

Contract Monitoring Projects & Activity Qtr 1 (April - June 2021)

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

a. Number of web visits	35,238
b. Facebook reach	729
c. Twitter followers	2,318
d. Instagram followers	184

2. Number of groups HwH is represented on

a. Total number:	54*
Staff	24
Board	31
Representative volunteers	8

***NB: the figures will no longer add up as we have 10 full representatives on 1 group (Difference will be 9)**

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**Covid-19 Vaccination Engagement Surveys**Objective

- To understand public experiences of receiving the Covid-19 vaccine and/or public attitudes towards receiving the Covid-19 vaccine when offered.

Project aims

- To identify areas of good practice in the vaccine rollout in Hertfordshire from members of the public who have already received the vaccine.
- To identify areas of improvement for the vaccine rollout in Hertfordshire.
- To investigate public attitudes towards receiving the Covid-19 vaccine to understand why people may want to receive or refuse the vaccine.
- 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 communications around the vaccine and the rollout programme.

Target population

- General population.
- People who have not yet received their Covid-19 vaccine.
- People who have already received their Covid-19 vaccine.

Activity

- Early analysis of the survey results based on data collected in March/April (April)
- Internal meeting to discuss results and agree communication with stakeholders (April)
- Produced and distributed analysis from the March/April findings to relevant stakeholders (April)
- Internal meetings to discuss gaps in the data/respondent demographics and options to address these gaps (April)
- Production of social media plan and scheduling of comms (April)
- Presentation to the ethnic minorities inequalities vaccine group on findings from early analysis (May)
- Interim report two created and distributed to partners and stakeholders (May)
- Full analysis of both surveys following the closing of the surveys (May)
- Key themes identified and reviewed (May)
- Scoping of report content and structure (May)

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- First draft of the report produced (June)
- Review and editing of first draft (June)

Research into experiences of people from ethnically diverse communities

- Literature Review and defining research focus (April)
- Review and edits of Project Initiation Document (April)
- Round One 1:1 discussions with stakeholders (April)
- Round Two 1:1 discussions with stakeholders (April)
- Produced report summarising findings from 1:1 discussions (April/May)
- Meeting with Watford Borough Council to share findings from stage one of stakeholder engagement and vaccine survey results (April)
- Meeting with Three Rivers District Council to share findings from stage one of stakeholder engagement and vaccine survey results (April)
- Meeting with University of Hertfordshire to share first stage of findings (May)
- Communication and preparation for stakeholder consultation event (April/May)
- Facilitated stakeholder consultation event (May)
- Produced report summarising themes from the event (May)
- Report shared with event attendees for comment (May)
- Meeting with University of Hertfordshire to share second stage of findings and discuss next steps (May)
- Meeting with East and North Hertfordshire NHS Trust to share findings to support Black & Minority Ethnic bowel cancer project (May)
- Meeting with representative from the Realist Evaluation of Integrated Services to support Recovery of Hospitalised and Non-Hospitalised COVID-19 patients (REAL-COVID) research project, to discuss Healthwatch Hertfordshire involvement and support (May)
- Introductory meeting - Covid Recovery Black & Minority Ethnic Development Officers with Community Development Action Hertfordshire (May)
- Further scoping of project and creation of project proposal (May/June)
- Meeting with University of Hertfordshire and Public Health Behavioural Change Unit to discuss collaboration and potential ways to take the work forward (June)
- Internal presentation on project proposal and creation of further content (June)
- Meeting with Integrated Care System Inequalities to discuss and present project proposal (June)

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 Subgroup to allow them to identify potential projects going forward to be addressed by service providers and commissioners.

Contract Monitoring Projects & Activity Qtr 1 (April - June 2021)**Target population**

- Veterans and healthcare professionals.

Activity

- Presentation on the report and findings to the Veterans and Social Prescribing Group (May)
- Created a website article on Armed Forces Day 2021 to showcase what our work has achieved so far (June)
- Created social media posts and a social media schedule to promote Armed Forces Day 2021 and our website article (June)

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.

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

- Meetings with Hertfordshire Partnership University NHS Foundation Trust to update and finalise the report and action plan (April)
- Meetings with the Trust to plan and prepare for the April celebration event (April)
- Creation of materials and comms for the celebration event (April)
- Recruited and invited stakeholders and Trust clinicians to the April celebration event (April)
- Distribution of the final agenda, resources, report and action plan to attendees (April)
- Facilitation/Chairing of the celebration event (April)
- Updated the report and action plan based on feedback from the celebration event (May)
- Internal meeting to discuss next steps and monitoring (May)
- Sent the updated report and action plan to the Trust for review and sign off (May)
- Report and action plan signed off by the Trust (June)
- Sent report and action plan to our Board for review and sign off (June)
- Updated report and action plan based on feedback from our Board (June)

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

- To evaluate the potential impact and outcomes achieved through the utilisation of a digital healthcare 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.

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Activity

- Created and finalised task instructions and questionnaires for focus group sessions (April)
- Created task instructions and questionnaires into easy read (April)
- Meeting with Hertfordshire County Council and their Website Team to discuss creating easy read webforms and questionnaires (April)
- Provided easy read photo symbols for the webforms and questionnaires (May)
- Meeting with Hertfordshire County Council to review webforms and questionnaires (June)
- Finalised webforms and questionnaires (June)
- Created and finalised timescales for launching the focus groups (June)

Staying Connected Programme - scoping work within the Integrated Care System's Children and Young People Strategy

- Meeting with strategy lead and representative from Staying Connected Programme to discuss initial requirements (May)
- Meeting with strategy lead and public health consultant to start scoping work (May)
- National literature review, project mapping and areas of focus produced based on themes identified (June)

Building a Health and Wellbeing Research Partnership with Children and their Families living in Deprived Neighbourhoods in Stevenage

Objective/project aims

- To build a sustainable multi-agency research partnership between regional and local statutory and community organisations who support vulnerable children and their families in Stevenage.
- To engage and listen to the health and wellbeing experiences and priorities of children and their families living in the most deprived neighbourhoods of Bedwell and Bandle Hill wards in Stevenage, which rank within the lowest two fifths of lower-layer super output areas according to the indices of multiple deprivation.
- To involve children and their families to co-design innovative and appropriate ways to talk about their health and wellbeing experiences and priorities.
- To create awareness and understanding among children and their families in Stevenage about opportunities related to participation and involvement in health and social care research.

Target population

- Children and their families living in deprived neighbourhoods in Stevenage.

Activity

- Participated in the recording of a film to showcase our involvement in this project (April)
- Meeting with University of Hertfordshire and Stevenage Playcentre to review the film and feedback (April)
- Attended the steering group meeting and participated in the evaluation focus group (April)

Experiences of dentistry in Hertfordshire during the Covid-19 pandemic

Objective/project aims

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- To understand public experiences of dentistry in Hertfordshire during the Covid-19 pandemic, particularly since June 2020 when dental services could resume normal practice.

Target population

- General population.

Activity

- Created survey questions (April)
- Sent survey questions to NHS England for review and feedback (April)
- Updated and finalised the survey questions based on feedback received (April)
- Created a website article to promote the survey (May)
- Created social media posts and a social media plan to promote the survey (May)
- Launched the dental survey (May)
- Closed survey (June)
- Carried out survey analysis (June)
- Pulled together key findings (June)

Annual Report 2020/21

- Internal meetings to discuss and agree layout content, key themes and messages as well as actions and timescales across the team (April)
- Finalised approach and key projects for inclusion (April)
- Production schedule and team communications created and distributed (April)
- Production of draft content by the team (May)
- Liaised with health and social care partners for quotes/contributions to the report (April/May)
- Review and editing of draft content and production of first draft report (May-June)
- Final version of report produced (June)
- Communications activity and schedule agreed and produced (June)
- Report reviewed and signed off by Chief Executive, Chair, and Board (June)
- Publishing and distribution of annual report (June)

West Herts Hospitals Trust Co-production Board

Aim

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

Target population

Patients & staff of West Herts Hospitals Trust.

Activity

- Preparation for Co-production Board meeting (April)
- Co-production Board Meeting (May)
- Operational meeting between Healthwatch Hertfordshire and the Trust x2 (June)

Meeting with project leads to discuss progress, achievements and learning (June)

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

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best modern care for patients, including access to research trials and new technology and treatments, from good quality buildings and facilities.

Plans for the new Mount Vernon Cancer Centre on the Watford General Hospital site are progressing and NHS England/Improvement has created 11 workstreams on Zoom for patients and the public to get involved with to help develop the plans. These cover a range of topics, such as care closer to home, radiotherapy, transport and access.

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

It was confirmed that both the Lister Hospital in Stevenage and the Luton and Dunstable Hospitals will be put forward for a second networked radiotherapy unit in the public consultation.

Constructive discussions are underway for capital funding for the developments, but public consultation on proposals will not take place until capital funding has been agreed.

We have recruited the final two volunteers to represent East and North Herts at the Mount Vernon Cancer Centre Review Patient Reference Group. This was set up to review: the NHS England/Improvement patient engagement activity, feedback on project plans, and comment on the extent to which the views and ideas of patients have been incorporated into the plans.

This now means we have 10 full representatives on this group, which is the number allocated to us (proportionate to the number of patients from Hertfordshire that attend the Mount Vernon Cancer Centre).

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

Audit of dental practice websites and their NHS entries in Hertfordshire

To audit the dental and NHS websites to evidence whether dental practices are adhering to the NHS England 'Expectations' letter sent January 2021, and to identify any improvements that can be made to the patient experience in accessing NHS dental services.

The report has been drafted and has been shared with NHS England East of England (Dental) and the Herts Local Dental Committee for comment and factual accuracy, and is awaiting a response.

Summary of Dental Enter and View visits and self-audit checklist

The Herts Local Dental Committee Secretary shared the report with the British Dental Association and it was featured in their Local Dental Network publication.

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, as well as other volunteer

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opportunities with partners. At the end of June we sent out a special edition newsletter to invite volunteers to our Annual General Meeting, and to share our newly published Annual Report.

During Volunteers' Week in June, we also sent out 'Thank You' cards to all of our volunteers, which were well-received.

4. Holding commissioners and providers to account and partnership working

Please note, as would be expected, many meetings continued to take 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 planning for service resumption when the latest lockdown is eased. We have used the term meetings - these were virtual during this period. 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.

Hertfordshire and West Essex Integrated Care System - Our regular meeting with the Chair and the Joint Chief Executive Officer Herts & West Essex Integrated Care System & Clinical Commissioning Groups provided an opportunity for the strategic challenges for the Integrated Care System to be discussed, and feedback from ourselves about areas of concerns raised by patients and services users. Items included the changes to the NHS structures and approaches, the organisational and structural actions needed to implement these, current challenges relating to the pandemic, reintroduction of services and vaccination, health and other inequalities, system pressures, and the challenges around mental health, dentistry and access to primary care being experienced.

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 demand pressures at West Herts Hospitals Trust, redevelopment at the Trust, vaccination, and the importance of involving patients in service redesign such as with the Minor Injuries assessment at St Albans. We also met with the Associate Director, Communications and Engagement at the Clinical Commissioning Group to explore the strategic work around patient engagement being developed linked to the South and West Herts Health Care Partnership.

East and North Herts Clinical Commissioning Group - We now have regular meetings with the new Acting Associate Director - Quality Improvement at the Clinical Commissioning Group. The meeting looks at how they use Healthwatch information and research to help assess provider performance. It has also covered important themes raised through signposting such as vaccination and access to GPs. The latter issue was the focus of the most recent meeting reflecting both a significant number of signposting concerns raised by ourselves and the Clinical Commissioning Group's awareness of huge pressures currently on primary care (and other areas such as Accident and Emergency services and HUC). We also had a meeting with the Managing Director of the Clinical Commissioning Group and the Associate Director for Communications and Engagement, which looked at usage of the Urgent Care Centre at the QEII hospital.

East and North Herts Integrated Care Partnership Board - We are members of the new Integrated Partnership Board and 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, which will include the new community

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assembly to be chaired by Healthwatch Hertfordshire (covered below in relation to partner activities). 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.

Mental Health and Learning Disabilities Collaborative - The Collaborative commissioned *Niche Health and Social Care Consulting* to assess the increased demand for mental health and learning disability services; we took part in both the events where Niche fed back findings and started to develop recommendations. Providing the services for high acuity service users, whilst also providing more community and preventative approaches is a significant challenge. We additionally met with the Interim Head of Mental Health and Learning Disability Integrated Care Partnership Development to explore models for effective community engagement for the Collaborative.

East and North Hertfordshire Hospitals Trust - During the quarter we had meetings with both the Chair & Chief Executive, and the Director of Nursing. Our meeting with the Chair and Chief Executive provided updates on vascular surgery, vaccination of Trust staff, and staffing vacancies which are currently low. We also covered how waiting lists are being risk managed (a regular issue we raised with providers), Mount Vernon and satellite radiotherapy, and the Trust's approach to patient engagement.

Our meeting with the Director of Nursing covered the demands on the Trust; they said they are experiencing particularly significant demands in A&E concerning patients with mental health needs. We also covered issues around maternity services and phlebotomy where the Trust was able to outline improvements for parents and patients.

West Hertfordshire Hospitals Trust - At our regular meeting with the Chair and Chief Executive, the Trust echoed the concerns from other providers about demands on A&E services and stated that the increased number of Covid cases will affect capacity for all services. A positive from the pandemic has been the success of the virtual hospital approach providing a good model for the future. We also discussed the challenges of waiting lists at the Trust, particularly the 52 week waits, and raised End of Life Care arrangements at the Trust.

A separate meeting with the Deputy Chief Executive and the Director of Communications at the Trust was held to understand the latest position around hospital redevelopment plans and community engagement. We have continued to attend meetings around redevelopment on a regular basis encouraging effective engagement of communities with the plans.

The Trust remains very keen to continue our co-production work and the Board met in May to further determine key projects for co-producing service improvements within the Trust. More detail is provided in section 3.

Hertfordshire Partnership University Foundation Trust (HPFT) - Our regular meeting with the Trust Board members fell outside this quarter so we have been raising issues by email, phone or through meetings. This includes access to Dialectical Behavioural Therapy, the new protocol for Dual Diagnosis services and the action plans to address the issues raised following our co-production work around support for carers (see section 3).

Hertfordshire Community Trust - During the quarter we had meetings with both the Chair & Chief Executive, and the Director of Nursing. The meetings covered: the impact of the pandemic on children and young people's services (for example speech and language therapy), the plans being implemented to address backlogs, the vaccination role of the Trust across a wide area, and the increase in long covid cases being supported by the Trust. We also had a

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meeting requested by the Medical Director and the Assistant Director of Strategy so we could bring a patient and community perspective to review the guiding principles of the Trust's new clinical strategy.

Hertfordshire County Council (HCC) - Social Care - Our regular meetings with the Director and Executive Member, and with the Assistant Director for Health Integration were not during this quarter but we have monthly meetings with the Volunteer and People Assistance Cell Programme Lead & Head of Community & People Wellbeing, as well as the Head of Community Resilience for the Herts Clinical Commissioning Groups. These meetings allow opportunities to explore the importance of patient/service user involvement across health and social care, provide opportunities to consider approaches to inequalities issues and help to ensure synergies across a range of initiatives aimed at improving feedback from communities.

Hertfordshire County Council (HCC) - Scrutiny - During the quarter we presented at the induction event for the new Health Scrutiny Committee about the role of Healthwatch and how our approach complements the holding to account role of the committee. Healthwatch Board Members were also briefed by the Head of Scrutiny prior to their work alongside the committee scrutinising NHS organisations.

Hertfordshire County Council (HCC) - Public Health - Our meeting with new Executive Member and the Director of Public Health focused on a range of themes such as mental health, outcomes in primary care and vaccination rates. The meeting also provided an opportunity to brief the Executive Member on Healthwatch and he is keen to promote Healthwatch to other councillors particularly at District Council level.

HUC (formerly Hertfordshire Urgent Care) - HUC's role during the pandemic provided the main focus for this meeting, including the changes made to meet the huge demands on 111 services. The meeting also covered how HUC is preparing for what is anticipated to be a difficult winter ahead and the organisation's strategic direction. We additionally discussed access to emergency dentistry. HUC had responded positively to concerns we raised previously, looking to improve services in the light of our feedback.

East of England Ambulance Service - Our Annual Meeting with the Ambulance Trust focused predominantly on the Trust's actions to address the serious issues raised by the Care Quality Commission (CQC) which placed them in special measures. The Acting Chief Executive (and Medical Director) showed a strong commitment to making the changes required and acknowledges the significant challenges that such a shift in culture requires.

Healthwatch England - We chair the Regional Network meeting of Healthwatch and held the regional meeting virtually in May. We had major items on digital exclusion and addressing inequalities for staff within the NHS, as well as how Healthwatch can help as an independent organisation to enable this.

We were also identified by Healthwatch England as an organisation who could provide advice to other Healthwatch about how to select workstreams. Our input has been built into guidance for planning work programmes.

Public Health Intervention Responsive Studies Teams (PHIRST) - We are now members of the Core Advisory Board for the new National Institute for Health Research Central Public Health Intervention Responsive Studies Teams group to represent the Healthwatch network. The group is focused on assessing the effectiveness of programmes of work implemented by local Public Health services.

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Voluntary and Community Sector partners and Local Councils - As mentioned in the last return, our relationship with Voluntary and Community Sector partners and District Councils has been further enhanced with partnership opportunities over the last year. This includes our survey and research work and our co-production work with West Herts Hospitals Trust, where we have helped build the relationship between the voluntary sector and the Trust.

We have also had the opportunity to work closely with the CDA (Community Development Action) Herts, where we are working together on addressing inequalities (see section 3).

We have been engaging with partners to build partnerships, explore their involvement with the planned Community Assembly, hear their perspectives on the impacts of the pandemic on their service users and organisations and their insight into issues around inequalities.

In this quarter, these meetings have included meetings with East Herts District Council and with the Chief Executives of:

- Herts Independent Living Service
- Mind in Mid Herts
- North Herts and Stevenage Council for Voluntary Service
- Garden House Hospice

We also presented to the Hertfordshire Community Leaders Forum in May on our work over the past year to help enhance awareness of our work and research findings. Further, we have continued to be in contact with Age UK regarding our shared premises and short- and long-term ways of working.

Connect - Health Change - Following our work with Connect locally, we have been asked to be speakers on our work with Ethnically Diverse Communities at their next national event '*Cultural Communities and Health Inequalities*' and have been meeting with Connect to help plan this.

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. There is also a separate Covid-19 Vaccine log.

Many of the themes we are hearing about are echoed in the key themes that Healthwatch England is monitoring such as access to GPs, access to dentistry and long waits for surgery.

NHS Dentistry

We continue to meet bi-weekly with NHS England/Improvement Regional dental leads and local Healthwatch, and a similar group has now been set up to meet with the East of England Ambulance Service (bi-monthly).

Quality Accounts

We are no longer providing formal responses to the Quality Accounts produced by our NHS Trusts. We have, however, sent a supporting statement to: the five NHS Trusts operating in Hertfordshire, the Princess Alexandra Hospital, the Royal Free, Isabel Hospice, and Garden House Hospice, for them to include in their accounts.

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)

