HEALTH AND WELLBEING BOARD

27 September 2016

Title:	**Healthwatch Annual Report 2015-2016**
Report of the Healthwatch Board	
Open Report	**For Information only**
Wards Affected: ALL	**Key Decision:** No
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Sponsor: Frances Carroll Chair, Healthwatch, Barking and Dagenham.	

Summary:

This report is for members to review the work of Healthwatch Barking and Dagenham during 2015-2016.

This paper is a summary of the Annual Report of Healthwatch Barking and Dagenham. It outlines the work that has been undertaken by the Healthwatch team during the year and highlights our achievements and challenges. Above all it shows how we interact with the public, capture their opinions and reflect them back to commissioners of both Health and Social Care services.

Recommendation(s)

The Health and Wellbeing Board is recommended to:

1. Consider the report, noting the impact that Healthwatch has had in the last year.

Reason(s)

To bring to the attention of the Board trends in public opinion with regard to health and social care services in Barking and Dagenham. To advise the Board of the impact Healthwatch has had throughout the year.

1 Introduction and Background

1.1 This is the third annual report of Healthwatch Barking and Dagenham. The report sets out the work findings, and recommendations of the team. During the year we have looked at a number of areas including Phlebotomy, Intensive Rehabilitation Service, St Francis Hospice and Access in BHRUT Hospitals.

1.2 We are especially pleased with the outcomes from the Phlebotomy Project. This piece of work was shortlisted for the Healthwatch England National Awards. On the night of the awards Healthwatch Barking and Dagenham was highly commended in the category of "the value we bring to the community".

1.3 All the work undertaken by the Healthwatch team is driven by public opinion or where we have been asked specifically to look at a service as was the case with the Urgent Care Project.

2 Our work

Enter and Views and Project work

2.1 In total we made 26 recommendations in our project reports and 23 were accepted. We completed 9 Enter and View visits. We have looked at both health and social care services.

2.2 The outcome from the Morris Ward Enter & View is one to be proud of. Here we highlighted the difficulties for a patient who, as part of his therapy, had joined a local football team. Due to the ward's shift patterns he was always late for training as he had to wait for a member of staff to escort him. This made difficulties for him with the manager and his team mates. After we brought it to the attention of the ward manager, staff were made available to ensure he was always on time: allowing him the full benefit of the training session.

2.3 Our Enter and View at Park View (a dementia focused care home) also had positive outcomes. The service provider accepted Healthwatch's recommendations and involved residents in tidying the garden and planting flowers. Residents have also been made aware of food choices and the menu has now changed. Furthermore the cleanliness in the unit has been addressed and is regularly monitored by the manager.

2.4 Our Phlebotomy project highlighted the issue of uneven patient distribution which causes a bottle neck in certain locations where the service is provided. This was in part caused by referrers only telling patients about the larger sites and there not being sufficient advertising as to where all the blood testing sites were located. There were two service providers North East London Foundation and Barking Havering Redbridge Hospital Trust (BHRUT).

2.5 BHRUT responded to our recommendations by improvements in marketing and information sharing, a priority system for those fasting, the possibility of service provision in the evening and weekends. They have also improved the patient experience by making guest Wi-Fi available in the waiting area. Likewise the service commissioner has agreed to address public concerns with the service provider.

2.6 We conducted an unannounced visit at Five Elms GP Practice in May 2015 following a trend of consistent negative feedback. An inspection of Five Elms was carried out by the CQC in April 2016, which resulted in the practice being placed in special measures. Further information on the CQC inspection can be found elsewhere on the agenda in the Health and Wellbeing Outcomes Framework Performance Report for Quarter 1 2016/17.

Networks and partnerships

2.7 This year we have worked with Havering and Redbridge Healthwatch on the Urgent Care Project. We worked jointly on some primary research to help Barking Havering Redbridge University Trust (BHRUT) and the 3 local Clinical Commissioning Groups (CCG) to better understand how local people use urgent and emergency care services. All three Healthwatchs spoke to over 1000 people about their views on urgent and emergency care. These views are now being taken into account in the development of the new care model.

2.8 Healthwatch Barking and Dagenham are regularly represented on;

- The Health and Wellbeing Board
- The Children and Maternity Sub Group
- The Learning Disability Partnership
- The Mental Health Sub Group
- The Safeguarding Adults Board
- The Health and Adult Services Select Committee
- The London Healthwatch Group and Healthwatch England

2.9 Healthwatch Barking and Dagenham assisted the local CCG with their public consultation on their commissioning priorities.

Signposting and information giving

2.10 We have assisted or sign posted individuals to a number of services. This year we helped 508 people with a variety of enquiries. The following breakdown describes some of the most common reasons why people contacted us:

- GP Services – 155 (32%)
- Local Hospital Services – 144 (28%)
- Advocacy Services – 57 (11%)
- Mental Health Services – 42 (8%)
- Integrated Health & Social Care Services – 30 (7%)
- Local Residential Care Homes – 26 (5%)
- General Enquiries – 54 (9%)

3 Mandatory Implications

Joint Strategic Needs Assessment

3.1 When developing our annual plan Healthwatch Barking and Dagenham have been mindful of the content and data of the Joint Strategic Needs Assessment (JSNA).

Health and Wellbeing Strategy

3.2 All the topics for the Healthwatch work plan fall within the four themes of the Health and Wellbeing Strategy.

Integration

3.3 Healthwatch Barking and Dagenham are particularly interested in helping to promote joint working between health and social care service. This is reflected in many of the topics chosen for the 2016-2017 workplan including Community Equipment

Financial Implications

3.4 Healthwatch Barking and Dagenham are commissioned by the Local Authority and is funded until March 2017.

(Implications completed by Marie Kearns, Contract Manager for Healthwatch Barking and Dagenham)

Legal implications

3.5 Under the Health and Social Care Act 2012 local Healthwatch organisations have the authority to, and do, undertake announced or unannounced "Enter and View" visits to both health and social care settings.

(Implications completed by: Marie Kearns, Contract Manager for Healthwatch Barking and Dagenham)

Risk Management

3.6 All those undertaking Enter and View visits who are authorised representatives have undertaken specific training and have a DSB clearance.

Patient/Service User Impact

3.7 The Healthwatch programme is designed to reflect the views of the users of health and social care services in Barking and Dagenham. The main annual report highlights the specific impact that the views of service users have had in each area.

4 Non-mandatory Implications

Safeguarding

4.1 All staff and volunteers of the Healthwatch team are given awareness training on Safeguarding issues. A Healthwatch representative sits on the Safeguarding Adults Board.

Customer Impact

4.2 The Healthwatch programme is designed to reflect the views of the users of health and social care services in Barking and Dagenham. The main annual report highlights the specific impact that the views of service users have had in each area.

Contractual Issues

4.3 Healthwatch Barking and Dagenham is commissioned by the Local Authority and is funded until March 2017.

Staffing issues

4.4 Healthwatch Barking and Dagenham have a team of 2 full time equivalent members of staff and 8 volunteers.

Public Background Papers Used in the Preparation of the Report:

None

List of Appendices:

Appendix A Healthwatch Barking and Dagenham Annual Report 2015/2016