


Agenda Item: 06.02	
Healthwatch Telford and Wrekin Board Meeting	
Date of meeting:	13 January 2016
Title:	Chief Officer's Report
Author:	Kate Ballinger
For Information	
Executive Summary:	<ul style="list-style-type: none"> <li>• Engagement</li> <li>• Volunteers</li> <li>• Healthwatch England</li> <li>• Meetings/Projects</li> <li>• Performance to KPI's</li> <li>• Complaints</li> </ul>
Financial Implications:	None specifically
Equality and Diversity:	None specifically
Public Engagement:	None specifically
Legal Impact:	None specifically
Recommendations:	<ul style="list-style-type: none"> <li>• Healthwatch Telford and Wrekin board are recommended to note the contents of this report</li> </ul>
Is there a need to consider inclusion in the Corporate Risk Register?	No



## Operations

### 1. Engagement

Over 2015 we attended 99 events and engaged with 4350 people. I am particularly pleased with these figures as we had considerable capacity issues throughout the summer.

Work is underway to develop an Engagement Strategy and Plan to take us through the next 15 months but we must recognise that this is subject to change as we record and evaluate differently.

### 2. Volunteers

Since the last board meeting, 6 volunteers have been trained in Sit & See techniques and 2 have completed HWTW Induction training.

We have experienced some issues in identifying an umbrella organisation for DBS checks for new volunteers but hope to have resolved these by the time of the board meeting. I will update verbally.

It is essential that we maintain regular contact with our volunteers and have sufficient work to keep them engaged with us. With this in mind, we will be producing a fortnightly newsheet for volunteers and will report on the effectiveness of this at the next board meeting.

### 3. Healthwatch England

Both Dr Kathryn Rake, Chief Officer, and Anna Bradley, Chair, of Healthwatch England have now left the organisation and Susan Robinson and Jane Mordue are in post on an interim basis.

There are some proposed changes to the relationship between Healthwatch England and the Care Quality Commission and I will report on this as information becomes available.

### 4. Meetings/Projects

We are developing better relationships with local provider trusts and other organisations, and now have regular meetings with SaTH, ShropDoc, SSSFT, HWSshops and CQC as well as taking up our statutory seats on the Health and Wellbeing Board, the Quality Surveillance Group and the Primary Care Commissioning Committee.

Through our seat on the Quality Surveillance Group we raised the issue of reporting escalation levels in Paediatric services as these were not identified in the figures used in the health system. This was taken up by NHS England and I am pleased to report that trusts across the West Midlands are now asked to report on their Paediatric services separately - a direct result of our involvement in the Paediatric Stakeholder meetings locally and the QSG.

## NHS Future Fit

There continues to be a lot of noise in the system about the future of A&E. Healthwatch Telford and Wrekin must ensure that the views of residents in Telford & Wrekin are properly represented and are working with both Healthwatch Shropshire and the CHC to gather public opinion without causing

Gill and I attended the Urgent Care Centre workshop at the beginning of December. There was good representation of Telford from our CCG, but again, no patient representatives.

Enabling patients in Telford & Wrekin to attend these meetings must remain a priority for HWTW.

## NHS Community Fit

The work streams sitting below the Community Fit Steering Group are now starting to meet and we offered to act as collation point for details of Voluntary Service Organisations in Telford & Wrekin. There are 5 work streams and we have a seat on each. Mark Boylan will be attending the Mental Health work stream this month but we still need to identify representatives for the others. If anyone is interested, could you contact me to discuss please?

## Better Care Fund

The Programme board is now meeting bi-monthly and is likely to be incorporated into an Integrated Care partnership board this year.

## Discharge Pilot

Despite having been distributing Care at Home leaflets for 6 months, we have not yet been able to talk to anyone about their personal experience of hospital discharge.

We are running a three-month pilot which involves Authorised E&V volunteers visiting wards at PRH to gather signed consent forms so that we can contact people when they get home (wherever that may be). We hope to be able to speak to approx. 10 patients/month which may create one or two opportunities to survey after discharge.

Healthwatch Shropshire will be running an equivalent programme at Royal Shrewsbury Hospital and we are examining ways of ensuring that patient experience is gathered across the trust.

## Commissioned Work

We have been commissioned to complete the Primary Care Needs Assessment by Telford and Wrekin Clinical Commissioning Group. This piece of work involves collecting 2000 survey responses across Telford & Wrekin and will provide opportunity for volunteers to get involved in both surveying and uploading completed surveys.

## 5. Performance

We met with T&W before Christmas to look at how and what we will be expected to report on at contract meetings. While systems are still being developed, I am unable to bring

figures to this board meeting but am confident that a full monitoring report will be available to future meetings.

## 6. Complaints/Compliments

	This Quarter	Year to Date
Compliments	1	1
Complaints	1	1

We received negative feedback from a relative about our unannounced Enter & View visit to Lightmoor View in September. Following an initial meeting with the relative, we escalated this and responded using guidelines laid out in our Complaints Procedure.

After investigation, I am confident that volunteers acted properly during the visit but have identified areas where we can improve. These include:

- **Entry to resident's bedrooms** While we are entitled to enter a private bedroom on invitation, this should be considered an exception rather than standard practice. On all occasions, a clear record should be kept of the reason for entering the room and the person who issued the invitation. If there is any question about the capacity of the resident, advice should be sought from staff and alternative venues for discussion explored.
- **Printed Literature** We have taken advice from The Alzheimer's Society in relation to the appropriateness of our leaflets for dementia services and will carry black and white copies of information leaflets in future. We have also updated our protocols about leaving leaflets during E&V visits and will leave a pack with the provider following an unannounced visit (to enable those not present during the visit to contribute).
- **Dementia Champions** We will ensure that dementia training is included for all Enter & View representatives and that the team on visits to a provider specialising in dementia will include at least one HWTW Dementia Champion.
- **Enter & View Policy** In light of the feedback received, our Enter & View policy is brought back to this meeting for review and update.

Telford & Wrekin Council received an official complaint and have concluded their own investigation.

We received a written compliment about the actions of Healthwatch Telford and Wrekin in facilitating a meeting between relatives and a service provider to address the relatives concerns about the care of their loved one.