

Contract Monitoring Projects & Activity Qtr 3 (October - December 2020)

1. Website & Social media (data broken down by media type/nr over the quarter)	
a. Number of web visits	3,486
b. Facebook reach	1,114
c. Twitter followers	2,254
d. Instagram followers	154

2. Number of groups HwH is represented on	
a. Total number:	50*
Staff	21
Board	30
Representative volunteers	6
*This total will no longer add up as we have 8 full representatives on 1 group (the 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
<p><u>Covid-19 Patient Experience: Learning From Hertfordshire</u></p> <p><u>Objective</u></p> <ul style="list-style-type: none"> To understand patient and public experiences of changes made to health and social care services in response to the Covid-19 pandemic. <p><u>Project aims</u></p> <ul style="list-style-type: none"> To investigate the public's experiences of health and social care services within Hertfordshire during the pandemic To better understand how the pandemic has affected people's mental health and those shielding in particular To assess the quality of communication and information from the Government and local health and social care services To share what the public told us to help inform and build back better health and social care services locally <p><u>Target population</u></p> <ul style="list-style-type: none"> General population People with mental health conditions/concerns Clinically extremely vulnerable groups <p><u>Activity</u></p> <ul style="list-style-type: none"> Produced summary document detailing data relating to the learning disability community for holding to account purposes (Oct) Launch preparation: creation of email signature for staff/website banner/website article/social media posts/press release/radio questions and answer sheet/prep of potential radio guests (Oct) Board sign off of the full report (Oct) Finalised cut down version of the report (Oct) Report launch: distribution of report to stakeholders (Oct) Report launch: liaising with radio stations for potential item (Oct) Publication of report on our website (Oct) and promotion of report via social media channels (Oct - Nov)

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- Collation of partner responses to the report (Oct -Nov)
- Presented report to Community Reassurance Cell (Nov)

Digital Exclusion Case Studies: Covid-19 Patient Experience**Objective**

- To understand the reasons behind digital exclusion as well as how being digitally excluded has affected people's experiences during the pandemic.

Project aims

- To better understand the barriers that people experience to digital exclusion and the context surrounding/reasons behind digital exclusion.
- To understand how being digitally excluded has affected experiences during the Covid-19 pandemic.
- To assess how digitally excluded people have found information and advice during the Covid-19 pandemic.

Target population

- People who are digitally excluded

Activity

- Created final draft of the report (Oct)
- Called each participant to introduce new lead for the project and update them on when they would receive the report for comment (Oct)
- Printed and posted participants the draft report for comment (Oct)
- Called participants to collect feedback (Oct)
- Launch preparation: Created website and newsletter articles (Nov)
- Created comms - press release/social media posts/website banner/email signature (Dec)
- Board sign off of the report (Dec)
- Launched the report (Dec)
- Emailed stakeholders the report (Dec)
- Publicised report on website and via social media (Dec)

GP Website Project

At a Patient Advisory Board (East of England Cancer Alliance) meeting in April 2020 concerns were raised with regard to accessible and available advice for cancer patients, who are currently undergoing cancer treatment, whose treatment may be suspended, and for those patients who would normally consult their GP if they were worried about particular symptoms relating to cancer. Healthwatch Central Bedfordshire carried out a survey on their local GP websites to investigate current information available to patients and invited other local Healthwatch in the region to do the same.

A report of the survey work carried out and conclusions has been published and shared with both Hertfordshire Clinical Commissioning Groups, who have provided responses and actions to the recommendations.

The report has been shared with stakeholders and promoted through the media. The report was featured by the Bishop's Stortford Independent.

Contract Monitoring Projects & Activity Qtr 3 (October - December 2020)**Youth Connexions Hertfordshire Partnership Survey****Objectives**

- To understand how Covid-19 has affected the physical and mental health of children and young people with learning disabilities and/or learning difficulties (LDD), and to learn about their experiences of healthcare services during this time.

Project aims

- To evidence how Covid-19 has affected the mental and physical health of children and young people with learning disabilities and/or learning difficulties
- To identify what support would help improve the mental and physical health of children and young people with learning disabilities and/or learning difficulties
- To learn about their experiences of healthcare services during Covid-19 and what could be improved

Target population

- Children and young people aged 11-24 years old with learning disabilities and/or learning difficulties

Activity

- Scoped and discussed what topics and themes to address (Oct - Nov)
- Reviewed previous surveys to identify key themes (Oct)
- Determined methodology, aims and target audience (Nov)
- Drafted questions for the survey (Dec)
- Created an easy read version of the survey (Dec)
- Presented draft questions to Youth Connexions Hertfordshire (Dec)
- Scoped the launch and comms (Dec)

Hertfordshire Veterans Healthcare Access Research**Objective**

To understand the healthcare needs and priorities of the veteran community in Hertfordshire and better understand how the Armed Forces Covenant is being upheld in the county.

Project aims

- To establish the healthcare needs of the Armed Forces community in Hertfordshire by carrying out an online survey and focus group, and identify the healthcare priorities for this group
- To compare any issues with access to healthcare services for this group with those of the civilian population
- To make practical recommendations to the Hertfordshire Armed Forces Covenant Board and Health Sub Group to allow them to identify potential projects going forward to be addressed by service providers and commissioners

Target population

- Veterans and healthcare professionals

Activity

- Analysis of focus group and 1:1 interviews (Oct)
- 3 x handover meetings - 2 internal and 1 external (Oct)

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- Met with Hertfordshire County Council partners to share findings from focus group and agree aims and membership of the workshop session (Oct)
- Liaising with participants and stakeholders to recruit to workshop session (Nov -Dec)
- Drafted session outline, Powerpoint slides and content and facilitator notes (Oct-Nov)
- Met with Hertfordshire County Council to discuss slides, content and session outline (Nov)
- Created information sheet (Nov)
- Distributed information sheet and session outline (Nov)
- Scheduling and conducting pre-meetings with NHS organisations (Nov- Dec)
- Liaising with and preparing speakers for the workshop session (Dec)
- Facilitated workshop session (Dec)
- Scheduling and organising post-meetings with NHS organisations (Dec)
- Comms to all stakeholders (Dec)
- Produced notes of the workshop session (Dec)
- Report planning (Dec)
- Meeting with Hertfordshire County Council to share notes of the workshop session and timescales around the report (Dec)
- First draft of report produced (Dec)

Outcomes/potential impact

To inform service providers and commissioners of the healthcare experiences, needs and priorities of veterans in order to improve services.

West Herts Hospitals Trust Coproduction**Aim**

To work with West Herts Hospitals Trust to evaluate current patient involvement models.

Target population

Patients & staff of West Herts Hospital Trust

Activity

- Planning meetings with partners for coproduction board meeting (Oct)
- Chairing and facilitation of coproduction board meeting (Oct)
- Debrief (Oct)
- Planning meetings with partners for third meeting (Oct- Dec)
- Reviewed the project initiation documents submitted after first meeting for agreement (Nov)
- Handover meetings and emails for each project (Nov-Dec)
- Developing materials for meeting in January - agenda, session outline (Nov)

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 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 settings.

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- 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

- Session planning meetings (Oct -Dec)
- Production of draft session outline and aims (Oct)
- Review of discharge resource and welcome resource in light of Covid-19 (Nov)
- Liaising with the Trust for resource appendix and session aims (Oct-Dec)
- Produced and sent final session outline and comms for group (Nov)
- Produced facilitator notes (Nov)
- Facilitated December session (Dec)
- Produced notes and actions from the meeting (Dec)
- Poll for next meeting date sent to group (Dec)
- Liaising with the Trust re actions that came out of the meeting (Dec)
- Liaising with group members re actions that came out of the meeting (Dec)

Outcomes/potential impact

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

Using data to improve health: is the public engaged?**Objective**

- To assist the University of Cambridge to find out what the public thinks about data and how data can be used to improve health.

Project aims

- To understand what people think about how data could be used to improve health
- To identify what people think about the sharing and use of data
- To evidence expectations and concerns about data sharing.

Target population

- Residents from Hertfordshire, particularly Stevenage

Activity

- Produced website article for recruitment (Oct)
- Produced related comms: social media posts, flyer, and newsletter article for recruitment purposes (Oct - Nov)
- Liaised with potential participants to introduce the topic and explain the format (Oct - Nov)
- Scheduled focus group and 1:1 telephone interviews (Oct - Nov)
- Distributed consent forms and information sheets to participants (Nov)
- Assisted facilitation of the online focus group (Nov)
- Recorded themes from focus group (Nov)

Contract Monitoring Projects & Activity Qtr 3 (October - December 2020)**Mystery Shop of Connect Health Musculoskeletal Service PhysioLine in West Hertfordshire**

To support quality improvement and enhanced patient experience in this service following poor signposting feedback and complaints to Herts Valleys Clinical Commissioning Group.

Meetings have resumed with Connect Health and Herts Valleys Clinical Commissioning Group at the request of Connect Health to see how the project could be taken forward. Enter and View visits could no longer take place but the proposed mystery shop of the PhysioLine service could.

Four scenarios were written by Connect Health for our volunteers to use - two testing the clinical side and two testing the admin side of the PhysioLine service. Our volunteers were added to the clinical and administrative lists as this is a GP referral only service. The clinical scenarios involved a shoulder and knee injury; the administrative scenarios covered registration and rebooking an appointment.

The mystery shopping was carried out by four Healthwatch Hertfordshire Enter and View volunteers and was completed in the first two weeks of November.

There is only one Connect Clinic open currently due to the pandemic (Wolsey House Clinic in Hemel Hempstead). A short survey devised by Healthwatch Hertfordshire covering the whole patient pathway was given out to patients by the Connect Health welcome hosts that greet patients during November and scanned in to be emailed to Healthwatch Hertfordshire.

The report of the mystery shop and survey is currently being drafted.

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). 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.

NHS England/Improvement carried out a programme of virtual events for patient, public and staff to help design future Mount Vernon Cancer Services during October and November. Their website on the Review is also being redesigned to be more interactive to capture public feedback.

A Patient Reference Group was set up in December to review the feedback and evidence received to ensure that patient views have been taken into account when developing the options. Local Healthwatch involved were asked to nominate patient representatives proportionate to the percentage of Mount Vernon patients from their area.

The group met in December prior to the Programme Board meeting and a short video of their discussions was presented at the Programme Board meeting to the stakeholders. This featured 3 of our representatives.

At that meeting of the Programme Board, the following was covered:

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- Considered the views and feedback of patients, carers and patient representatives, staff, and each Integrated Care System within the area served.
- Considered the commissioning of a new single site in conjunction with improved local access to services (e.g. chemotherapy, radiotherapy).
- Discussed particular areas of concern around cancer outcomes and health inequalities.

Redesign and Transfer of Healthwatch Hertfordshire Website

We are currently in the process of transferring our website to the Healthwatch England template and provider. This is due to: a preference for the format (which makes showcasing our work easier and more accessible), reduced running costs, and consistency of approach across the Local Healthwatch Network. Significant staff resource has been used to deliver this project, including: redrafting and reformatting pre-existing pages, assessing the continued relevance of current website content, as well as maintaining an inventory of documents and links to enable effective transfer to the new site.

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 regular newsletter communication with volunteers, including invitations for them to take part in some of the above-mentioned projects and updates on projects they participated in earlier in the year.

4. Holding commissioners and providers to account and partnership working

Please note, as would be expected, many meetings took place via Zoom or MS Teams during the quarter and unsurprisingly there was a focus on both the impact of the pandemic, its impact and future planning and service resumption following the first wave. We have used the term meetings - these were all virtual during this period. The meetings also allow an important opportunity to raise issues from our research and signposting and the NHS and Hertfordshire County Council have been very receptive to feedback on how their services can be improved.

Hertfordshire and West Essex Integrated Care System - We met with the Chair and Chief Executive of the Integrated Care System. Issues covered included balancing the pressures of Covid-19 and other priorities, pressure on staff, the importance of mental health and wellbeing and the challenges of inequalities and disadvantage. The importance of Healthwatch as a key participant in the Integrated Care System from a patient perspective was emphasised by their Chair.

Herts Valleys Clinical Commissioning Group - We 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 included particular Covid-19 pressures on West Herts Hospitals

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Trust, the performance of Connect and the positive findings of our work mystery shopping the provider, and how Healthwatch can play a key role in facilitating patient involvement in service design post the pandemic.

East and North Herts Clinical Commissioning Group - We held our first meeting with the new Managing Director of the Clinical Commissioning Group. Issues considered included: the move to the Integrated Care Partnership and System, new hospital development, pressures on staffing including staff in primary care, and the challenges of mental health and long term conditions (e.g. respiratory and diabetes). We also discussed effective partnership work to ensure the patient perspective is heard and our meeting was followed with the first of regular meetings with the new Acting Associate Director - Quality Improvement at the Clinical Commissioning Group. This meeting included how they will use Healthwatch information and research to help assess provider performance.

East and North Herts Integrated Care Partnership Board - Following our invitation by the Development Director of the East and North Hertfordshire Integrated Care Partnership to become members of the new Integrated Partnership Board and lead on patient participation, we have attended Board meetings regularly. We have also started our work with other patient organisations to develop a model of effective patient involvement across the area.

West Hertfordshire Hospitals Trust - During the quarter we had meetings with both the Chair & Chief Executive and the Director of Nursing. As well as raising issues from signposting we discussed the importance of messages around services, learning from the first wave, the challenges of patients with serious mental health conditions. We also covered issues of equality and the impact of Covid-19 on staff health and wellbeing. The new hospital was discussed and we have also been involved with the work of the reference group to help ensure there is an open and supportive process for patients to be heard.

The Trust was very keen to continue our co-production work with them despite the current challenges, and the Board held its second meeting in October to determine key projects for co-producing service improvements within the Trust. More detail is provided in section 3.

East and North Herts Hospital Trust - During the quarter we had our regular meeting with the Chair & Chief Executive. This meeting explored the first vaccinations which had just started at the Trust, and the ongoing demands of Covid-19 alongside looking to provide elective and urgent care. The Trust described its determined approach to reinstate surgery, and the pressures on staff health and wellbeing. Learning from the first wave as covered elsewhere in this section was also discussed in addition to the best ways of us working with the Trust after changes to their staff roles.

Princess Alexandra Hospital NHS Trust - Our meeting with the Chief Executive and Director of Strategy covered similar ground to our meetings with other Acute Trusts including: learning from the first wave, pressures on staff, and the greater acuity of patients attending the Trust. We also discussed the Trust's rebalancing of face to face and virtual treatment which at the time had significantly shifted back to face to face.

We also explored our involvement in planning for the new hospital. As key stakeholders, we, and our colleagues from Healthwatch Essex, attend the groups looking at redevelopment to ensure that the patient perspective is heard.

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Herts Partnership University Foundation Trust (HPFT) - Our regular meeting with the Chief Executive and Director of Quality and Safety was also attended by the Managing Director of the West Strategic Business Unit, to provide an in-depth response to our survey results and issues raised through signposting. An action plan to address these points was also provided by the Trust.

The meeting covered the challenge of people's mental health declining during the pandemic, changes in pathways and eligibility for services. We also discussed the Trust's work with Change, Grow, Live, Spectrum to revisit the protocol for patients who have mental health and misuse challenges. Additionally, we were involved in the workshop looking at patient issues around these services. As a result of the pressures on mental health services we have had regular contact with the Director of Service Delivery and Safety.

Hertfordshire Community Trust - We held our first meeting with the new Chair and new Chief Executive. This included opportunities to discuss their strategic direction, including opportunities for service modernisation and work with Acute Trusts. We also discussed how the Trust and Healthwatch Hertfordshire can work effectively together to ensure the patient voice is heard. The Trust also outlined its role on vaccination across Herts, Bedfordshire, Luton, and Milton Keynes.

Central London Community Healthcare NHS Trust - Unfortunately, service pressures meant that the Trust needed to postpone the regular meeting at short notice.

Mental Health and Learning Disabilities Integrated Care Partnership - opportunities for greater involvement with the Partnership were discussed during the quarter.

Hertfordshire County Council (HCC) - Social Care - Our regular meeting with the Executive Member and the Director of Social Care covered the interface between health and care, winter planning, the challenge of enabling a sustainable care home sector, as well as starting to look at the Healthwatch Hertfordshire contract in the future. This meeting complemented our session with the Assistant Director for Health Integration which included: learning from the first wave of Covid-19, the importance of the Voluntary and Community Sector and Herts Care Providers Association during the first wave, and the difficult balance between the quality of life for care home residents and the best ways of protecting people.

Hertfordshire County Council (HCC) - Children and Young People - Our meeting with the Executive Member and Director of Children's services concentrated on the impacts of the pandemic on children and young people. This included looking at the mental health of children and young people. We also focused on the impact of the pandemic on young carers and Children Looked After, in addition to the challenges of safeguarding during lockdown and the reduction in immunisation of young children in recent months.

Hertfordshire County Council (HCC) - Public Health - postponed in this quarter because of Covid-19 pressures

Herts Urgent Care - The Chair of Herts Urgent Care attended our November Board Meeting. Issues explored included: how 111 services had worked during the pandemic, plans for 111

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First, Clinical Assessment, access to emergency dentistry, and the impact of the pandemic on people's mental health.

The County's Community Reassurance Cell (CRC) Reference Group and work with District Councils - Our survey work has helped to strengthen our relationships with new partners. The Chair of the County's Community Reassurance Cell (CRC) invited us to speak at the Community Reassurance Cell Reference Group meeting on the findings of the Covid-19 surveys and report, following a similar invitation in the previous quarter to speak at the Leadership Group.

Covid-19 - We have maintained a Covid-19 Holding to Account Log and Changes to Local Delivery Monitoring Log, which we regularly update and review.

Healthwatch England - We chair the Regional Network meeting of Healthwatch and held the regional meeting virtually in October. This meeting covered: access to dentistry, visual impairment support, the Citizen's Senate, digital exclusion, and opportunities for partnership working.

In addition to regional meetings, we offered informal advice and support to Healthwatch Essex, Healthwatch Luton and to the new Chief Executive of Healthwatch Bedford Borough. We also discussed patient access to primary care in Royston with Healthwatch Cambridgeshire and Peterborough.

Voluntary and Community Sector partners - We have again had enhanced partnership working with voluntary and community sector and provider organisations both strategically and operationally because of responses to Covid-19 (for example West Herts Hospitals Trust co-production work).

We have also been in contact with AgeUK in terms of our shared premises and short- and long-term ways of working.

West Herts College - We were contacted by West Herts College to discuss opportunities for involving young people in our work and how the College can promote Healthwatch.

National Institute for Health Research (NIHR) Applied Research Consortium (ARC) East of England and Public Health Intervention Responsive Studies Teams (PHIRST) - We attended the Board meeting of the Consortium where we represent Healthwatch in the region, and we have also been nominated and accepted to the opportunity to be part of the Core Advisory Board for the new National Institute for Health Research Central Public Health Intervention Responsive Studies Team group.

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

Covid-19 to Reset - We continue to maintain a 'Covid-19 to Reset' 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. A separate Covid-19 Vaccine log has also been added.

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Access to dental appointments has continued to be a key area of concern, but fortnightly meetings with NHS England/Improvement East of England, Local Dental Network leads and local Healthwatch has meant that any issues have been fed back quickly.

Concerns have also been escalated to Healthwatch England who called on the government for action to address widespread issues with access to NHS dental care following an unprecedented surge in concerns. This was supported by the British Dental Association.

We also met with the Leader of East Herts Council to discuss dental issues.

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