

### Contract Monitoring Projects & Activity Qtr 1 (April – June 2022)

1. Website & Social media (data broken down by media type/nr over the quarter)	
a. Number of web visits	3,410
b. Facebook reach	1,870
c. Twitter followers	2,365

2. Number of groups HwH is represented on	
a. Total number:	56
Staff	33
Board	14
Representative volunteers	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

#### Making Local Healthcare Equal for All

##### Objective

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

##### Project aims

- A better understanding of the health 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 and Asian adults living in Hertfordshire, who both use or do not use local NHS healthcare.

##### Activity

- Visited Stevenage Muslim Community Centre to distribute surveys (April)
- Meeting with COVID Recovery Ethnically Diverse Project to discuss local Black and Asian faith and community groups (April)
- Meetings with Black Voice Letchworth to design and scope focus group (April-May)
- Analysis of data and produced key findings (April-May)
- Scoped contents and structure of the report (April-May)
- Analysis of interview data with the NHS (April)
- Internal meeting to review NHS interview data (April)
- Meetings with COVID Recovery Ethnically Diverse Project to hear from service users and carers with Sickle Cell (April-May)
- Created and finalised social media (April)

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- Held presentation in collaboration with Viewpoint to update partners on project progress and key findings so far (May)
- Held virtual focus group in collaboration with Black Voice Letchworth (May)
- Transcribed focus group (May)
- Analysed focus group and produced key findings (May)
- Closed survey (May)
- Created recommendations based on key findings (May-June)
- Internal meeting to review key findings and report structure (June)
- Created first draft of the report (June)
- Internal meetings to review report (June)
- Updated and finalised report (June)
- Sent report to Chief Executive for review and comment (June)

**Care Homes: Visiting Beyond the Pandemic**Objective

- To understand the visiting experience of care home residents and their families, and how the role of the Essential Care Giver ('one visitor' – see 01.04.22 new government guidance) is encouraged across Hertfordshire's care homes.

Aims

- To understand what information is available online for families and friends around visiting and the role of the Essential Care Giver.
- To understand what care homes have done to facilitate visiting and promote the Essential Care Giver role to residents and families.
- To understand the experiences of residents and families during times of restrictions and alternate ramping up and easing off of restrictions.
- To make recommendations to the Strategic Quality Improvement Group that covers residential care, who are made up of providers, commissioners, and service monitoring bodies. These recommendations will be focused on how the Group can ensure that residents receive good quality visits from their family and that the Essential Care Giver role is encouraged and understood by everyone.

Target population

- Care home residents in Hertfordshire residential/nursing care and their families/friends.
- Care home managers/senior staff members.

Activity

- Meeting with Hertfordshire Independent Living Service (HILS) to discuss the project and providing support (April)
- Meeting with Hertfordshire County Council to discuss the project and providing support (April)
- Meeting with Herts Care Providers Association (HCPA) to discuss project and providing support (April)
- Meetings with Healthwatch Leeds and Healthwatch Cambridgeshire to support with scoping (April)

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- Internal meetings to finalise survey questions (April)
- Sent emails to Herts Care Providers Association to distribute to care home managers and staff (April)
- Attended Herts Care Providers Association webinar on care home visiting guidance (April)
- Launched survey (April)
- Created interview questions for residents/loved ones (May)
- Internal meetings to review and finalise interview questions (May)
- Internal meeting to review engagement/response rate (May)
- Re-audit of 50 care home websites (representing the 45 different care home providers and 5 single home providers) following the change in national guidance since the March audit (June)
- Sample of care homes emailed requesting a 30 minute follow up interview (June)
- Interview with a care home manager (June)
- Scoped sending survey packs to care homes (May-June)
- Interviews with relatives of care home residents (June)
- Transcribed interviews (June)
- Created and finalised social media communications (April - June)

**Tackling Ethnic Health Inequalities: Learning from Black and Asian Community Leaders – Public facing report****Objective**

- To produce a public facing report documenting key themes from our engagement with Black and Asian community leaders, focusing on vaccine confidence and best practice in engagement.

**Target population**

- Black and Asian communities living in Hertfordshire

**Activity**

- Internal meetings to review draft report (April)
- Updated report (May)
- Internal meetings to review and finalise report (May-June)
- Created and finalised communications; website article, stakeholder emails, social media (June)
- Report sent to Chief Executive for review and sign off (June)
- Report sent to Board for review and sign off (June)
- Report updated in response to comments from Chief Executive and Board (June)

**NHS Community Nursing****Objective**

- To collaborate with local Healthwatch in the East of England to explore people's experiences of community nursing.



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- Residents of the south and west areas of Hertfordshire.

### Activity

- Meeting with clients to discuss creating a Task and Finish Group to design a coproduction model which we are being commissioned to lead (April)
- Contacted providers, commissioners, patient representatives and community and voluntary groups to participate in the Task and Finish Group (April)
- Meeting with patient representatives to discuss the coproduction model (May)
- Created and distributed agenda, presentation slides and materials for the first Task and Finish Group (May)
- Chaired and led first Task and Finish Group (June)
- Created and distributed minutes and actions from the Task and Finish Group (June)
- Created progress paper and action plan for South and West Hertfordshire Health and Care Partnership Programme Executive (June)
- Presented progress paper and action plan at the Programme Executive meeting (June)
- Created draft coproduction model for the Task and Finish Group meeting in July (June)
- Shared draft coproduction model with the Task and Finish Group for review and comment (June)
- Created and distributed agenda for the July Task and Finish Group meeting (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 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

- Established Scrutiny Subgroup which we will chair to monitor the action plan (April)
- Scrutinised and sent suggestions for improvements on the action plan (May)
- Organised first Scrutiny Subgroup meeting (May)
- Attended Carer Council to discuss plans and next steps for monitoring (June)

### **East of England Strategic Review of the Mount Vernon Cancer Centre**

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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 still has been no word from the Government on how/when they will announce the next new hospital schemes.

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

**Integrated Care System (ICS) Primary Care Workstream**Objective

- To gather lived experience to feed directly into the Integrated Care System Primary Care workstream.

Target population

- All Hertfordshire residents.

Activity

- Meeting with the System's Primary Care Lead and Healthwatch Essex to scope a working model (June)
- Meeting with Healthwatch Essex to scope projects for the next quarter (June)
- Proposed projects for the next quarter and sent to the System's Primary Care Lead for approval (June)

**University of Hertfordshire/Public Health COVID Working Group**Objective

- To work in collaboration with University of Hertfordshire, Public Health, Community Development Action and local councils to understand key concerns with the COVID-19 vaccine for children and young people, and increase vaccine confidence in 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/carers may not want their children to receive the vaccine.
- To work collaboratively to understand how vaccine confidence can be increased in ethnically diverse communities.
- 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.

Target population

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- 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 be expanded to all ethnically diverse groups in the county.

**Activity**

- Meeting with University of Hertfordshire to discuss project progress (April)
- Working group meeting to update on project progress and next steps (April)
- Draft summary of findings sent to the working group for comment (May)

**University of Hertfordshire Care Homes project (AISLA project - Analyse and Improve Spatial Layout of care homes)**

The University of Hertfordshire is developing a web-based application that will help care home facilities managers to assess existing care homes and visualise possible options for retrofitting buildings based on carbon net-zero strategies. The app will analyse existing layouts of care homes, providing a number of performance ratings, suggesting points for improvements. The criteria originate from a combination of therapeutic design elements (from existing literature), net-zero strategies and from users' feedback.

We attended a feedback event on the app with the Chair of the Herts Strategic Quality Improvement Group.

Following the discussion we linked the project lead with Herts Care Providers Association so that they could present directly to care home managers.

The university included us in their press release about the project in May 2022.

**Communications Activity**

- Annual Report – wrote, edited, planned, designed and published 2021/22 Annual Report with supporting social media, public/stakeholder communications and website article
- Wrote and issued first new-look newsletter (hard copy and electronic) to subscribers; also created schedule for next 12 months
- Liaison with North Herts Council and Broxbourne Council re possible articles in their staff and residents' magazines/newsletters
- Created 'Writing for Impact' presentation for team
- Supported research team by reviewing website articles, social media posts and communications with stakeholders
- Created i-Stock images account to purchase Annual Report images
- Helped team update to Healthwatch England's new visual brand guidelines
- Discussions re creating Dual Diagnosis website article about new leaflet
- Headlines email written and distributed to Board and representatives, outlining current key issues
- Ongoing monitoring of social media platforms to promote our key messages and engage with followers
- Continued ongoing reviews of Healthwatch Hertfordshire website and Google Analytics

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- Supported local charities, Healthwatch England initiatives, Hertfordshire County Council and NHS/social care organisations via social media

### Website Articles

- 'Healthwatch Hertfordshire welcomes new NHS structure' (Integrated Care Board)
- 'Your Voice matters – read about the work of your Hertfordshire health and care champion in our Annual Report 2021/22'
- 'Armed Forces Day 2022 – How are services supporting our local veterans?'
- 'What is Monkeypox?' (From Integrated Care System website)
- 'Diabetes Week 2022'
- 'MacMillan Cancer Support – Helping those living with and affected by cancer'
- 'So you're a carer – who looks after you?'
- 'What you've been telling us about local services'
- 'Care Home Visiting Beyond the Pandemic: share your experiences'
- 'Consultation on the Hertfordshire Pharmaceutical Needs Assessment 2022'
- 'Never too young for bowel cancer'
- 'Don't be embarrassed – simple checks save lives'
- 'Creating a world that works for Autistic people'

### Enter and View visits

These are currently on hold awaiting further guidance on how to do this safely.

### Volunteering

We sent out our usual bi-monthly newsletter to volunteers. We also marked Volunteers' Week this June by sending a 'Thank You' card to all our volunteers for their contributions over the year.

## **4. Holding commissioners and providers to account and partnership working**

***Please note, meetings continued to take place virtually during the quarter. 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. This 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.***

**Hertfordshire and West Essex Integrated Care System (ICS)** – Unsurprisingly preparation for the formal takeover of responsibilities by the Integrated Care System has been a significant factor in our meetings during the quarter providing further opportunities to be involved around primary care, patient experience and equalities and diversity. This has included:

- Further meetings with the Director of Primary Care and our colleagues in Healthwatch Essex to start to implement the model of patient engagement across primary care as part of a broader approach to patient and community involvement.



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- Being nominated to be a member of the steering group for the Voluntary, Community, Faith and Social, Enterprise (VCFSE) sector alliance and attending the first meetings of the group. This group provides opportunities for enhancing the role and understanding of the sector and will lead on the new Health Creation Strategy, it will also look to enhance involvement of people from diverse communities and be involved with the NHS Core20PLUS5 approach.
- Holding a meeting with the System's Associate Director- Quality Improvement and Patient Safety to explore the role of Patient Safety Representatives.
- Meeting with Integrated Care System staff to raise concerns from patients about whether they will continue in patient representative roles with the ICS and its constituent parts.

Regarding maternity care feedback, we shared key themes from our 'Making Healthcare for all' research pre- publication with the lead for the Local Maternity Network System (LMNS) which they said was 'incredibly valuable.'

Following this we were contacted by the Deputy Director of Midwifery East and North Herts Trust to discuss how we could work together moving forward.

**South and West Herts Health and Care Partnership (SWHCP)** – Our involvement with the partnership continues to be extensive. This includes our lead role in embedding coproduction across the partnership, including chairing the Task and Finish Group and leading on the implementation of the work (see section 3). We presented at the Programme Executive meeting (Formerly Integrated Care Partnership Directors) of the South & West Herts Health and Care Partnership who endorsed our work so far. We also are members of 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** – We are members of the Partnership Board and lead on patient participation and continue to attend monthly Board meetings. We are collaborating with partners across the system to develop a model of effective patient involvement across the area and held the third meeting of the Community Assembly, which is chaired by Healthwatch Hertfordshire. This included sessions on health and care integration, the Integrated Care System patient engagement strategy, and the promotion of opportunities for patient involvement with workstream priorities. We are also taking part in the Board's group looking at health inequalities to complement the data around Population Health Management, as well as 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 monthly joint meetings with Directors and Managers of both Clinical Commissioning Groups to discuss issues raised with us through signposting and our research. Significant issues, pressures and challenges, and service performance from a patient and commissioning perspective were also discussed. In the quarter issues have included ongoing concerns around access to GP practices, and the variable quality of practices' communication with patients, waiting times for elective care, also in addition to

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specific examples of patient experiences with community gynaecology, ophthalmology, and musculoskeletal services.

**East and North Hertfordshire NHS Trust** – We held our regular meeting with the Director of Nursing which explored the significant and ongoing demand on all services, and the increased acuity of patients attending the Emergency Department. The meeting enabled us to raise issues from our signposting and research work including: lengthening of waiting times for surgery if a patient catches COVID-19, the Trust's approach to the Accessible Information Standard, and the need for further information about complaint handling on the Trust's website. The meeting also briefly touched on plans for proposed opportunities for enhanced patient participation at the Trust.

**West Hertfordshire Teaching Hospitals NHS Trust** – We have also continued our involvement in the Trust Development forum and our joint chairing of the Trust's Coproduction Board. The Coproduction Board meeting in the quarter provided an opportunity for assessing progress on key coproduction projects and receiving a new project to enhance toilet facilities for people with severe and complex disabilities. We also reviewed greater Trust staff involvement in community focussed activities. In the quarter, we met with the Head of Strategy Delivery, LGBT+ Network Chair to discuss our role with the Equality Delivery System (EDS3 rebranded EDS 2022)

**Hertfordshire Partnership University Foundation Trust (HPFT)** – During the period we have had regular contact with the Trust about our coproduced work on improving carer understanding when a family member is in a psychiatric ward and our work on dual diagnosis. At our regular meeting with the Director of Nursing we discussed the situation at Forest House, continued demands on services and issues raised about eating disorder services.

**Hertfordshire Community Trust** – During the quarter we held our regular meeting with the Director of Nursing. This covered demands on services, including those for children and young people, and the Trust's involvement in partnership activities in the Integrated Care System.

**HUC** – The Market Development Manager for HUC met with us to enhance their understanding of Healthwatch activities, patient involvement, and also our work on addressing unequal treatment and cultural sensitivity,

**East of England Ambulance Service Trust (EEAST)** – We had our annual meeting with the Chief Executive of the Trust during the period, which looked in detail at plans for transformation within the service in response to the Care Quality Commission rating. This included issues of culture, staff support, challenging inappropriate behaviour and approaches to improving performance across the region. We also had an introductory meeting with the Head of Chief Executive's Office and Public Affairs to provide a briefing on Healthwatch services locally and issues faced by patients, strategic development at the Trust, and possibilities for addressing cross-NHS challenges such as frailty and falls.

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**Hertfordshire County Council (HCC) – Social Care** - Our regular meeting with the Director for Health Integration covered strategic issues including pressures on services across health and social care, the importance of integration, and the Director's presentation at our forthcoming Annual General Meeting.

**Hertfordshire County Council (HCC) – Public Health** – We met with Public Health's 'BAME Project Manager' to discuss actions being taken following scrutiny last year into support for diverse communities and our work on addressing unequal treatment.

**Hertfordshire County Council Adult Care Coproduction Board** – During the quarter we attended the Hertfordshire County Council Adult Care Coproduction Board. The meeting focused on hearing updates from each of the Coproduction Boards and a presentation from the Director of Adult Care on coproduction within the context of the new healthcare structure. We offered our support in ensuring the Adult Care Coproduction Board links in with other models of coproduction across the Integrated Care System and will be meeting with the Director of Adult Care to discuss this in more detail.

**Healthwatch England** - We chair the Regional Network meeting of Healthwatch and held the regional meeting virtually in May. This meeting included a discussion of Healthwatch services in a changed climate and links with East of England clinical networks.

We also met separately with Healthwatch England to discuss the East of England Citizens' Senate, patient experience issues, and data sharing across the network. We had further meetings with Healthwatch Essex to explore opportunities to work together with the Integrated Care System, and with Healthwatch Cambridgeshire and Peterborough to discuss cross-boundary services and data management. We are part of the group planning the Healthwatch Regional Conference in July.

**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. We attended the meeting in this quarter. Additionally, under the NIHR are the Applied Research Collaborations (ARCs) where we are Board members of the ARC in the Eastern Region. This quarter we have been involved in interviewing candidates for the new Director of the ARC.

**Local Councils and Voluntary and Community Sector partners** – As mentioned previously, our relationship with Voluntary and Community Sector partners and District Councils has continued to develop. In the quarter we met with the Leader of North Herts Council to understand our role and discuss ways in which the council could promote our services. We also met with the Chief Executive of Broxbourne Borough Council to discuss NHS services in the borough and how we can collaborate with the council and the local social housing provider to reach seldom heard residents.

We have been working closely with the CDA (Community Development Action) Herts, where we are working together on addressing inequalities (see section 3); we are also part of the Covid

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Recovery Advisory Group, and the Advisory Group of the Hertfordshire Equalities Council. Our work to build partnerships in the quarter has included working with Hertfordshire Independent Living Service, Herts Mind Network Chief Executive in their role as the Chair of the Integrated Care System Alliance, and the Chief Executive of Hearing Advisory Service to look at opportunities to complement each other's services.

We have additionally had meetings/conversations with patients about their concerns for a potential reduction in opportunities for patient involvement with the move to the Integrated Care System. These concerns have then been raised at forums and meetings covered in this section.

**Community Dental Service Community Interest Company** – This company holds the NHS contract for community dental services in surrounding counties, and was keen to meet with us to discuss working together when the Integrated Care System takes over responsibility for dentistry.

In Hertfordshire they run the community dental service for HMP The Mount Prison and support ex-offenders when they leave prison. Currently ex-offenders have no priority for dental services so this was identified as a potential area for health inequalities as they struggle to access dental treatment.

**NHS England & Improvement** – We received a request to support NHS England & Improvement East of England in a piece of work around Access Improvement in General Practice; we are compiling some feedback for them.

**Quality Accounts** – We have provided short statements to be included in the Quality Accounts for:

- East and North Hertfordshire NHS Trust
- West Hertfordshire Teaching Hospitals NHS Trust
- The Princess Alexandra NHS Trust
- Hertfordshire Community NHS Trust
- Central London Community Healthcare NHS Trust
- Royal Free London NHS Foundation Trust
- Hertfordshire Partnership University NHS Foundation Trust
- East of England Ambulance Service NHS Trust (supporting Healthwatch Suffolk)
- Garden House Hospice Care
- Isabel Hospice

**Holding to Account Log** – We continue to maintain a 'Holding to Account Log and have regular 'holding to account' reviews of the latest concerns and information and feedback from signposting and surveys.

**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)**

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**Management**  
Accounts Qtr 1 - 30.06