Activity

- Contacted council and voluntary sector partners for support in recruiting participants (October-November)

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- Produced communications: social media and flyer (October-November)
- Produced presentation slides for the Introduction Session (November)
- Held an Introduction Session with a participant (November)
- Collated and analysed questionnaire feedback (October-November)
- Produced presentation slides for the Evaluation Sessions (November)
- Held two separate Evaluation Sessions with participants (November)
- Collated and analysed feedback from the Evaluation Sessions (November)
- Meeting with Hertfordshire County Council to discuss participant feedback (November)
- Meeting with Hertfordshire County Council to discuss themes and the report structure (December)
- Produced first draft of the report (December)
- Internal meeting to review and create a second draft of the report (December)

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 London). The aim is to organise services in ways that provide the best modern care for patients, including access to research trials and new technology and treatments, from good quality buildings and facilities.

There is no news as to whether the Expression of Interest for the new cancer hospital based on the Watford campus in the latest round of the New Hospitals Programme has been successful. The target date of October 2022 is extremely high risk and is unlikely to be achieved.

Focus has been on gathering patient feedback on accessing radiotherapy and the benefits of a networked model to inform the criteria for the future radiotherapy option.

A Mount Vernon Cancer Centre Review Programme Board page has been opened on FutureNHS, which we have been given access to. This workspace is for the members of the Strategic Review Programme Board to collaborate and review information arising from the review and in the development of the re-provision options.

We have continued to promote the events and the interactive website via Twitter and news articles.

The Patient Reference Group, which has been set up to review the NHS England & Improvement patient engagement activity and feedback, has been meeting regularly and provided feedback to the Programme Board.

Bi-weekly 'Comms' meetings take place with NHS England & Improvement, and key stakeholders including Healthwatch Hertfordshire, in addition to the Programme Board meetings.

Drug and alcohol services for Veterans (Scoping)

Objective/project aims (In process)

Target population

- Veterans living in Hertfordshire

Activity

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- Research into veterans' experiences of drugs and alcohol, and the issues with national and local drug and alcohol services (November)
- Produced high level literature review (November)
- Internal meetings to discuss the research findings and engagement approach (December)
- Organised meeting with Director of Public Health to discuss the proposal (December)

Communications Activity

- Review of branding and language in response to launch of new Healthwatch England branding - report produced detailing decisions and actions
- Review of internal communication to representative volunteers - templates produced and internal meetings to agree way forward
- Review of newsletter purpose and style - production of report, internal meetings for decision and agreement of actions
- Review of social media platforms includes creation of master spreadsheet of stakeholders' social handles, creation of 'always on content' and meetings with other local Healthwatch and Healthwatch England on their approach to paid Facebook ads.
- Creation of 'always on content' for social media
- Production and distribution of the Christmas/Winter Newsletter
- Liaison with Herts County Council Communications Team re Health Scrutiny submission on 15th October
- Initial liaison with University of Herts re media release about Stevenage playcentre project
- Supporting local charities, Healthwatch England initiatives, Hertfordshire County Council and NHS/social care organisations via social media
- Attended Integrated Care System Comms meetings
- Healthwatch England Workplace monitoring
- Responded to various advertising requests

Website Articles

- 'Concerns about dental care at a record high'
- 'Working together to improve GP access'
- 'New winter wellbeing guide for Hertfordshire'
- 'Ask your GP to become veteran friendly'
- 'NHS Dentistry: Healthwatch England co-signed letter with British Dental Association to Chancellor of Exchequer'
- 'NHS sets plan to improve GP access'
- 'Healthwatch Hertfordshire welcomes five new trustees'
- 'What do I do if I'm unwell over the Christmas period' (with supporting Christmas/office closure social media)
- 'Plans to accelerate Covid-19 booster programme'
- 'What is Adult Social Care'
- 'Bereavement advice and support in Hertfordshire'
- 'Feeling the effects of Long Covid?'

Enter and View visits

These are currently on hold due to the pandemic and the restrictions on face to face activity and visiting in general.

Volunteering

We continued our bi-monthly newsletter communications with the volunteers throughout the period, which included updates on previously advertised projects and invitations to get involved with new ones.

We also held the penultimate Equality & Diversity Training session in October with very good attendance online via Zoom. Additionally, we prepared two new 'Volunteer Stories' which have now been displayed on our website.

4. Holding commissioners and providers to account and partnership working

Please note, as would be expected, meetings continued to take place via Zoom or MS Teams during the quarter and there was a focus on the pressures faced by the NHS and Social Care in the period and the impacts on patient care. The meetings allow an important opportunity to raise issues from our research and signposting and the NHS and Herts County Council have been very receptive to feedback and how their services can be improved. The section also highlights approaches focusing on equalities and patient and community involvement.

Demands on services remain a theme discussed at all meetings and our role is to ensure that demand management reflects patient needs and safety.

The emergence of the Omicron variant during the quarter and how services were reacting to its impacts was, unsurprisingly, a significant element of more recent meetings. The focus of the organisations changed accordingly.

Hertfordshire and West Essex Integrated Care System - Although our meeting with the Chair and Chief Executive did not fall within this quarter, the Chair and the Director of Transformation & Integration presented to the Healthwatch Hertfordshire Board meeting in November and covered challenges faced by the System, and the plans for governance for the Integrated Care Board.

As mentioned last time, there have been significant opportunities to be involved with the Integrated Care System around primary care and equalities and diversity. Both these areas have been accelerated in the last quarter. This includes Healthwatch chairing a meeting between patients, GPs, and System staff across the region to understand the challenges of, and explore solutions to, improving access to primary care. We have also had further meetings with the Director of Primary Care and our colleagues in Healthwatch Essex to develop a model of effective patient engagement across primary care - a project which also involves the Patients Association.

We have been heavily involved with the Integrated Care System Inequalities workstream and presented again at their meeting in December and are now part of the Workstream group. This involvement complements the work on ethnically diverse communities highlighted in section 3. We additionally had regular meetings with the Programme Manager - Integrated Care, and met with the Head of Community Resilience to explore the development of the Voluntary, Community, Social, Faith and Enterprise (VCSFE) sector alliance, under the auspices of the Integrated Care System.

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South and West Herts Health and Care Partnership - Increasingly during the quarter we have become more heavily involved with the work of the Partnership. This includes presenting on co-production and patient and community involvement to the South and West Herts Health and Care Partnership Communications and Engagement Group, and attending the Board Meeting of the Partnership which ratified a commitment to co-productive approaches. We also attend the Quality and Clinical Group of the Partnership to help encourage a patient perspective in the development of quality and governance processes.

East and North Herts Health and Care Partnership Board - We are members of the Integrated Partnership Board, lead on patient participation, and regularly attend monthly Board meetings. We have worked with partners across the system to develop a model of effective patient involvement across the area including the community assembly chaired by Healthwatch Hertfordshire. During the last quarter we have been developing the programme for the coming year. We are also involved with the Board's group looking at health inequalities to complement the data around Population Health Management, with findings from our research and engagement with ethnically diverse communities.

Joint meeting Herts Valleys Clinical Commissioning Group and East and North Herts Clinical Commissioning Group - We held our third joint meeting with the Chairs and Managing Directors of the Clinical Commissioning Groups. The meeting focused on shared concerns across the county and included demands on the system generally. The meeting focused on primary care, including the issue of access. We also raised dentistry as a significant area of concern, particularly in relation to urgent dental care needs.

Herts Valleys Clinical Commissioning Group - As previously mentioned, we have instituted monthly meetings at the request of the Managing Director of the Clinical Commissioning Group to look at important issues, pressures and challenges, and service performance from a patient and commissioning perspective. Issues covered in recent meetings include access to vaccination, service pressures and communication around primary care.

East and North Herts Clinical Commissioning Group - We have regular meetings with the Associate Director - Quality Improvement at the Clinical Commissioning Group. The meeting enables their use of Healthwatch information and research to help assess provider performance. It has also covered issues such as access to vaccination for housebound people, access to GP services, and GP practice website quality.

East and North Hertfordshire Hospitals Trust - During the quarter we had our regular meetings with the Chair and Chief Executive. The meeting provided updates on demands on Accident and Emergency services and on the Trust generally including current numbers of patients with COVID-19. The pressures on services and challenges being able to discharge recovered patients were seen as significant concerns. The new variant is impacting on the amount of elective work that can be undertaken. This was the last meeting with the then Chief Executive who thanked Healthwatch for our role in ensuring patient voices were heard.

We also held our regular meeting with the Director of Nursing which enabled us to raise issues from our signposting and research work including: arrangements in place for 'Do Not Attempt Resuscitation' orders; communication with ward staff; and management of waiting times for patients in ambulances.

West Hertfordshire Hospitals Trust - At our meeting with the Chair and Chief Executive we covered the significant demands on services, the success of the virtual hospital approach and

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the situation about the redevelopment of the Trust. Following discussions at Scrutiny we discussed a structured approach to patient involvement. At our regular meeting with the Director of Nursing, the challenges for the Trust of increased demand on services were again explored. This included both a higher number of cases and higher complexity of needs. Patients who've had long waits are being assessed and 'harm-reviewed', and 'well-waiting' approaches are in place. Concerns about young people with mental health challenges were also covered.

We have additionally continued our involvement in Trust Development forum and our joint chairing of the Trust's Co-production Board. The Co-production Board held an extraordinary meeting to explore the effectiveness of the co-production model after 15 months of operation. Co-production was also a theme at the Trust Board meeting where the approach was welcomed and particularly appreciated by the Non-Executive Directors.

Hertfordshire Partnership University Foundation Trust (HPFT) - Our regular meeting with the Trust Board members was postponed because of the response to the Omicron variant. However, a meeting with the new Chief Executive did take place where she emphasised her commitment to the Trust further involving service users and carers, and looked forward to working with Healthwatch to hear feedback through us.

We held our regular meeting with the Director of Nursing which focused on the concerning level of demand on services with increases both in the number of people needing help and their acuity. Particular concerns discussed included access to Child & Adolescent Mental Health Services and experiences of eating disorder services. We held a separate meeting with the Deputy Director for Service Delivery to review progress on the actions following our co-production work around support for carers, and also covered the enhanced role of carers in quality improvement at the Trust.

Hertfordshire Community Trust - During the quarter we held our regular meetings with the Chair & Chief Executive, and the Director of Nursing. Items covered included demand on the Trust and the challenges of delivering services for children and young people, including the added demands for services as a result of the pandemic and lockdowns. There are issues which are likely to require new models of service provision between partners. The meeting with the Director of Nursing mainly looked at service delivery and the vaccination programme, which has been a major focus. Although the booster programme was demanding, the difficult circumstances surrounding vaccination of 12-15-year-olds meant that this was an even greater challenge.

Connect Health - We held the second of our regular meetings with the provider to explore signposting issues and service developments; this included access to services and delays in call handling, which are being addressed. Connect Health reported on service changes including improvements to physiotherapy services.

Hertfordshire County Council (HCC) - Social Care - We held our meeting with senior managers and the new Executive Member for Adult Social Care and Health in November. This covered: the formal request to the leader of the Council for Healthwatch Hertfordshire to be able to speak at Herts County Council Panels, the Care Quality Commission document 'The state of health care and adult social care in England 2020/21', homecare provider performance, and vaccination. It also provided an opportunity for us to raise some issues that concern Board members, and we will revisit these to determine our specific concerns.

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Our regular meeting with the Director for Health Integration covered a number of strategic issues including the issue of vaccination of care home staff (we were interviewed by Look East about this issue), staff retention, demands on services including 'winter pressures', and the need to ensure support is in place for carers at a very challenging time. We remain involved with the Connected Lives Gateway Programme where a new model of access to Adult Care Services is being co-produced.

Hertfordshire County Council (HCC) - Scrutiny - During the quarter we presented the Scrutiny Topic Groups which looked at GP Access and the Black, Asian & Minority Ethnic recovery respectively. We also held the regular meeting between our Chair and the Chairmen of the Scrutiny Committees where Social Care and NHS challenges generally were covered. We also met with Scrutiny staff about our involvement with scrutiny of the Council's Budget.

Hertfordshire County Council (HCC) - Public Health - Our meeting with the Director of Public Health and the Executive Member focused on the pandemic and the response, and the likely impact over the winter period. We also covered vaccination and ethnically diverse populations. Other areas covered included Population Health Management and how we align with this, and potential work researching concerns around veterans and substance misuse.

Herts Pharmaceutical Needs Assessment - We met with the consultants facilitating this year's assessment, particularly in terms of how we could promote awareness of the assessment.

Healthwatch England - We chair the Regional Network meeting of Healthwatch and held the regional meeting virtually in November. This meeting covered patient representation on divisional meetings of hospital trusts, links with the Mental Health Safety Improvement Network, and plans for a regional conference.

We also met with Healthwatch Essex to explore opportunities to work together with the Integrated Care System.

Links with Health Research and Universities

In addition to our project work with the University of Hertfordshire, we are members of the Advisory Board of The National Institute for Health Research (NIHR)'s Public Health Intervention Responsive Studies Team (PHIRST) in the central region, and attended the meeting in this quarter. Also, under the Institute are the Applied Research Collaborations (ARCs) where we are Board members in the Eastern Region. This quarter we were able to review the research work overseen by the programme.

Local Councils and Voluntary and Community Sector partners- As mentioned previously, our relationship with Voluntary and Community Sector partners and District Councils has been further enhanced with partnership opportunities over the last year. A recent example of this is the Stevenage Equalities Commission; we met with the Commission Chair in the quarter to explore further opportunities to work together. The Broxbourne Borough Council Scrutiny Committee also invited us to their November meeting to discuss our role and explore health issues of local concern.

We have been collaborating with the CDA (Community Development Action) Herts, where we are working together on addressing inequalities, and we are also part of the Covid Recovery Advisory Group.

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Our work to build partnerships in the quarter has also included meetings with:

- Broxbourne and East Herts Council for Voluntary Service
- Carers in Herts
- Stevenage South Primary Care Network
- West Essex Clinical Commissioning Group Equalities Lead

Further, we have continued to be in contact with Age UK regarding our shared premises and our moves to new office spaces.

As in the previous quarter, we have had requests to meet with patient groups who wish to raise the importance of retaining strong patient involvement when the changes to NHS structures reach fruition.

Care Quality Commission (CQC) - We had two requests for feedback from inspectors for homecare providers in the period. We also completed the two surveys on their new inspection framework focussing on:

- “I statements” - this is the starting point for their assessment and is a first step towards regulating through the eyes of the public.
- “Quality statements” - these will replace the existing “Key lines of enquiries”.

East of England Ambulance Service Trust (EEAST) - We have completed a partnership survey for the Trust covering how we currently engage with them and how this could be improved. The Trust is currently developing a Partnership Strategy and the survey findings will help inform their future vision for partnership working.

Princess Alexandra NHS Trust - We were asked by the Trust to review their letter that they were sending out to their ‘long waiters’ for elective surgery.

Representation

Strategic Quality Improvement Group for care homes and home care - We have moved to co-opted member and as such we have been asked to advise how best to hear the resident voice.

Non-Emergency Patient Transport (NEPTS) to London Hospitals - We have been approached by DHL to provide feedback on the transport contract along with other local Healthwatch in North Central London.

Holding to Account Log

We continue to maintain a Holding to Account Log and Changes to Local Delivery Monitoring Log and have regular ‘holding to account’ reviews of the latest concerns and information and feedback from signposting and surveys. There is also a separate COVID-19 Vaccine log.

As before, many of the themes echo the key themes that Healthwatch England is monitoring such as access to GPs, access to dentistry, and long waits for surgery.

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



Summary
Management Account

22.02.2022



HwH-04

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